



# REIMBURSEMENT CLAIM FORM

DATE OF SUBMISSION: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

**CLAIMANT:** \_\_\_\_\_

CONTACT DETAILS – address: \_\_\_\_\_

Home phone: \_\_\_\_\_ mobile phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

## CLAIM DETAILS

	AMOUNT	DESCRIPTION OF EXPENSE
EXPENSE 1		
EXPENSE 2		
EXPENSE 3		
EXPENSE 4		
EXPENSE 5		

TOTAL CLAIM: \_\_\_\_\_ RECEIPT PROVIDED: YES - NO

## FOR TRAVEL CLAIMS

REASON FOR TRAVEL	EVENT NAME	LOCATION	PARTICIPANT ROLE
MEETINGS			
PROFESSIONAL DEVELOPMENT			
COMPETITION			
OTHER			

## CONDITIONS

- 1 The claim form is to be submitted to the NTBA committee within 30 days of the commencement of travel or expense incurred
- 2 Travel reimbursements will be allocated according to the NTBA reimbursement policy.
- 3 Ticket &/or the receipts must be attached to the claim form.
- 4 Air travel must be economy class, (discount where available), & tickets are not to be purchased using frequent flyer points
- 5 Claims for vehicle hire & fuel may be approved. (Only vehicles hired from approved car hire companies, for individual/group travel to & from the competition, not during the competition).
- 6 Insurance for flights & travel must be organised by the traveller. The NTBA will not reimburse for travel not undertaken on behalf of or to represent the NTBA.

I understand and accept the above conditions.

\_\_\_\_\_  
(Signature) (date)

### IF SUBMITTED BY A THIRD PARTY

\_\_\_\_\_  
(name) (Signature) (date)