



# Funding Subsidy Claim Form for State Seminar

Email: [accounts@ponyclub.com.au](mailto:accounts@ponyclub.com.au)

PCQ will fund each year the State Seminar conducted at the Southport Pony Club as listed below. In addition, travel/accommodation funded to value indicated.

**All claims including relevant receipts must be submitted within 60 days of conclusion of the Seminar along with the "Attendance – Result - Report" form.**

Frequency / Purpose	PCQ Subsidy	Fare Costing or Equivalent in Travel / Accommodation	Total Funding
Coach / Official / Rider Development	\$4,500.00	\$ 1,950.00	\$ 6,450.00

Claimant: \_\_\_\_\_ Organiser / RDC: \_\_\_\_\_  
 Ph: \_\_\_\_\_ Mob: \_\_\_\_\_ Email: \_\_\_\_\_  
 Date of Clinic: \_\_\_\_\_ Venue: \_\_\_\_\_

Name of Presenter Conducting Clinic	Discipline	Flights / Km's Accommodation
		\$
		\$
		\$
		\$
<b>Total Claim</b>		<b>\$</b>

Organiser/RDC (Print Name) \_\_\_\_\_ Signature \_\_\_\_\_ Dated \_\_\_\_/\_\_\_\_/\_\_\_\_  
**PCQ Authorisation:**  
 Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Position \_\_\_\_\_ Dated \_\_\_\_/\_\_\_\_/\_\_\_\_

**Payment will be made by EFT: Please complete below details. If area has no bank account, may use the regional bank account. Regional must use regional bank account.**

Account Name : \_\_\_\_\_ ( please print)

BSB: 

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 Account No: 

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**PCQ OFFICE USE ONLY:**

A/C Code: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Approved by: \_\_\_\_\_ Dated: \_\_\_\_\_

