

EXPENSE CLAIM

MUST BE RECEIVED NO LATER THAN $Monday 19^{th} July 2021$ (1 MONTH FOLLOWING THE EVENT)

Original GST receipts must be included								
DETAILS OF CLAIMANT				PERSON		PERSONAL	AL or BRIGADE (Please circle)	
FIRST NAME:				MIDDLE INITIAL: LAST NA		LAST NAMI	ME:	
BRIGADE:				MOBILE NUMBER:				
POS	STAL ADDRESS:							
BANK ACCOUNT No.								
EMAIL ADDRESS:								
EVENT: 2021 NORTH SOUTH RCR CHALLENGE – MANFEILD				BUSINESS UNIT: 50400		50400	SUBLEDGER: RRCR21	
MILEAGE CLAIM FOR ACTUAL VEHICLE USED						TOTAL AMOUNT		
Circle Vehicle Type						TOTAL AWIOUNT		
		Kms Travelled	Petrol	Diesel	Petrol Hybrid	Electric		
	Up to 1500cc		57c	56c			\$	
	1501-2000cc		68c	73c	75c		\$	
	2001-3500cc		83c	82c			\$	
	3501 and over		109c	107c			\$	
	65kW – 125kW					75c	\$	
FROM LOCATION:				TO LOCAT	Ι ΓΙΟΝ:	I		
REGISTRATION No:				OWNER:				
MAKE:				MODEL:				
DETAILS:								
DETAILS OF CLAIM – Please include dates and attach itemised GST receipts (The UFBA does not reimburse any alcohol costs)							Amount (incl GST)	
						TOTAL		
I soutify that the source of the district of the source of							OFFICE USE ONLY	
I certify that the expenses claimed above have been incurred by me while on UFBA business and is in accordance with policy and the registration document relevant to the above event. This includes the correct cc rating, all passengers and full details of any vehicle associated with any mileage claim.			I have reviewed the above claim. I approve and authorise payment of the above expenses in accordance with policy. Signed:			th policy.	□ Xero contact checked□ Bank account checked□ Bank account updated with Accounts (if required)	
Signed:			Date:				☐ Adjusted and approved ☐ Signed:	
Dat	e:							