



**AUSTRALIAN  
ALPACA**

**Australian Alpaca Association Ltd.**  
 ACN 067 146 481 ABN 30 067 146 481  
 Unit 2/613 Whitehorse Road, Mitcham, Victoria 3132  
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**Web** www.alpaca.asn.au

**EXPENSES CLAIM FORM**

Claimant Name		
Total amount claimed	\$	
Name and date of Show (if applicable)		
Date of claim		
Reason for expenditure		
Documentation attached		
Preferred method of reimbursement	<input type="checkbox"/> Cheque	
	<input type="checkbox"/> Direct credit - details below	
	BSB Number	____ . ____
	Account Number	
	Account Name	
Claimant signature →		
Payment Authorised		

Note: All claims are to be supported by copies of tax invoices or receipts for the underlying transactions or tax invoices issued by the claimant.

\*\*When claiming reimbursement for private vehicle use – please provide photocopy of a travel log book showing the starting, ending and elapsed kilometres and the registration number of the vehicle, together with engine capacity. Reimbursement will be paid as per the following:

(Engine Capacity)	Cents per kilometre
1600cc or less (1.6 litre)	58 cents
1601cc-2600cc (1.601 – 2.6 litre)	69 cents
2601cc and over (2.601 litre)	70 cents

➔ Please submit claim and documentation to the Regional Treasurer, Ken Willes at PO BOX 3161 GROSE VALE NSW 2753 Ph 02 45721945 email MOLONGA40@BIGPOND.COM

**Office Use**

Date of payment	
Cheque number	
EFT Ref No	
Date posted to MYOB	