

CROQUET ASSOCIATION QUEENSLAND PO Box 417, Indooroopilly, 4068

Club Claim Form for AWAG Expenses – Croquet & High Tea

Name of Club:									
Date Event Held:									
Number of Volunt									
Number of Visitor	S:								
F (1)	D • 4•					D		4 000 00	
Expenses Claimed – Description						Please incl. dollars and cents. 000.00			
Catering Costs you can consolidate exp or itemise									
Promotion Costs you can consolidate exp or itemise									
								0.0	
Total Claimed						C .1:		0.0	
Please provide receipts for all expenses. As CAQ is using grant money for this event, we are required to have auditable receipts for all expenses.									
auditable receipts for	an expenses.								
Please pay to the	following ac	count	t:						
			lumber		Account Number		Name of Account		
Dank		DOD I VAIIIDOI		710000111		. I dilliber	ranic	01710000111	
I certify that the clair	m made above i	s corre	ect and was	inc	rurred for	the event listed	1.		
I certify that the claim made above is correct and was incurred Signature					ourred for	Name			
Digitature							variic		
ĺ	CAQ Code Amour		ınt	Data Data					
	CAQ Code		Amount			Date Paid			

Scan or save then email WITH receipts to treasurer@croquetqld.org