

Croquet Association Queensland

150 Caxton Street, Milton 4064

Phone: (07) 3876-5576



PAYMENT / REIMBURSEMENT REQUEST FORM

INDIVIDUAL - FORM 26a

Name: _____

Phone: _____

Address: _____

Postcode: _____

Expenses incurred for the following:

Date	Details	Amount	
	Total		

Please remember to attach your invoices and receipts

I certify that the amount above is due and payable for the goods supplied or the services rendered as described above.

Signed (Individual): _____ Date: _____

Signed (CAQ official - if required): _____ Date: _____

Please pay to the following account:

Bank	BSB Number	Account Number	Name of Account

OFFICE USE ONLY:

CAQ Code	EFT Number	Cheque Number	Amount	Date Paid

Notes:

- (1) Travel claims may be paid at 50 cents per kilometre, excluding first 50 kilometres. Accommodation claims may be paid at a maximum per night of \$135
- (2) If this claim relates to CAQ Refereeing, ensure CAQ Tournament Manager has signed before claim is submitted to CAQ Treasurer
- (3) If this claim relates to CAQ coaching, please ensure CAQ Director of Coaching has signed before claim is submitted to CAQ Treasurer

Forward to CAQ Treasurer at above address or email to treasurer@croquetqld.org