



OFFICE USE ONLY

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OFFICIAL EXPENSES CLAIM

From:

Name: _____ Officiating as: _____

Address: _____

To: _____ Promoting Club

Event: _____ Date: ___ / ___ / ___

Venue: _____

* Travel Claim km at c/km \$

* Meals \$

* Accommodation \$

* Other Expenses \$

TOTAL DUE \$

*** TAX RECEIPTS MUST BE PROVIDED**

Claim Authorised by: _____

Designation: _____

N.B. The Senior Steward and where applicable the Senior Technical Officer of the day is to sign this authorisation prior to send the claim to the promoting club.