

# Expense Payment / Reimbursement Form



**Instructions.** The purpose of this form is to allow you to advise Alliance Leasing to pay a supplier directly, or claim a reimbursement expense associated with your novated lease.

This form contains fields that are best completed on a computer. Please open the form and use your computer to type directly into the form. Then print it, sign it and send the signed form to Alliance Leasing complete with supporting documents such as receipts. Please note that you must sign the form at the base of Page 2 to allow Alliance Leasing to consider the payment or reimbursement. We prefer that you return the documents to Alliance Leasing by scanning all and sending them to [leasing@allianceleasing.com.au](mailto:leasing@allianceleasing.com.au) as this gives us a clearer document. You will receive a return email acknowledgement of receipt.

Please note that it is your obligation to read and understand all information on Page 2. Once complete you must sign the form at the base of Page 2. An unsigned form cannot be considered as an application for reimbursement.

**Questions.** If you have any questions regarding this form, please call us on 1300 225 582 and we will happily assist you.

## Your details (Please complete the following)

Full Name	<input type="text"/>	Employer	<input type="text"/>
Vehicle Registration Number	<input type="text"/>	Contact telephone	<input type="text"/>

Bank details: (If this is your first claim)

Account Name	<input type="text"/>
BSB	<input type="text"/>
Account Number	<input type="text"/>

## Registration and insurance expenses (Please fill in the totals and tick either pay supplier direct or reimburse me)

Registration	\$ <input type="text"/>	<input type="radio"/> Pay Supplier Direct	<input type="radio"/> Reimburse me
Comprehensive insurance	\$ <input type="text"/>	<input type="radio"/> Pay Supplier Direct	<input type="radio"/> Reimburse me

## Please include any additional information in relation to your claim

Additional Information	<input type="text"/>
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Fuel (total value of receipts)	\$ <input type="text"/>	<input type="radio"/> Reimburse me
Other car expenses	\$ <input type="text"/>	<input type="radio"/> Pay Supplier Direct <input type="radio"/> Reimburse me
Maintenance	\$ <input type="text"/>	<input type="radio"/> Pay Supplier Direct <input type="radio"/> Reimburse me

**Please include any additional information in relation to your claim**

Additional Information

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**Important information**

It is your responsibility to ensure that your car is registered and insured at all times. If you don't allow enough time for a registration or insurance renewal to be paid by Alliance Leasing, you will need to pay it yourself - Alliance Leasing will reimburse you when you submit this Alliance Leasing expense payment / reimbursement form.

It is an offence to drive an unregistered vehicle at any time. Alliance Leasing take reasonable steps to ensure your car is registered and insured; however, Alliance Leasing cannot be responsible for requests that have not allowed sufficient time to fully process the payment or if State Transport Authorities fail to process payment quickly. Therefore you should aim to use this form to allow Alliance Leasing to pay the supplier by sending it to Alliance Leasing 14 days prior to the due date so we can make payment via electronic funds transfer.

**Renewing your car registration**

Pay for your registration yourself and use the Alliance Leasing expense payment / reimbursement form to receive reimbursement; or

As soon as you receive your renewal notice, send your registration to Alliance Leasing so that it can be paid on your behalf, using the Alliance Leasing expense payment/ reimbursement form. For any other vehicle related expenses please complete the "Additional Information" section above and return to Alliance Leasing with any associated documentation.

**Checklist**

You must attach one of the following for each expense:

- A dated receipt for reimbursement.
- A dated invoice when you require Alliance Leasing to pay the supplier direct.

**Declaration**

I declare the expense(s) listed above were incurred by me for this car and that the GST Input Tax Credit has not been claimed by any entity, including my employer. I authorise Alliance Leasing to contact any provider to verify any information to process this claim and confirm this car was fleet managed by Alliance Leasing when goods and/or services were provided.

Signature \_\_\_\_\_

Date