



3D Archery Association of Australia

www.3daaa.com.au

Range Setters course Expenses Claim Form

Club:

ADDRESS:

STATE:

P'CODE:

TELEPHONE:

Claimants Certificate: I certify that the above claim is correct being for goods or services received on behalf of the Association and necessary for its operation and supported by invoices. For re-imbusement of other expenses as approved by the Committee Minutes, I certify that the cost has actually been incurred

Signature of Claimant

Name and 3DAAA Member Number of member attending course	Amount	
Total		

Range Setter Trainer _____

Office use only : - Date processed: Version 1.0	Deposit No:	<i>Please remit claim to:</i> The Treasurer treasurer@3daaa.com.au
Bank Details: Name: BSB: Acc #:	Actioned on _____	