

Please complete all sections of this form to claim a reimbursement for an expense you have already paid.
Send your completed form to customerservice@accesspay.com.au or post to **PO Box 1238, Adelaide, SA 5001**.

Section 1: Your details

Subscriber ID		Employer name	
First name		Last name	
Date of birth		Phone	
Email address			

Section 2: Your bank account details

Please transfer funds to the account below

Please pay to my default bank account **OR** Please pay to the bank details below

BSB number		Account number	
Account name		Reference	

Section 3: Reimbursement details

Please confirm the total amount claimed per benefit payment

Expense dates (DD/MM/YY)	Expense description	Total claim amount	GST (if applicable)
to		\$	\$
to		\$	\$
to		\$	\$
to		\$	\$
to		\$	\$

See **Section 6 - Supporting Documentation** on page 2 for details of the documents required to support your claim.
Where no supporting documentation is provided, payment will not be made.

Section 4: Declarations

I declare that:

- Neither I nor an associate are claiming the amounts on this form through any other salary packaging facility, nor are the amounts being paid or reimbursed by my employer (or associate's employer), and are not being (and will not be) used for any other tax deductible purpose.
- The total amount being claimed on this form is for previously unclaimed purchases only and not for cash advances, purchases where funds have been returned or an outstanding balance of previously claimed transactions.
- I understand I may be subject to an Australian Taxation Office (ATO) audit at any time and may incur a future tax liability on any funds received without legitimate documentation and/or proof of occurrence.

Substantiation and Compliance Declaration and Warranty

- I have attached copies of documentation to substantiate this claim and warrant that the total amount claimed on this form is substantiated by the attached documentation.
- I declare and warrant that I hold (and will continue to hold) original documentation to substantiate any expenses that are or become included in the salary package provided to me by my employer from time to time. I understand that I am required to retain these records for a period of seven years.
- I agree to indemnify my employer from and against any Fringe Benefits Tax liability incurred as a result of the parties entering into this salary packaging arrangement, including, without limitation, where I am not able to produce original documentation to support any expense when requested to do so by you or my employer.

Signature*		Date	
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Section 5: Checklist

- I have completed my claim details above. I have signed this form above.
- I have read and agreed to the **Section 4: Declarations**. I have included all pages of my supporting documentation with this claim form.

* By signing above, you agree to the Section 4 - Declarations and have provided all supporting documentation and payment information. You may sign your name physically or by using a certified electronic signature that verifies the date and time that you applied your electronic signature. By doing so you consent to the terms and conditions applicable to this form.

Section 6: Supporting documentation

Where no supporting documentation is provided, payments will not be made.

Expense type	Documentation required
Mortgage repayment (excluding investment properties)	Current statement showing the BSB, account number, amount owing and 2 consecutive payments.
Personal loan repayment	Current statement showing the BSB, account number, amount owing and 2 consecutive payments.
Rent	Current lease or rental declaration showing your name, address, rent amount, length of lease and proof of 2 consecutive payments.
Education payments (school fees, child care, HELP)	Invoice showing amount owing and proof of up to 12 months' worth of payments.
Health insurance	Policy document showing the amount owing and proof of 2 consecutive payments.
Income Protection insurance	Policy document showing the amount owing and proof of 2 consecutive payments.
Household bills (rates, power, groceries etc.)	Invoice showing payment details, amount owing and proof of payment. If this payment includes GST, the tax invoice must show the GST amount.
Meal and Entertainment benefits (holiday accommodation)	Invoice showing payment details, amount owing and proof of payment. If this payment includes GST, the tax invoice must show the GST amount.
Credit card	<p>Credit card statement showing amount(s) paid to the credit card and up to 12 monthly statements.</p> <div style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> <p>PAYMENT REQUIRED</p> <p>Account Number [REDACTED]</p> <p>PAN [REDACTED]</p> <p>Period 02 Feb 18 - 01 Mar 18</p> <p>Payment Due Date 26 Mar 18</p> <p>Minimum Payment \$20.00</p> <p>BPAY Biller Code: 9100 Ref: [REDACTED]</p> <p><small>By BPAY* - Use online banking or contact your participating financial institution to make a payment to your account.</small></p> <div style="border: 2px solid orange; padding: 5px; margin-top: 10px; text-align: center;"> <p>Mask 'Account Number'/'Credit Card Number' and 'BPAY ref' with a black marker</p> </div> </div> <p>Please ensure that you blank out the credit card number from your statement before submitting it to us, as per this example:</p>