

I would like to make a work related expense claim



Things to know

Please use this form to claim reimbursements for work related expenses approved by your employer such as a laptop, iPad (or similar device), mobile phone, portable printer, briefcase, tools of trade, calculator, protective clothing or computer software.

1 My details

Full name: _____

Phone number: _____

Email: _____

Employer name: _____

Payroll identification number: _____

2 My contribution options

If there are insufficient funds in your account to pay this claim, Maxxia will part pay the reimbursement as funds become available. Alternatively, you can increase your contributions to cover this reimbursement.

Please indicate your preferred contribution option:

- ☐ I do not want to increase my contributions, please pay using my current contributions.
- ☐ Increase my contributions in equal instalments over the next available pays.
- ☐ Other (please advise): _____

3 My claim details

Please provide details of the expenses you are claiming (for example, a laptop, tablet etc) in the table below.

I would like to claim	Date paid	Amount (incl GST)
		\$
		\$
		\$
		\$
		\$
		\$
	Total	\$

! CHECKPOINT: Please ensure you include a copy of the following documentation for each item you are claiming.

Proof of the expense, this could be a:

- tax invoice
- bill

Proof that you have paid this expense, such as:

- receipt
- BPAY payment reference number
- financial institution statement highlighting the payment

Continued over →

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Where to pay my claim

You only need to complete this section if you have not previously supplied your account details or if the details have changed. This will become your default account that all reimbursement payments are made to.

Account name _____

BSB number - Account number

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My declaration

By submitting this form, I declare:

- I have read, understood and accept the Terms and Conditions below.
- The work related item(s) listed in this form will be used primarily for work purposes.
- I am entitled to reimbursement of these expenses in accordance with my employer's Salary Packaging Policy.
- These expenses were paid by me, not my employer or any other third party.
- I have not previously claimed reimbursement for these expenses from my employer or any other third party.
- I have not and will not claim a tax deduction for the expenses included in this claim.

I understand that submission of false or misleading information may lead to serious tax offences and result in my claim being denied.

Sign here

Date / /

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My employer's declaration

I confirm, in my capacity as the current authorised employer representative, that (employee name):

_____ is eligible to salary package the work related item(s) listed on this form as these items are to be used primarily for work purposes.

Representative name _____

Title _____

Sign here

Date / /



CHECKPOINT

- ☐ I have completed my claim details on the first and second page.
- ☐ I have signed the declaration.
- ☐ I have included all pages of my supporting documentation and claim form.

Continued over →

Submit this completed claim form along with all your supporting documents:

Online: maxxia.com.au/forms/upload-a-form

Email: info@maxxia.com.au

Fax: 1300 733 444

Post: Maxxia Pty Ltd, Locked Bag 18, Collins Street East, Melbourne VIC 8003

What happens next?

Once your claim and copies of your supporting documentation are received, we'll organise this payment for you. If you don't have enough money in your salary packaging account, we'll make a partial payment from the amount currently available. The remainder of your claim will automatically be paid to you as funds become available.

Privacy Statement: Maxxia is committed to protecting the privacy and rights of its customers. Our Privacy Policy contains important information about how we collect, hold, use and disclose personal information including with third parties to provide our services to you. It explains what happens if we cannot collect your personal information, as well as how you can access and correct the personal information we hold about you, or make a complaint. If you do not wish to receive promotional material from us, or would like a copy of our Privacy Policy, please contact us on 1300 123 123 or view online at maxxia.com.au

Terms and Conditions

Important please read before signing this form.

By submitting this form, you acknowledge and agree:

1. Maxxia may charge a fee for the processing of this claim. The details of the applicable fees are contained in your Employee Information Guide or by contacting Maxxia.
2. Where you have regular payments made from your salary package for benefits such as lease payments, these payments will take precedence over any claims.
3. If you do not fully complete this form including providing appropriate supporting documentation then Maxxia may return your claim to you without payment.
4. If we suspect you have made a false claim for reimbursement, the matter will be referred to your employer and you may be denied further participation in salary packaging.
5. You must not include requests for payment of claims by Maxxia to third parties. In these instances you should make payment and submit a reimbursement claim to Maxxia. Payments directly to third parties can only be on a regular basis for approved benefits.