****

**Staff Reimbursement Form**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Period** |  / / | to |  / / |

Reimbursement will be paid into the account your pay goes into .

## Mileage Calculator

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Mileage to/from(specify destination) | No. of one-way trips | No. of km per one-way trips | Total kms | x $1.04c/km |
| *Example: Acme Ltd*  | *10* | *10* | *100* | *$ 104.00* |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  | **Total:** | $ |

## Reimbursement

|  |  |  |  |
| --- | --- | --- | --- |
| Item Claimed | Receipt attached? Y/N |  | Amount |
| Mileage *(from calculator)* |  |  | $ |
| Car parking |  |  | $ |
| Other *(please list)*: |  | Purchased from: |  |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
| **Total:** | $ |

|  |  |  |
| --- | --- | --- |
| Approved: |  |  |
| Paid: |  / / |  | Initialled: |  |