



Mahanama College OBA Australia Inc.

EXPENSE REIMBURSEMENT FORM

This form is to be used by members claiming reimbursement from MCOBA Australia for Association-related expenses. Receipts, tax invoices and other relevant documentation must be attached to this form.

Member Full Name	
Membership ID	

Date	Description	Justification/Purpose/Reason for Expense	Rec. Attached Yes/No	Amount Inc. GST
			Total	

Payment Method (Please circle)		
EFT	Account Name	
	BSB No	
	Account Number	
Cheque	Address Cheque to	

Claimant Declaration	
I declare that: 1. The expenses were for MCOBA Australia purposes only. 2. All receipts and tax invoices are attached. 3. This is the only claim I have made, or will make, for these expenses. 4. Payment details provided are correct.	
Claimant's Signature	Date DD / MM / YYYY

Expense Claim Approval			
This claim form can be approved by President/ Vice President / Secretary / Assist. Secretary			
The claimant's declaration is accurate in all aspects and is in accordance with MCOBA Australia Policy.			
Approver's Name	Signature	Date	DD / MM / YYYY

Payment Details			
To be completed by Treasurer / Assist. Treasurer			
I confirm that payment made in full for the above reimbursement.			
Name	Signature	Date	DD / MM / YYYY