Staff Reimbursement Claim Form

For Review Panel Members



INSTRUCTIONS

Please	1.	Complete	Sections	A	and	Β.
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- 2. Attach original GST receipts for all items claimed.
- 3. Sign Section C.
- 4. **Return** completed form and attachments to The Administrator, Quality Advancement Unit.

Note...

- * Reimbursement will be made into the same bank account held for payroll purposes.
- * Claims without receipts cannot be reimbursed.

SECTION A: STAFF IDENTIFICATION		
Name: Review: Staff ID Number: (The 6 digit number on the upper right of your staff ID card.)		
SECTION B: EXPENSES BEING CLAIMED		
Items Claimed (Include brief description and/or reason for expenditure)	Receipt Date	Amount
S	ubtotal	\$
Private Car Use for Review Destination & Purpose of Trip (will be reimbursed at the University's standard per/km rate unless agreed otherwise)	Trip Date	Km Run
Tota	al Km	
TOTAL REIMBURS	EMENT	\$
SECTION C: CLAIMANT SIGNATURE	Date:	