

EXPENSES CLAIM

The Treasurer - Archery Queensland

treasurer@archeryqueensland.org.au



(to avoid mistakes please *PRINT* clearly)

Payable to: _____

Email: _____ Contact Number: _____

BSB: _____ Account Number: _____

Date	Course Description & Venue		
Mileage Claim	From:	RETURN	Total Kms
Participant Breakdown & Numbers			
Male	# of Under 18 ____; # of Open ____; # of Master ____; # of Other ____		Total
Female	# of Under 18 ____; # of Open ____; # of Master ____; # of Other ____		Total
Other	# of Under 18 ____; # of Open ____; # of Master ____; # of Other ____		Total
TOTAL	# of Under 18 ____; # of Open ____; # of Master ____; # of Other ____		Total
Date	Claim Detail (airfares, accommodation, per diem etc - prior approval required)		Amount
	Mileage	klm @ 60c	
NOTE: Reimbursement will be made by Direct Credit - please check your bank details (above) are correct.			Total Claim
<ul style="list-style-type: none">• Attach original receipts - a detailed explanation of the expense must be provided for your claim to be considered.• All claims received within the required timeframe will be considered• Acceptance of claims is entirely within the authority of the Board• Mileage may be claimed at 60c per kilometre• Per Diem allowance - \$40 (prior approval required)			

I certify that to the best of my knowledge the above claim details are complete and accurate. I understand that the level of reimbursement of my claim is entirely at the discretion of Archery Queensland.

Claimant Signature: _____ Date: _____

Office Use: