

Name

Position

Address

Note this form **MUST** be accompanied by Approval to Travel (Form 1)

1. Accomodation Expenditure
Must attach Diary & Receipts

	TOTAL
	\$ <input style="width: 50px;" type="text"/>

2. Use of Private Motor Vehicle for Official Business
(attach Form 1 to support claim)

Engine Capacity cc	3000	Engine Capacity	
Total km distance travelled as per Diary	1000	Km travelled	
Official Business Rate	\$0.289	Refer Rates List	

	TOTAL
	\$ <input style="width: 50px;" type="text"/>

3. Official Expenses

3.1 Other Expenses:
Must attach Diary & Receipts

Description	\$ Amount (inc GST)

	TOTAL
	\$ <input style="width: 50px;" type="text"/>

GRAND TOTAL EXPENSES CLAIMED \$

4. Authorisations

I certify that the details shown on the diary are a correct record of my official movements and that the distance travelled was in connection with bona fide official business and was necessary for the economical performance of my duties.

Signature of Claimant	Date

I certify that the claim for reimbursement is reasonable.

5. Authorised Delegated Officer

I authorise payment of this account

Signature of Approving Officer

Position of Approving Officer

Date

Send completed **Form, Diary, Receipts and copy of Rqst for Approval To Travel**
by internal mail to: **USFA Accounts PO Box 362 Cromer NSW 2099**

6. Accounts Use Only

Processed By

Cheque No:

Date Posted

Remarks