

# Salary Sacrifice Expense Reimbursement Claim Form

<b>Name</b>		<b>Employee No.</b>	
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1. Fill in the amount of reimbursement by the description of the expense(s).
2. Attach the original receipt(s) to this form. Please keep a copy of receipts for your records.

Description of Expense	Amount
Tea Club	
Car Parking	
Flinders University Child Care Centre	
Qantas Club	
Professional Subscriptions	
<b>Laptop</b> <b>Please note:</b> when claiming a laptop expense, you will need to complete a “ <b>Eligible Work Related Item Declaration</b> ”	

Signed \_\_\_\_\_

Dated \_\_\_\_ / \_\_\_\_ /20\_\_\_\_

**Please return to:**  
 Salary Packaging Administration  
 First Floor Registry Building Room 122  
 Ph 8201 5231 Fax 8201 5669  
[Jenny.mackay@flinders.edu.au](mailto:Jenny.mackay@flinders.edu.au)  
[Jeanette.pech@flinders.edu.au](mailto:Jeanette.pech@flinders.edu.au)