

Refund form for Flu Vaccination for employees including household members



EMP NO:

NAME:

DATE:

EMAIL ADDRESS:

SITE:

please provide your email address so that once this payment is made (please allow up to 2 weeks) you will receive a Remittance Advice via email

BANK DETAILS: As this subsidy will be electronically funded into your nominated bank account you will need to provide the following details:

BSB NO:

ACCOUNT NO:

Amount you are claiming: \$

How many household members received a vaccination?

Office use only:

Date	Details	Amount	Account No	Cost Centre
	Flu Vax refund claim	\$	595000	116515
			Total expense	\$

BetterU Authorising Signature: Lisa Bond

BETTERU REFUND FORM FOR FLU VACCINATION INFORMATION?

- Fill in this Flu Vaccination refund form and ensure that you have supplied your bank details so that this money can be transferred into this nominated account.
- Attach the receipt of how you received this Flu Vaccination e.g. Chemist or Dr (this can just be a copy of your credit card or bank statement showing that transaction)
- Submit this completed form along with a copy of the receipt to your Site BetterU Coordinator or your Team Leader & they will pass it onto the appropriate person: Lisa Bond or email directly to betterU@sanitarium.com.au
- Reimbursements will be provided by EFT (Electronic Funds Transfer) with the money being transferred into the nominated bank account that you have provided details for on this form.
- Reimbursement may take up to 2 weeks to appear into your bank account looking for a reference with "Sanitarium" in it on your bank statement that will match the amount you are claiming.
- Please note that this transaction does NOT show on your payslip it will be on your bank statement

For further information please speak to your Site BetterU Coordinator :

or email: betteru@sanitarium.com.au

BetterU Office use only:

Tick once updated on the Flu Vaccination Register spreadsheet

_____/_____/_____

Date given to HO Finance