



EXPENSE REIMBURSEMENT REQUEST FORM

Policy number	AKASA-06	Version	V1
Drafted by	Craig Denton	Approved by AKASA on	

Name

Purpose For The Expense
(e.g. attending xxx event)

Date	Description Of Expense	Amount (Tax Invoice Required)
	Total Expenses Incurred For Which Reimbursement Is Sought	
	Less Self Incurred Costs	
	Total Amount To Be Reimbursed By AKASA	

Signature

Position

Date

Bank Details For EFT Payment

Account Name

Account Number

BSB

Bank

This completed form is to be submitted to: treasurer@kartingsa.com.au

Expenses claimed must be supported by a valid Tax Invoice which should be attached to the completed Expense Reimbursement Request Form.

Expenses will be reimbursed in accordance with the AKASA Expense Reimbursement Policy.