

Where a reimbursement is due to an owner, this form must be completed and returned to our office along with relevant supporting documentation (e.g. a legible receipt or tax invoice).

(NOTE: Fields marked with an asterisk (*) must be completed prior to a reimbursement being processed. Where appropriate information and documentation is not provided, the reimbursement will need to be approved at the next committee or general meeting of the Owners Corporation. This measure is in place to protect our clients from fraudulent claims and to meet the Australian Tax Office requirements if your Strata Plan is registered for GST (i.e. your Strata Plan will not be able to claim the GST component if a tax invoice is not provided).

SECTION 1				
Strata Plan Number:	Owner L	Owner Lot Number*:		
Strata Plan Address*:	Owner N	Owner Name/s*:		
Owner email (to receive remittance ac	dvice):			
SECTION 2				
Date expense occurred*:		Amount to be reimbursed*: \$		
Date of AGM approving expense*:		(please note "N/A" if not approved at an AGM)		
Explanation of reimbursement reques	ted*:			
SECTION 3				
Bank account details previously provided. If no, please provide bank account details*:				
Account Name:	nt Name: Account Number:			
BSB:	Name of	Name of Banking Institution:		
SECTION 4				
I have provided a legible receipt for the amount to be reimbursed (please see note above).				
Signature of owner/s*:				
STRATA MANAGEMENT SERVICES NSW USE ONLY				
Add to creditor database OR	Pay as a 'One Off'	Bank details confirmed by	on	
Fund to be debited:	Admin Fund: \$	Capital Works Fund \$		

Date:

Strata Manager:

Ref No: