|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **AONA Vic** | | | | | | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
|  | | **Expense form** | | | | | | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
|  | | www.aonavic.com.au | | | | | | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
|  | |  | | |  | |  | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
| Surname: | |  | | |  | |  | | First name: | |  |  |  | |  |  | |  |  |  |  |  |  |  |
| Address: | |  | | |  | |  | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
| Suburb: | |  | | |  | |  | | Postcode: | |  |  |  | |  |  | |  |  |  |  |  |  |  |
| Email address: | |  | | |  | |  | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
| Phone Number: | |  | | |  | |  | | Mobile No: | |  |  |  | |  |  | |  |  |  |  |  |  |  |
|  | |  | | |  | |  | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
|  | |  | | |  | |  | |  | |  |  |  | |  |  | |  |  |  |  |  |  |  |
|  | **Date Expense Incurred** | | **Details of Expense** | **Event/Item this is charged to** | | **Cost on Receipt** | | **Cost being claimed** | | **Cost and currency if not A$** | | | | **Aust dollar Equivalent** | | |  | | | | | | | |
|  |  | |  |  | |  | |  | |  | | | |  | | |  | | | | | | | |
|  |  | |  |  | |  | |  | |  | | | |  | | |  | | | | | | | |
|  |  | |  |  | |  | |  | |  | | | |  | | |  | | | | | | | |
|  |  | |  |  | |  | |  | | **Total** | | | |  | | |  | | | | | | | |

**Payment details:**

Preferred method of payment: cash / **bank transfer**

Bank account name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ bsb: \_\_\_\_\_\_\_\_\_ a/c number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Swift (for international reimbursements): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Instructions: All receipts are to be supplied with the form (either originals or scanned) and emailed to: [heather.machin@unimelb.edu.au](mailto:heather.machin@unimelb.edu.au) . The Treasurer will reimburse within 60 days.

AONAVIC Treasurer:

Paid date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ method: cash/bank transfer

Tracking details (i.e. invoice/transaction or cash ledger number): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Minutes presented/documented in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_