South Queensland Archery Society Inc

ABN: 51 238 077 419

EXPENSE CLAIM FORM

The Treasurer
34 Kinross St
SPRING HILL Q 4000
e: treasurer@archerysqas.org.au

Claim Date: _____

To Avoid Errors Please Print Clearly	
Payable To:	
Address:	
Email:	
Contact No.:	
BSB:	
Account:	

Date	Item Description	Claim
	Total This Claim	

NOTE: reimbursement will be made by Direct Credit - please check your bank details (above).

- Judges Claim - $40 per Day
- Mileage Claim - 60c per kilometre per vehicle return (40c pre January 2022)
- Other Claims - Attach original receipts - if no receipts are available a detailed explanation of the expense must be provided for your claim to be considered.

Signature: _____