
 GOOLLELAL PRIMARY SCHOOL <i>an independent public school</i>		P&C Expense Reimbursement Form	
Name:			
Claim Date:			
Event Name and Date:			
Nature of Expenditure:			
Comments:			
\$ Total Value \$			
Note all expense claims must have a valid receipt attached detailing items of expenditure (<i>EFT transaction dockets are not valid receipts</i>)			
Repayment Method:		Direct Deposit <input type="checkbox"/>	Cheque <input type="checkbox"/>
Banking Details (if direct deposit)		BSB:	ACC:
Claimants Signature:		_____	

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<i>Treasurers Use Only</i>	
Payment / Cheque Number:	
Recorded <input type="checkbox"/>	
Treasurers Signature & Date:	_____

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