

## **Western Province Golf**

Royal Cape Golf Club, 174 Ottery Road, Wynberg 7800
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## **Tournament Reimbursement Claim Form 2023**

| Name:   |           |   | Home Club:         |                                    |                  |  |  |
|---|-----------|---|--------------------|------------------------------------|------------------|--|--|
| Tourn. Name:  |           |   | Venue:             |                                    |                  |  |  |
| Tourn. Date:  |           |   | No. of Rounds:     |                                    |                  |  |  |
| Tourn. Ranking Points:                                    |           |   | Overall Position:  |                                    |                  |  |  |
| Tournament Category: Open   Junior   Mid-Amateur   Senior |           |   |                    |                                    |                  |  |  |
| Expenses claimed:   |           |   |                    |                                    |                  |  |  |
| Туре  |           | Supplier /  | Supplier / Details |                                    | Amount Attache   |  |  |
| Entry Fee   |           |   |                    |                                    |                  |  |  |
| Caddie(s)   |           |   |                    |                                    |                  |  |  |
| Accommodation   |           |   |                    |                                    |                  |  |  |
| Flight(s)   |           |   |                    |                                    |                  |  |  |
| Car Hire / Fuel   |           |   |                    |                                    |                  |  |  |
| F&B   |           |   |                    |                                    |                  |  |  |
| Other   |           |   |                    |                                    |                  |  |  |
| Other   |           |   |                    |                                    |                  |  |  |
| Total   |           |   |                    |                                    |                  |  |  |
| of expenditure; (ii) confirm that I have re               | eceived r | n provided to be correct, no other financial assistants and conditions as set | nce from my club   | o, a sponsor o                     | r any other inst |  |  |
| •   |           | Date:<br>o.za   Fax: 086 541-4342   Tel: 021 761-4195                         |                    |                                    |                  |  |  |
| For office Use  |           |   |                    |                                    |                  |  |  |
| Capped Amount:<br>Annual cap p/category:                  |           |   |                    | Approved Amount: Total YTD Claims: |                  |  |  |
| mindar cap prodicegory.                                   |           |   | TOTAL TIL          | , Janus.                           |                  |  |  |

President: Mike de Swardt #WePartnerGOLF General Manager: Robbie Scott