



## SSAF REIMBURSEMENT CLAIM FORM

(Please attach all tax invoices in email and lodge with Student Events Office)

<b>CLUB NAME</b>		
<b>EVENT NAME</b>		
<b>EVENT DATE</b>		

SUMMARY OF EXPENSES : (One receipt per line)	RECEIPT TOTAL \$
<b>Total of attached receipt/s</b>	
<b>Total to be reimbursed</b>	

<b>TOTAL REIMBUSED</b> Office use only		
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*This section to be completed by the club member processing reimbursement in case further information is required*

<b>CONTACT NAME:</b>	
<b>CONTACT PHONE:</b>	

*Funds will be paid to the nominated bank account as per club bank form – Please allow 7-10 days for processing via the University's Finance Dept.*

**CHECKLIST.....**

Claim is for an approved budgeted event

All TAX INVOICES/RECEIPTS have been attached to the **email** of this document (efpos receipts are not accepted)

**Club bank account form has been completed for current semester OR**

**Cash reimbursement is required** (Amounts <\$100 only) - email notification will be sent to collect

*“By signing, I verify that the above information is true and accurate”*

**Signed**..... **Date**.....