# OUR LADY OF DOLOURS P&F ASSOCIATION

**ABN 48 515 631 239**

*2 Willcocks Street*

*Mitchelton QLD 4053*

# Reimbursement Form

This form is to be used to request a reimbursement of expenses from the P&F. Please note all requests are to be discussed by the P&F and minuted before reimbursement will be issued

### Bank Account details

**BSB ACC NAME**

**Contact phone number** **Email Address**

### Child’s Name and Class:

**Expenses incurred on**:

*A brief description of what the funds were spent on (eg Fathers Day)*

**Please list expenses and attach invoices/receipts:**

## $

*E.g. Smith’s Bakery – bread rolls*

## $

$

$

$

**Total $**

|  |  |  |  |
| --- | --- | --- | --- |
| Treasurer’s Use Only | Date Processed | Cheque/EFT Number | Cheque/EFT Amount |

***Please email form to:*** [***suzan.dabelstein@bigpond.com***](mailto:suzan.dabelstein@bigpond.com) ***or send home with Samuel Dabelstein.***

Form current as at February 2018