## GREY POWER N.Z. FEDERATION (INC) EXPENSE CLAIM

NAME	MONTH			20		
		Ta	-1		T	
FARES:	BOARD	CHAIR OF COMMITTEE	ZONE DIRECTOR	ZONE REP	OTHER	
<u>Air</u>						
Bus						
<u>Rail</u>						
<u>Taxi</u> (see schedule reverse)						
Accommodation Days/Nights						
Meals						
Parking (see schedule reverse)						
Toll Charges Period from to						
Stationery						
Mileage allowance (see schedule reverse)						
Total kms (@) .83c per km						
Other Expenses (please detail) Broadband \$50.00 a Month						
Sub total	\$	\$	\$	\$	\$	
				<u> </u>		
<u>Total claim</u>						
Claimant's Signature						
NB All relevant receipts are to be supplied and stapled to this claim						

Claim: Approved / Rejected

## GREY POWER N.Z. FEDERATION (INC) EXPENSE CLAIM

## Mileage Allowance

Make Model of Ver		el of Vehicle cc rating	<u>:                                      </u>
	DATE	VISIT	KILOMETRES
1			
2			
3			
4			
5			
		TOTAL	\$
Parking Fees	DATE	VISIT	COST
1			
2			
3			
4			
5			
		TOTAL	\$
Taxi Hire	DATE	VISIT	COST
1			
2			
3			
4			
5			
		TOTAL	\$