|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EXPENSE REIMBURSEMENT REQUEST\*** | | | | |
| Date: | |  | | |
| Requested by (pls print): | |  | | |
| Expense description: | |  | | |
| Reimbursement amount: | |  | | |
| **Payee bank details** | | | | |
| BSB: | | |  | |
| Account #: | | |  | |
| Account name: | | |  | |
|  | | | | |
| Signature: | | |  | |
| Receipts attached\* - pls indicate | | | **YES** | **NO\*** |
|  | | |  | |
| **Office use only** | | | | |
| Date received: |  | | | |
| Date paid: |  | | | |
| Amount paid: |  | | | |

***(\*) please note your expense cannot be processed without a***

***legible tax receipt(s)***

**Process instructions**

1. Fill out all sections of the form
2. Attach supporting receipts
3. Forward to the Treasurer as follows:
   1. Send copies of completed form & receipts by email to [treasurer@twra.net](mailto:treasurer@twra.net) or
   2. Put completed form & receipts in an envelope, hand deliver to Treasurer’s residential letter box & send alert email to [treasurer@twra.net](mailto:treasurer@twra.net) or
   3. Hand envelope to the Treasurer at next committee meeting

***(to avoid your envelope being mixed up with other unrelated paperwork, please refrain from passing informally to the Treasurer or other committee members during busy events)***