

Reimbursement Request

Inc. AOO17409G

Name of person seeking reimbursement Date

Phone number: Email:

	<i>Paid to:</i>	<i>Date</i>	<i>For what</i>	<i>a/c reference</i>	<i>Amount</i>	<i>GST incl.</i>
	<i>e.g. Maddens IGA</i>	<i>05/11/2016</i>	<i>Provisions for Founders Nov Coffee meeting</i>		<i>53.07</i>	<i>1.26</i>
	<i>e.g. McKenzie Davey Pharmacy</i>	<i>02/07/2015</i>	<i>2 x 1st Aid kits for Manse & Octopus</i>		<i>68.00</i>	<i>n/a</i>
1						
2						
3						
4						
5						
		Total				

I confirm that the expenditures requested to be reimbursed above were for the approved purposes of U3A Castlemaine. I have attached relevant supporting documentation.

- Small payments may be reimbursed with cash, from the treasurer
- My details for reimbursement (if exceeding \$20) are:

Account name:

Bank:

BSB:

Account number:

Signed: Approved: date: / /
requestor CoM

<i>Date paid</i>	<i>method</i>	<i>Ref:</i>	<i>amount</i>