

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 or send home with Samuel Dabelstein.