



LEGION OF MARY

SENATUS OF MELBOURNE INCORPORATED

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CLAIM FORM

Date: _____

Complete this form using clear CAPITAL LETTERS

This claim is in relation to expenses incurred on behalf of the Melbourne Senatus.

Indicate with a **X** item/s that this claim refers to:

☐ Extension work ☐ General Transportation ☐ Postage ☐ PPC ☐ Purchases ☐ Visitation of Council

Other _____

Name: _____

Address: _____ State: _____ Postcode: _____

Phone/Mobile: _____ Email: _____

Enter details below and attach receipts:

Date	Particulars	Amount \$	GST Amount \$ [OFFICE USE ONLY]
Total Amount Claimed \$			

Signed by: _____

Approved by Executive: _____ Date: _____