

## Pony Club/Zone - Claim Form

Return to relevant Zone/Club for Processing

### Claimant (e.g. Event Secretary or Individual)

Name of Claimant:	Position (if applicable):
Email Address:	
Day Contact Number:	Mobile:

### Type of Activity (tick appropriate box)

Assessment     
  Coach Panel Meeting     
  Judge/Course Design     
  Executive Meeting  
 Other (please specify): \_\_\_\_\_

Event:	
Venue:	
Hosted By:	Date:

**Travel Cost:** Officials to be paid travel or \$80 for the first day (whichever is greater) plus a payment of \$80 per day thereafter whilst performing official duties for club/zone.

### Motor Vehicle - travel returned

From Address	To Address	No of Km Travelled	Recommended Rate at 80c/km
			\$
			\$
\$20 meal allowance to driver and passenger for travel from 200km and up to 400km each way \$35 meal allowance to driver and passenger for travels exceeding 400km each way			\$

<b>Accommodation:</b> Number of Nights _____ <b>When billet is not available, meals &amp; accommodation will be paid up to a recommended maximum of \$230 per day on presentation of receipts.</b>	\$
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Other Reimbursements (Receipts <u>must</u> be supplied)	
Item	Amount
	\$
	\$
	\$
<b>Total Claim</b>	<b>\$</b>

<b>Claimant Signature:</b> _____	<b>Dated:</b> _____
<b>Authorised by (Club/Zone):</b> Print Name: _____ Signature: _____ Position Held: _____	<b>Dated:</b> ____/____/____

**Payment will be made by EFT: Please complete below details:**       **Details on File (tick if applicable)**

<b>Account Name:</b>	
<b>BSB No:</b>	<b>Account No:</b>