

This form **MUST** be completed if yo intend to claim Remote Area Benefits to maximise the amount you can salary package in the Fringe Benefit Tax year for ther period - 1st April to 31st March of each year.

Supporting documentation IS NOT required with this form

(PLEASE PRINT)

EMPLOYEE NAME: _____

EMPLOYER NAME: CENTRAL AUSTRALIAN ABORIGINAL CONGRESS

YOUR NCB ACCOUNT NO: -

It is important that the information provided on this form is accurate and can be substantiated in the future. If there are any changes to the details you have provided to us then you must immediately advise the CBB and your employer.

1ST APRIL to 31ST MARCH

REMOTE AREA CLAIM FORM - CAAC

	Estimated expenses for the period 1st April to 31st March	CBB Office Use Only
Mortgage Interest (For your remote area principal residence only)	\$ <input type="text"/>	<input type="text"/>
Rent Paid (For your remote area principal residence only)	\$ <input type="text"/>	<input type="text"/>
Household Fuel (Electricity, Gas, Oil, Wood) # Not Water #	\$ <input type="text"/>	<input type="text"/>
Airfares (Only when incurred in conjunction with annual leave of 3 days or more and travel is to the capital city from which you were employed)	\$ <input type="text"/>	<input type="text"/>
Childcare Fees (In-house, employer provided childcare ONLY)	\$ <input type="text"/>	<input type="text"/>

Phone Contact Numbers: (H) _____ (W) _____ (M) _____

Email address: _____

SIGNATURE: _____

DATE: _____ / _____ / _____

PLEASE FORWARD TO:

Facsimile No.: 08 8244 9145
 Email: sp-clientservices@cbb.com.au
 Mail: Community Business Bureau Inc.
 PO Box 485, Woodville, SA 5011

