Reimbursement Request Form

Date: __________________

Details of incurred expenses:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Amount claimed: ________________

**Deducted from** (Section, name of Technical Chapter, Student Branch or Affinity group's sub account):

________________________________________________________________________

Bank account details to receive the reimbursement (bank transfer):

Account holder's name: ________________________________________________

BSB: ________________________________________________________________

Account Num.: ________________________________________________________

If the expense is to be deducted from the sub-account of a Technical Chapter, Affinity Group, or Student Branch, **TWO** signatures from either of the current Chair, Vice-chair, Treasurer or Secretary of the corresponding Technical Chapter, Affinity Group or Student Branch are required for the Section Treasurer to transfer the reimbursement money.

Signature 1                                                                 |
| Full Name (Position)                                                      |

Signature 2                                                                 |
| Full Name (Position)                                                      |

The completed and signed form, along with the relevant receipts, should be e-mailed to the Section Treasurer at r10auwa-treasurer@listserv.ieee.org.