



Tax Help Centre – Reimbursement claim form

Fields marked * must be completed.

Centre details

*Centre name

*Centre number

*Email

Your bank details

*Have your bank details changed from your last reimbursement? Yes ☐ No ☐

*BSB

*Account number

*Name on Account

Your address

*Street

*Suburb

*State/territory

*Postcode

Date dd/mm/yyyy	Details	Postage	Phone	Other

TOTALS

TOTAL REIMBURSEMENT

Privacy

The ATO is a government agency bound by the *Privacy Act 1988* in terms of collection and handling of personal information. If authorised by law we may share this information with other government agencies. For further information about privacy please go to ato.gov.au/privacy

Complete this declaration for this application.

I declare that:

- the information given on this claim form, including any attachments, is accurate and complete
- no previous claim has been made for these items
- I authorise and direct the ATO to pay any reimbursement to the nominated account shown above.

*Name

*Date