



Application for Mileage Assistance Eastern Guruma Native Title Charitable Trust No.2

1. APPLICANT DETAILS

Full Name:

Address:

Phone:

NOTE: The Applicant must be an Eastern Guruma Member

2. MILEAGE

Location of Meeting _____

Vehicle Registration _____

Travelling FROM _____ TO _____

Members will need to provide copies of receipts showing that fuel has been purchased on the way to and from the location of the funeral. If the member does not provide receipts to AET the next time that mileage is applied for by the member, AET will reduce the amount paid in half. The mileage rate will progressively reduce by half each time that no receipts are provided.

3. LIVING ALLOWANCE

Date Leaving: ____ / ____ / ____

Date Returning: ____ / ____ / ____

How many of your children are travelling with you? _____

4. ACCOMMODATION - ROOM ONLY

Number of Adults: _____

Number of Children: _____

Children's Ages: _____

Check in Date: ____ / ____ / ____

Check out Date: ____ / ____ / ____

*Due to large groups travelling, it may not be possible for our travel agent to secure bookings for accommodation.

Where possible please attend to your own accommodation arrangements and provide AET with receipts to be potentially reimbursed

5. ACCOUNT DETAILS

Bank details:

BSB:

ACCOUNT:

5. SIGNATURE OF APPLICANT

This application has been made in good faith and I understand that if I am unable to attend this meeting for any reason I will return all monies expended to me to AET.

Signed _____

PLEASE FAX TO 08 9481 6148 OR POST TO PO BOX 7008 CLOISTERS SQUARE PERTH WA 6850

OR E-MAIL TO: nt@aetlimited.com.au