

Third Party Declaration Form V1.2

**THIS FORM HAS BEEN DESIGNED TO BE COMPLETED ELECTRONICALLY.
ALL FORMS MUST BE SIGNED AND DATED.
ALL RED BORDERED FIELDS ARE MANDATORY.**

I _____, am seeking reimbursement for the work-related expense listed below.

I _____ named on the _____ and _____ has paid for the expense.

I have since reimbursed _____ and am seeking reimbursement only for the amount I have paid them as indicated in the table below.

Expense Type (e.g. Airfares, Accommodation)	Description (e.g. flights to Sydney to attend Conference ABC)	Total Invoice/ Receipt (\$AUD)	Amount(\$AUD) claimed as a reimbursement	Date paid	Other applicants claiming AHP+PDRP on this invoice (if applicable)

I have provided AHP+PDRP with the relevant documentary evidence including the invoice and proof of payment documentation and any other relevant documentation as required.

Date

Signature

I _____, declare that I have paid the above expenses on behalf of

_____. I also declare that I have been reimbursed for the expense.

I have provided the applicant with the relevant documentary evidence including the invoice and proof of payment documentation and any other relevant documentation as required.

Date

Signature