**Email PDF form and receipt to Finance@nzno.org.nz**



|  |
| --- |
| **23 Sept 2024** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MEMBER EXPENSES REIMBURSEMENT CLAIM FORM** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | **MEMBERSHIP #** | | | | | |  | | | | | | | | | | |
| **MEMBER’S NAME** |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **FULL ADDRESS** |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **VENUE** |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **EVENT** |  | | | | | | | | | **DATE** | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | ***(of attendance / last receipt)*** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | **GL** | | | | | **COST CENTRE** | | | **ACTIVITY CODE** | | | |
| **FLIGHT / DEPARTURE / EXCESS BAGGAGE FEE** | | | | | | | | | | $ | | | | 480 | | | | |  | | |  | | | |
| **BUS / RAIL /PARKING** | | | | | | | | | | $ | | | | 482 | | | | |  | | |  | | | |
| **TAXI/UBER** | | | | | | | | | | $ | | | | 476 | | | | |  | | |  | | | |
| **MILEAGE \_\_\_\_\_\_\_\_\_\_\_\_** @ $1.04 per km (Max $165 per day) | | | | | | | | | | $ | | | | 481 | | | | |  | | |  | | | |
| **Please also note the travel policy operates a rental equivalent exercise – where mileage claimed is  over 160 kms per day, the claim is limited to the rental equivalent of $165 a day.** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | **Qty** | | | |  | | | | **GL** | | | | | **COST CENTRE** | | | **ACTIVITY CODE** | | | |
| **BREAKFAST** (MAX. $30 INC. GST) | | | | | |  | | | | $ | | | |  | | | | |  | | |  | | | |
| **LUNCH** (MAX. $20 INC. GST) | | | | | |  | | | | $ | | | |  | | | | |  | | |  | | | |
| **DINNER** (MAX. $50 INC. GST) | | | | | |  | | | | $ | | | |  | | | | |  | | |  | | | |
| **Total for meals** | | | | | | | | | | | **$** | | | 484 | | | | |  | | |  | | | |
| **OTHER EXPENSES** (please specify) | | | | | | | | | |  | | | | **GL** | | | | | **COST CENTRE** | | | **ACTIVITY CODE** | | | |
|  | | | | | | | | | | $ | | | |  | | | | |  | | |  | | | |
|  | | | | | | | | | | $ | | | |  | | | | |  | | |  | | | |
| **Overall Total** | | | | | | | | | | **$** | | | |  | | | | |  | | |  | | | |
|  | | | | | | | | | |  | | | |  | | | | |  | | |  | | | |
| **IMPORTANT NOTES** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **\* ALL liquor consumed is required to be paid by the member\***  **\* Claims are only paid on receipt of the signed expense claim form and GST receipts provided\*** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **BANK ACCT NO** |  |  |  |  |  | |  |  | |  | |  |  |  | |  |  |  | |  |  | |  |  |  | |
| **EMAIL** |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **MEMBER’S SIGNATURE** |  | | | | | | | | | | **Date** | | |  | | | | | | | | | | | |
| **APPROVALS FOR CLAIMANT** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SIGNATURE** |  | | | | | | | | | | **Date** | | |  | | | | | | | | | | | |