

Claims for reimbursement must be submitted no later than 60 days following the purchase.

This form is to be completed for all claims of reimbursement from Charles Sturt University by persons other than staff members. **NOTE: All claims for reimbursement for CSU permanent staff and contract staff need to be processed via ProMaster. *This form is not required for the staff reimbursements.*** All information must be filled out completely and correctly. Any missing or incorrect information will result in a delay in the payment of the reimbursement.

Part 1. TYPE OF CLAIMANT

CSU Student (go to Part 2) Other Please specify _____ (go to Part 3)

Part 2. STUDENT ID

CSU Student Number

Part 3. CLAIMANT'S PERSONAL INFORMATION

Surname/Family Name

Given Names

Address for
Correspondence

Contact Phone Number

E-mail Address

CSU will make reimbursement directly to your bank account and to do so need your account details and your e-mail address.

Bank Name

BSB Number

Account Number

*Australian bank accounts only – International bank details need to be provided on the [International EFT Form](#)

Part 4. DESCRIPTION OF PURCHASES

Date	Vendor Name (purchased from)	What was Purchased	Amount
If more lines are required, please write details on back of form		Total Reimbursement Claimed	\$

Part 5. PURPOSE OF THE EXPENDITURE (Describe why the purchase was made and how it relates to CSU)

Part 6. DECLARATION

I affirm that I have incurred the above costs in relation to the purpose indicated above. All claimed expenses are supported by receipts/invoices/documentation attached. I have not and will not seek a claim for these expenses from any other source. The information I have provided is true and correct.

Claimant's Signature

Date