For NSW Health Employees

Meal Entertainment Claim Form

- Use this form if you wish to manually claim your meal entertainment benefit by submitting receipts.
- You can also submit your receipts via the MySalPack app, available in the app store or <u>online</u>.



Get in Touch

- - 1300 402 523

nswhealth@salarypackaging plus.com. au

www.salarypackagingplus.com.au



PO Box 7066, Melbourne VIC 3004

Name		
Date of Birth	d d m m y y y Mobile number	
Payroll ID		
Employer		
Email address		

Salary Packaging

You can salary package your meal entertainment expenses and submit receipts for reimbursement. We will deposit your payment directly to your nominated bank account on presentation of sufficient evidence.

Guideline for receipts

Please ensure your meal entertainment receipts are:

- + Itemised
- + For meals with two or more people present
- ◆ Over \$15.00 (inc. GST)
- ♣ For dine-in meals only receipts marked 'take away' or 'drive thru' will not be accepted

Lloo my ovieting	OR	Account Name		
Use my existing bank account		BSB Number	Account Number	

Claim Details

I authorise SalarvPackagingPLUS to reimburse these claims over:

, 3 3		
	pay periods	OR
From my Salary Packaging Accou	nt Balance	OR
From the balance of funds on my	Meal Entertainn	nent Card

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For NSW Health Employees



Reimbursement Details

Meal Entertainment claims

For home function claims please turn over the page

Name of Cafe / Restaurant	Date of Receipt	Amount	Evidence Attached
Eg: Tax invoice from restaurant		\$70.85	
	Total		

Travel/accommodation claims

You can claim taxi travel to and from the meal entertainment venue and/or one night's accommodation if it is directly associated with and for the sole purpose of the meal entertainment event. This claim must be accompanied by a corresponding meal claim.

Item	Date of Receipt	Amount	Evidence Attached
	Total		

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Home function/self-catering claims

Home functions are special occasions catered for by yourself at your home or other venue.

You must provide original, itemised receipts. The receipts must contain <u>only</u> food and drink for the specified event and not be older than 14 days prior to the function. Guests attending must include people outside your normal household.

Date of function	not part of usual household			
Reason for function				
Item		Date of Receipt	Amount	Evidence Attached
		Total		_
Complete Yo	our Application			
Please tick those which				
	y and Training Support Loan (STSL) wn as HECS-HELP)	I do NOT claim the	Tax-Free Threshold wi	th this employer
Declaration				
 I have read and ag I authorise payroll I understand that in non payment of I acknowledge that I receive or are red I acknowledge that I acknowledge that I acknowledge that I acknowledge that I have not already I have not already I have not and will The information p 	rticipate in NSW Health's salary packaging gree to the terms and conditions of salary packaging deductions to enable payment of the above benefit payments can only be made following the benefit if there is insufficient balance in the it is my responsibility to confirm what efficient was to the confirm what efficient balance in the confirm what efficient balance in the confirm what efficient balance.	packaging as set by NSW He e meal entertainment expering deduction from my salar my salary packaging accept, if any, this salary packaget, if any, this salary packaget, if any this salary pa	nses and administration, and that non payme bunt ging will have on any g ual payment summary nancial or taxation adv employer or any other penses Card	on fee ent of salary will result covernment payments or income statement ice party
Signed		Date		

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