Expense Claim Form

Website: u3ainnernorth.org.au
Mail: PO Box 2008, Prospect SA 5082
Email: treasurer@u3ainnernorth.org.au

Name:		**Member No.:**	

Please list expense items:

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

_____ $ _____

Total: **$** _____

Purpose:	

I hereby declare the above expenditure was incurred for U3A Inner North Inc and paid by:

☐ *My personal finances. Please reimburse to:*

BSB _____ *Account No:* _____ *Account Name:* _____

☐ *U3A Inner North Debit Card*

Signed: _____ Date: _____

Please attach all supporting documentation for audit purposes and forward with this form to the U3A Inner North Treasurer via email, post or in person.

Treasurer use only:

Paid by EFT to member Amount: $ _____ Date: _____

Verified U3A Debit Card amount sighted in Operating Account Date: _____