



# Rover Scout Motorsport Reimbursement Form

Please fill out ALL the details below for a review for reimbursement.

Name:	Rover Crew:
Contact Number:	Email:
Event:	Amount:
Refund or Reimbursement? Please circle	Transfer Date:

The reason for reimbursement? Please tick.

- Event reimbursement.
- Other. Please Specify \_\_\_\_\_

Bank Name:	Account Name:
BSB:	Account Number:

Thank you for completing the reimbursement form, by signing below you are declaring the above details are correct and Rover Scout Motorsport takes no responsibility for any incorrect details. Rover Scout Motorsport will endeavour to process this application as soon as possible. Electronic transfers will take place at the next Rover Scout Motorsport meeting unless agreed upon otherwise. Please ensure you have attached your receipt for auditing purposes.

Name: \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

RMS USE ONLY

Name of approver:

Date \_\_\_\_\_ Signature \_\_\_\_\_