## Expense reimbursement form



Servicing, repairs, tyres, punctures and batteries

Personal details			
Name		Vehicle registration number	
Company		<b>Driver's address</b> (ma	andatory)
Claim amount			
Total claim amount (	please attach valid tax invoice/ rec	eipts* to this claim)	
Bank account de	stails for electronic funds tran	sfer	
BSB	Account number	Bank	Branch
Full name(s) of acc	ount holder(s)		
Reason for reimb	pursement		
Declaration			
lease vehicle			onal expenses incurred by me against the nominated horise for same to be included within my lease in
Signature		Name	Date
Email		Please forward valid tax invoice Fleet Manager or Relationship I	es / receipts* with this completed form to your Manager.
Please retain a copy	of your receipt(s). Visit the driver	support page on our website <b>www.s</b> /	gfleet.com to download additional forms.

The words "Tax invoice", supplier's name, supplier's ABN number, type and quantity of product purchased, date of issue, GST component and total

\*Failure to produce a valid Tax Invoice / Receipt may lead to rejection of this claim.

A valid tax invoice / receipt must contain the following details:

amount including GST.