

## **EXPENSE CLAIM FORM**

**Adopted 19.7.22** 

Ref - 6.3

## REQUEST FOR REIMBURSEMENT

To be completed & signed by the claimant, <u>approved by the ANSW officer coordinating the activity/event</u>; then forwarded to: <u>treasurer@archerynsw.org.au</u>

Travel Claims: Tolls plus first 200 km \$0.60 cents per km, between 200 km & 400 km @ \$0.50cents per km, after 400km @ \$0.30cents per km.

## Tax invoices or receipts must be attached, or the declaration must be signed for missing invoices

NAME:	EMAIL:			
Details (type of expense & purpose,	Tournament / Task / Other	KMs claimed	\$ Amount	Invoice /receipt attached
please specify trip details for mileage claims)				Y / <b>N</b> * / NA
TOTAL			\$	
*Missing invoices/receipts declaration (if applicable)  I declare that I incurred the expenses as part of Archery NSW related activities and was unable to obtain a tax invoice or receipt for these activities. The amount of missing invoices is \$				
Signed: Date:				
Bank Account details for reimbursement. (If payment is sent to a wrong account the money may not be recoverable)				
Account Name:	BSB: <i>-</i>	Account No:_		
Claimant Signature:	Date:			
OR: Donate to ANSW for the purpose of				

## **ASNSW Use Only:**

Print off Proof of payment printed off once completed