Expense Payments Benefits

Employer N	lame:				
Date	Nature of Expense (e.g. school fees, private insurance)	Amount (GST Exclusive)	GST	Name of Employee	Otherwise Deductible Amount*
		\$	\$		\$
		\$	\$		\$
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		\$	\$		\$
		\$	\$		\$

^{*}This is the amount the employee would have been able to claim as a tax deduction, if the expense had not been paid by their employer