****

Invoice No ……………………..

Cheque/transaction No:

…………. ….…………………..

Date ……………………………

**EXPENSES CLAIM FORM**

*Office use only*

**Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Member No**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Postal Address**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Bank details for EFT payment:***

Name of account \_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

BSB *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* Account Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Claim details**

*Please itemise expenses and attach receipts for any purchases*

|  |  |
| --- | --- |
| ***Approved Expense*** | ***Amount claimed*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **TOTAL** | ***$*** |

**NOTE** U3A-ACT Inc. has provision to pay phone and car expenses. However, it is expected that a claim would not be made for routine use. All claims need pre-approval from a delegated member. (Car expenses are paid at *15c/km up to 2 litres, 18c/km over 2 litre; phone calls are paid at 22c for local calls)*

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Delegated person approving these expenses or date of committee meeting at which expenses were approved:***

**Committee meeting date (if appropriate**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authoriser’s Name (Please Print)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authoriser’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Processed by:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit this form to the Treasurer by email: treasurer@u3acanberra.org.au

Alternately you may submit this form to the Office Manager at Hughes or Cook, or deposit into the Treasurer’s drop file in the Hughes office for processing