3241080

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	Robyn Scott	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance) reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14650	YD0024		Gift for NZ Ambassador J McKinnon (China) 62.00	~~53.91~~	~~8.09~~	62.00
139000	14650	YD0024		Gift for Mme Qiu Yuanping (China)	86.09	12.91	99.00
					0.00	0.00	
				4-9-16	0.00	0.00	
					0.00	0.00	
					0.00	12.91 0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	~~140.00~~ 148.09	~~21.00~~	161.00

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	161.00
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$161.00

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.	I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve
	Name and Designation (in block letters): BRYAN WILSON, Associate DCE Community Investment
	Phone no: 9(2)(a)
29-Sep-16	Date Received 29/09/2016
Signature of Claimant Date	Signature of Approving Manager 4 OCT 2016 Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative

National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

China trip
Gift for
NZ ambassador

ANZ
SUE DASLER POTTERY
WELLINGTON 6022
New Zealand

MID 32572900
TSP 325729000001
TIME 04SEP16 13:48
TRAN 000918 CREDIT
MasterCard
MASTERCARD I
CARD 2960
RID A0000000004
PIX 1010
TVR 0000048000
TSI 6800
TC 68323B077EA05FBC
AUTH R79971

PURCHASE NZD62.00

TOTAL NZD62.00

(000) APPROVED

CUSTOMER COPY

TE PAPA STORE
CABLE STREET
WELLINGTON

----------EFTPOS----------
TERMINAL 32115303 TRAN 013896
TIME 25SEP 15:09 ACCT CREDIT
MCARD 2960
MasterCard
RID: A0000000004
PIX: 1010
AUTHORISATION R35502
PURCHASE NZD99.00
TOTAL NZD99.00

ACCEPTED

CUSTOMER COPY

Gift for
Mme. Qiu Yuanping
- China trip
(Minister level)

Tax Invoice Gst #: 13-455-122

TE PAPA

Te Papa Store Level 1 (3) Till:4
Cable Street
Ph: 043817013

Docket # : 105234 Sep 25 2016 3:09 pm
105234 Served By: Elizabeth (EN)

1033292	Small Earrings	1.000	$99.00
	Total Sale		$99.00
	Gst Content		$12.91
	Eftpos Mastercard		$99.00

80166 → 3241550

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	ROBYN SCOTT	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:		Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 3:			
Address 4:			

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
							x

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days - 24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14620	YD0024		China debrief dinner 24/9	460.87	69.13	530.00
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	460.87	69.13	530.00

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	530.00
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$530.00

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

Signature of Claimant — Date: 30-Sep-16

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): BRYAN WILSON, Associate DCE Community Investment

Phone no: 9(2)(a)

Signature of Approving Manager — Date: 29/09/2016

Data input for NAC

Date Received
6 OCT 2016
National Accounting Centre

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14620	YD0024	460.87	69.13	530.00	China debrief dinner

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

China trip

grasshopper

Meals for China Youth delegation

GRASSHOPPER
STAMFORD PLAZA
AUCKLAND

EFTPOS

TERMINAL 04776802
TIME 29SEP 22:11
TRAN 001749 CREDIT
MCARD
CARD 2960

MasterCard
RIO: A000000004
PIX: 1010
TC: A933B994CD7058AB
TVR: 80 00 04 80 00
TSI: E8 00
ATC: 0199
AUTH F43127

PURCHASE NZ$ 530.00
TOTAL NZ$ 530.00

ACCEPTED

INVOICE NUM 001645
CUSTOMER COPY

GRASSHOPPER
Stamford Hotel, Albert Street, Auckland
Phone (09)308-9211 Fax (09)308-9212
TAX INVOICE GST No. 94-425-891

MC #01
REG NJOY 29-09-2016 22:07 000170
Table No. 130.1

1X Banquet $40 $480.00
1 Lotus Room Charge $50.00
13 No
Table Balance $530.00

*
Tip.....
*
Total.....
*
*Room no.....
*
*Name.....
*
*Sign.....

801167-3241565

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

3241565

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
29/09/16	08:45am.	Wellington	Auckland	30/09/16	12:05pm		Minister for Youths International Leadership Award - China debrief

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14561	YD0024		Airport Parking	49.57	7.43	57.00
139000	14561	YD0024		Auckland Parking	43.48	6.52	50.00
139000	14660	YD0024		Meal	13.04	1.96	15.00
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	106.09	15.91	122.00

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	122.00
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$122.00

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

3-Oct-16

Signature of Claimant — Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters):

Phone no 9(2)(a)

3/10/16

Signature of Approving Manager — Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14561	YD0024	93.05	13.95	107.00	Airport Parking
139000	14660	YD0024	13.04	1.96	15.00	Meal

Date Received - 5 OCT 2016

National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	146		11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

9(2)(a)

3/10/2016

Zap 2 Thai Cafe & Bar
639 Dominion Road
Balmoral, Auckland
Ph: 09 638 6393
GST # 90-345-745
Tax Invoice
Receipt No. 129942

Table #7

POS1 POS1
Thai No. pp Count :1
29/09/2016 12:36 pm

No. pp 1

1x NE2 Yum Nua $15.00

Sub Total $15.00

Total $15.00

EFTPOS $15.00
Rounding $0.00

GST Contents $1.96

Wilson Parkwatch

RECEIPT

28058

Received From: 9(2)(a)

DATE: 29/09/16

The Sum of: Fifty dollars only

CARPARK: P17

ACCT No:

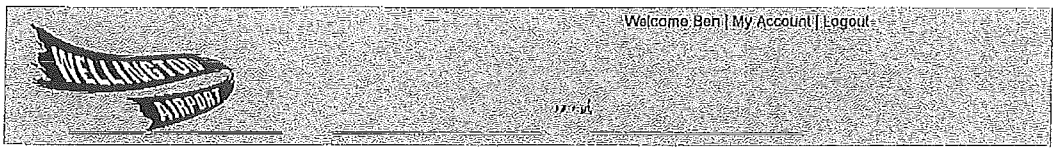
PARKING FEES PAID
(inclusive of Goods & Service Tax)

Signed

Wilson Parking Ltd GST Reg. No 56-897-631

Eftpos/ Credit	$	50.00
Cash	$	
TOTAL	$	50.00

Level 12, SAP Tower
151 Queen Street
Auckland 1010, New Zealand
PO Box 8290, Symonds Street
Auckland City 1150
Telephone 09 375 5080
Facsimile 09 375 5085



My Account | Manage my booking | T&Cs and Help

Print

Booking ref: PK959
Booked on: Wed 28 Sep 2016, 16:55
Last amended: Sat 1 Oct 2016

Personal Details

Name: 9(2)(a)
Address: 11 WAIAPU ROAD

Suburb: KELBURN
City: WELLINGTON
Postcode: 6012
Daytime telephone number: 0273333838
Mobile telephone:
Email address: 9(2)(a)

Additional details

Identification method: Credit card
Access details: 9(2)(a)
Vehicle registration:
Outbound flight No: NZ430
Number of passengers: 01
Frequent flyer number: 4480794

Car Parking

Status: Checked-out

Product: Terminal Last Minute
Entry date and time: Thursday 29 September 2016, 07:23
Exit date and time: Friday 30 September 2016, 12:30
Promotional code:
Price: $57.00

Itinerary has been resent | Payment History | Booking History

Back

802591

3244267

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim.. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
13/09/16	1:30pm	BSB	Porirua	13/09/16	3:30pm		Partnership Fund meeting with service provider

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		Overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
139000	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*	40	0.74	29.60
			Other		0.72	
					Total	22.80 ~~29.60~~

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14680	1		Carparking	19.13	2.87	22.00
139000	14680	1		Dinner - Burg'z, Auckland	17.30	2.60	19.90
139000	14680	1		Dinner - Capers Rotorua	15.74	2.36	18.10
					0.00	0.00	
					0.00	0.00	
				0308 - 230916	0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	52.17	7.83	60.00

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	22.80 ~~29.60~~
TOTAL ACTUAL AND REASONABLE EXPENSES	60.00
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	82.80 ~~$89.60~~

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

Signature 30-Sep-16 Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): 9(2)(a)

Phone no: 9(2)(a)

Signature of Approving Manager Date 3-10-16

Refer to attached for correct approval.

Data input for NAC

Date Received
11 OCT 2016
National Accounting Centre

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14545		29.60	0.00	29.60	allowance & incidentals
139000	14680	1	52.17	7.83	60.00	Carparking

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

CAPERS
1181 ERUERA ST
ROTORUA

------EFTPOS------
TERMINAL 04414603
TIME 03AUG16 08:00
TRAN 024087 CHEQUE
EFTPOS
CARD 9321
PURCHASE NZ$18.10
TOTAL NZ$18.10
ACCEPTED

CUSTOMER COPY

Wilson Parking
WPA10113-NZ
P870 - Ballantrae
GST 56-897-631
Ticket 0030341
8:41am 23/09/16
Fee Paid $22.60
Card ....2225 Auth 044695
(Includes GST and
60c transaction Fee)
PARKING PAID UNTIL
7:00pm
Fri 23/9/16

Please place ticket on dash this side up. Ticket not valid unless date and expiry time visible from outside the vehicle.

BURG'Z
GST#: 114-921-599
AUCKLAND

---------- EFTPOS ----------
TERMINAL 68334101
TIME 23SEP 19:34
TRAN 005326 CREDIT
VISA
CARD 2225

CONTACTLESS
ASB Visa
RID: A0000000003
PIX: 1010
ARQC:703FDCEA7EC24B00
TVR: 00 00 00 00 00
TSI: 00 00
ATC: 0109
AUTH 076534

PURCHASE NZ$ 19.90
TOTAL NZ$ 19.90

ACCEPTED

INVOICE NUM 005069
CUSTOMER COPY

804859 – 3249016

NEW / AMEND External

Requested By : 9(2)(a) 18/10/16

Actioned By : 9(2)(a)

Checked By 9(2)(a) 18/10/16

#269923

Name:	9(2)(a)
Address 1:	
Address 2:	
Address 3:	
Address 4:	

	9(2)(a)
Bank Account Number	

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14016	YD1404	11016	Reimbursement for cost of global roaming package for China	43.48	6.52	50.00
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	43.48	6.52	50.00

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	50.00
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$50.00

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

11-Oct-16

Signature of Claimant Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters):

ROBYN SCOTT, Director

Ministry of Youth Development

Phone no: 9(2)(a)

11/10/2016

Signature of Approving Manager Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14020	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

My Number: 9(2)(a)

Allocation expiry date: Tue 4 Oct 2016

As at 12:40pm Tue 27 Sep 2016

Status	Transaction Details
✓	**Stopped $49 Zone 6 Roaming Value Pack Recurring** 03:46pm Sun 11 Sep 2016
✓	**Purchased Zone 6 Large Roaming Option** 04:36pm Tue 06 Sep 2016
✓	**Stopped Data 1GB** 04:33pm Tue 06 Sep 2016
✓	**Purchased $49 Zone 6 Roaming Value Pack Recurring** 10:53am Thu 21 Jul 2016

Read our Terms and Conditions

805876

3251240

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
05/10/16							Ara taiohi meeting with Julia Wals and Anya Satyanand
17/10/16							Youth Hub meeting - social record presentation follow-up

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days - 24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance) - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	~~14910~~	14680 - 1		Ara Taiohi Meeting	11.74	1.76	13.50
139000	14910	14680 - 1		Youth Hub Meeting	43.65	6.55	50.20
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	55.39	8.31	63.70

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	63.70
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$63.70

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

19-Oct-16
Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): R Scott

Phone no:

Signature of Approving Manager

Date

Date Received
21 OCT 2016
National Accounting Centre

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14910		55.39	8.31	63.70	Ara Taiohi Meeting

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

Astoria Cafe

159 Lambton Quay
Wellington
Phone: 04 4738500

Tax Invoice
G.S.T No. 120-086-308

TAB: 31

Order No:

*2	Chicken Schnitzel	45.00
*1	Coke Zero	5.20

SALE TOTAL: $50.20

EFTPOS: $50.20

Reprinted By: Connor

Receipt#: 14321
Date: 17/10/2016 Time: 1:45:07 p.m.
Clerk: Connor
Terminal: 2 Terminal 2

Olive Restaurant

170 Cuba St
Wellington
Tax Invoice
GST No:115-800-531

T11 001
Sale No: 100001156271 05/10/2016 11:11

Table: 07
Covers: 3

Clerk: Rachel
Tax Invoice

	$
Hot Chocolate	5.00
Latte	4.50
Cappuccino	4.00

TOTAL $ 13.50

EFTPOS Tendered $ 13.50

Total Items: 3

* * * * * * * * * *
Ph: (04) 802 5266
oliverestaurant.co.nz
Follow us on Facebook

805876
3251241

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	Robyn Scott	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:		Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 3:			
Address 4:			

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
							Reimbusement for meals in Auckland and staff expenses

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day)& petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14680	1		Meeting with Foundtion North 28/9/16	14.43	2.17	16.60
139000	14680	1		Breakfast - Auckland - 29/9/16	20.35	3.05	23.40
139000	14680	1		Dinner - Auckland 28/9/16	34.09	5.11	39.20
139000	14680	1		Lunch - Provider group 4 people 6/10/16	76.43	11.47	87.90
139000	~~14912~~ 11107	1		Flowers for staff member 60.00	~~52.17~~	~~7.83~~	60.00
139000	14640	1		Taxi charge	11.30	1.70	13.00
139000	14912	1		Card for staff member	6.08	0.91	6.99
139000	14025	YD0024		China trip phone reimbursement charges 18.60	~~103.13~~	~~15.47~~	118.60
139000	14912	1		Partial reimbursement of gift voucher for staff member	30.43	4.57	35.00
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	~~348.43~~ 371.71	~~52.26~~ 28.98	400.69

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	
TOTAL ACTUAL AND REASONABLE EXPENSES	0.00
LESS ADVANCE RECEIVED	400.69
AMOUNT PAYABLE TO CLAIMANT	0.00
	$400.69

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

Signature of Claimant — Date: 19-Oct-16

I certify that this claim is correct and that sufficient funds are available for payment.

Name and Designation (in block letters): Bryan Wilson Area CE Community Investment

Phone no: 9(2)(a)

Signature of Approving Manager — Date: 20/10/2016

Date Received: 21 OCT 2016

National Accounting Centre

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14680	1	145.30	21.80	167.10	Meeting with Foundtion North 28/9/16

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition

Meeting with Founder on North

TARTINE

Date 28/09/2016 Time 15:26:15
Tax Invoice 1-776636
GST #:106-324-042
Server Mel

English Breakfast	$4.00
Long Black	$3.60
Scone	$4.50
Brioche	$4.50
TOTAL	$16.60
Eftpos	$16.60

Includes GST of $2.17

Tartine
38 Ponsonby Road
Ponsonby
09 360 6876
info@tartine.co.nz
www.tartine.co.nz

Monday-Friday 7am-4pm
Saturday-Sunday 8am-3pm

Free Parking Next Door
Boardroom Hire
Private Functions
Catering

Meet Breakfast - Auckland

TARTINE

Date 29/09/2016 Time 09:22:36
Tax Invoice 1-776672
GST #:106 324-042
Server Alex

Table #: Dining1, 16
Name :
Covers :

Cafe Latte	2	$9.40
Sirgle		$-0.20
Long Black		$3.60
Pancakes		$16.50
Eggs Benedict		$17.50
TOTAL		$46.80
Eftpos		$23.40
OUTSTANDING		$23.40

Includes GST of $6.10

Tartine
38 Ponsonby Road
Ponsonby
09 360 6876
info@tartine.c nz
www.tartine.co

Monday-Friday 7a. m
Saturday-Sunday 8. 3pm

Free Parking Next D.
Boardroom Hire
Private Functions
Catering

foreign - dinner
AR trip

SAWADEE
THAI CUISINE
42A PONSONNBY ROAD AUCKLAND

GUEST BILL GST# 112-877-479

TABLE # 300 : Covers : 1

~~Man O War SAV(G)~~	10.5
Kanoom Jeeb	11.70
Pad Sam Ross	0.00
x Chicken1	24.50
Rice	3.00
AMOUNT DUE:	$49.70--
	10'50
GST total in sale:	$6.48

$ 39.20

Ter[illegible] #: 81972
[illegible]09/2016 Time: 7:31:00 m.
Terminal 2

---

lunch - group of providers orgs (4 people)

Astoria Cafe
159 Lambton Quay
Wellington
Phone: 04 4738500
Tax Invoice
G.S.T No. 120-086-308

TABLE 22
Order No:

*3	Ricotta Gnocchi	58.50
*1	Veal Ragout	20.00
*1	Hot Chocolate	4.70
*1	Latte - Sgl	4.70
	SALE TOTAL:	$87.90
	EFTPOS:	$87.90

Reprinted By: Dave

Receipt #: 5892
Date: 6/10/20[illegible] Time: 12:10:08 m.
Clerk: Dave
Terminal: 1 Terminal 1

CITY CARDS & MAGS
112 LAMBTON QUAY
WELLINGTON

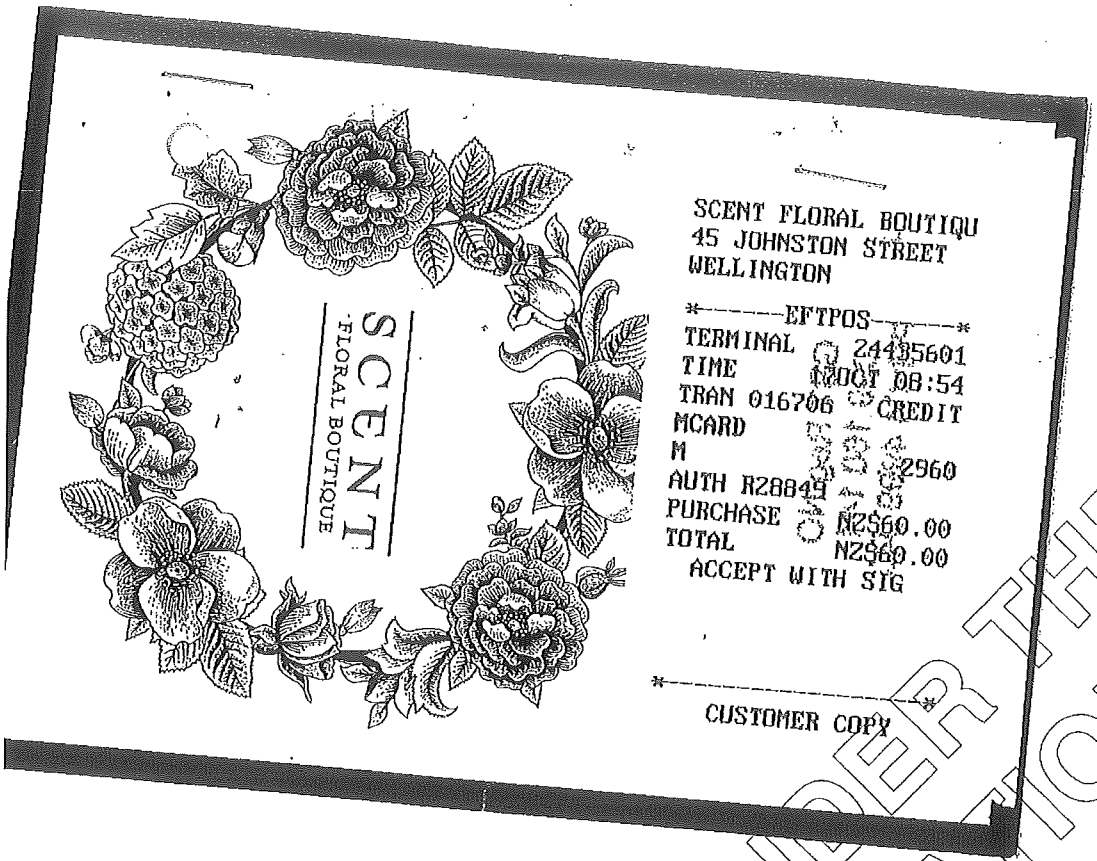
G.S.T. NO 51-854-926

SALES	6.99
SALES	7.99
ITEM CT	2
CASH	14.98
07-10-2016	PM 12:27
	9994

Card for 9(2)(a)

Crown Plaza Auckland
4 Robert Hall Ave Rendera
Ph 5 two 9 1000
take change
DISCOUNT TAXIS LTD
Taxi Ride Receipt

Date: 12/10/16
From: AUC CP to Halsey St
Passenger's Name: 9(2)(a)
Cab No: 852 Registration No: HCJ 172
Driver's Unique ID: ALKOSH1
Charges: $ 13.00 GST No: 73019280
Special Charges:



SCENT FLORAL BOUTIQU
45 JOHNSTON STREET
WELLINGTON

-------EFTPOS-------
TERMINAL 24435601
TIME 20OCT 08:54
TRAN 016706 CREDIT
MCARD
M 2960
AUTH R28849
PURCHASE NZ$60.00
TOTAL NZ$60.00
ACCEPT WITH SIG

CUSTOMER COPY

vodafone

Questions?

Visit vodafone.co.nz/billing

Account number	Invoice number	Invoice date
9(2)(a)		03 Oct 16

Itemisation

Mrs Robyn Scott 9(2)(a)

Current charges summary

Service	Date	Qty	Mins/MB used	Amount	Sub total
9(2)(a)					
Roaming charges (GST zero-rated)					
Calls	03 Oct	3	9:21	$15.00	
TXT	03 Oct	67		$53.60	
Data	03 Oct	2	71.7871 MB	$0.00	
Data Bundle					
Zone 2 200MB Data bundle	05 Sep	1		$50.00	$118.60
Roaming charges (GST zero-rated)					$118.60
Total current month's charges					9(2)(a)

MyD China trip -

$ 118.60

9(2)(a)

9(2)(a)

leaving gift

$35

From: confirmation@nzso.co.nz
Sent: Thursday, 6 October 2016 3:04 p.m.
To: Robyn Scott
Subject: Thank You for Your Order with New Zealand Symphony Orchestra

Thank You for Your Order with New Zealand Symphony Orchestra

Order Date: 06/10/2016 1:43PM
Tax Invoice/Order Number: 85049
Customer Number: 30171214

Please retain this receipt for your reference.

Your Account Information:
Robyn Scott
56 The Terrace
Ministry of Social Development
, Wellington 6140
New Zealand

Order Shipping Information
Collect tickets at my first concert

9(2)(a)

Thank you for purchasing an NZSO Gift Voucher. Please email ticketing@nzso.co.nz to redeem your voucher.

Gift Certificate(s)

Description	Total
Gift Certificate:05A0-73719	$100.00
Total Gift Certificates:	**$100.00**
Total:	**$100.00**

— 65.00

Total inclusive of GST, GST number 50-496-414

New Zealand Symphony Orchestra
Level 8, Nokia House 13-27 Manners Street Wellington 6011
Mail: P O Box 6640, Wellington 6141

contributions by staff

=$35

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

80841 9
32569955

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
18/10/16	7.00am	WGN	AKD	18/10/16	8.00pm		Provider meetings

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days - 24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes GYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	**0.00**

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount STET	GST STET	Gross Amount STET
139000	14561			Airport parking	24.96	3.74	28.70
139000	14680			Provider morning tea	30.60	4.59	35.19
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	**55.56**	**8.33**	**63.89**

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	63.89
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	**$63.89**

I cer... corre... 9(2)(a) ...and ...ental

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters):

Phone no:

Refer to attached email for approval

...-16

Signa...

Signature of Approving Manager Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14561		24.96	3.74	28.70	Airport parking
139000	14680		30.60	4.59	35.19	Provider morning tea

Date Received
4 NOV 2016
National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

countdown

A division of General Distributors Ltd.
AIRPORT PH:09 255-9697
John Goulter Drive
Tax Invoice GST No. 44-833-938

	$
ARNOTTS TIM TAM CHOC DBLE COATD 200G	3.75
TIM TAM 165-1 OFFER	-1.25
MINI DANISH MIXED 8PK	4.20
CHEESE SCONES 4PK	
Qty 2 @ $2.50 ea	
THOMAS TUMNOCK WAFERS 4PK	5.00
MINI TWIST CHEESE & PESTO	2.99
MUFFINS MIXED 6PK	2.00
Qty 2 @ $3.50 ea	
COUNTDOWN COOKIES AFGHANS 6PK	7.00
ARNOTTS TIM TAM WHITE 165G	4.00
TIM TAM 165-1 OFFER	3.75
KERI PULPY ORANGE DRINK 3L	-1.25
11 SUBTOTAL	5.00^
	$35.19

COUNTDOWN AIRPORT
AUCK AIRPORT NZ
MERCH ID:611000609009428
TERM ID: N9428084
CARD:.....2744 S
DEBIT CARD CHEQUE
PURCHASE NZ$35.19

TOTAL	NZ$35.19
APPROVED	00
18/10/16 08:47	002209

TOTAL	$35.19
EFT	$35.19
CHANGE	$0.00

Taxable Items
TOTAL includes GST $4.59

CUSTOMER NUMBER: 2002758134301
ONECARD CLUB PRICE SAVINGS
Non GST Item 1.99

Sorry we can't retrieve your information just now.
Go to countdown.co.nz to check your balance.

Thank you for visiting Countdown today.
Tell us about your experience
for a CHANCE TO WIN a
Countdown gift card
1x$500 and 5x$100 cards
to be won monthly.
Terms & Conditions apply.
Share your feedback at
www.countdownlistens.co.nz

STORE 9428 POS 084 TRANS 2209 0804 8:47 18/10/16
www.countdown.co.nz

Wellington Airport Ltd
GST NO. 53-810-221
1 TAX INVOICE

Auto Pay S 18/10/16 20:20
Receipt 062371

Short-term parking tkt
UNCOV - No. 084114
18/10/16 05:58
18/10/16 20:20
Period 1d0h0'
(G.S.T.) $33.00

Gross total $33.00

Payment
00001111 AUTH
TIME 18OCT16 20:19
TRAN 000938 CHEQUE
DEBIT 2744
PURCHASE NZD33.00
ACCEPTED

Net total $28.70
G.S.T. 15% $4.30

00E5D7A6 - 1

9(2)(a)

From: Robyn Scott
Sent: Friday, 4 November 2016 1:43 p.m.
To: 9(2)(a)
Subject: RE: Expense Claim for 9(2)(a)

Thanks – I have checked with 9(2)(a) who is 9(2)(a) and this claim is approved.
Do you want me to scan the approval form and e mail it through?

Regards
Robyn

Robyn Scott, Director, Ministry of Youth Development
☎DDI 9(2)(a) | ☎Internal Ext 9(2)(a) Mobile: 9(2)(a)

MINISTRY OF YOUTH DEVELOPMENT
TE MANATŪ WHAKAHIATO TAIOHI
Administered by the Ministry of Social Development

From: 9(2)(a)
Sent: Friday, 4 November 2016 11:28 a.m.
To: Robyn Scott
Cc: 9(2)(a)
Subject: Expense Claim for 9(2)(a)

Kia Ora Robyn
We have received the attached expense claim for 9(2)(a) this has not been approved.
If fine to pay please reply with your approval.
Thank you

9(2)(a) | Financial Services Administrator | Procurement Services
National Accounting Centre | Ministry of Social Development | ☎ DDI: 9(2)(a) | ☎ D2D: 9(2)(a)

PROCUREMENT SOLUTIONS TEAM
Level 1 / 1100 Tutanekai Street / Private Bag 3050
Rotorua 3046 | New Zealand

813858

526255

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
20/11/16	4pm	Wellington	Waikanae	20/11/16	8pm		Delivering Funding Panel Packs

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14545			Delivering Funding Panel Packs (153km @ $0.72 p/km)	95.79	14.37	110.16
139000	14910			Ara Taiohi Meeting	16.70	2.50	19.20
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	112.49	16.87	129.36

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	129.36
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$129.36

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

Signature of Claimant — Date: 21-Nov-16

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): R Scott

Phone no:

Signature of Approving Manager — Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14545		95.79	14.37	110.16	Delivering Funding Panel Packs (153km @ $0.72
139000	14910		16.70	2.50	19.20	Ara Taiohi Meeting

Date Received
24 NOV 2016
National Accounting Centr

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
1[illegible]	[illegible]	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

9(2)(a)

21/11/16.

Reprinted by Benjamin

Mojo Coffee
Aurora
56 Terrace
Wellington

TAX INVOICE
G.S.T No: 065-389-940

2	x HOT CHOCOLATE	$
1	x T/A LARGE FLAT WHITE	9.40
1	x CAPPUCCINO	5.40
		4.40

*--------EFTPOS------*TERM
INAL 20966902TIME 2
10CT16 09:24TRAN 000614
CHEQUEEFTPOS
CARD
Visa Debit 9351
AA000000003 RID:
0 PIX: 101
CD894196TVR: 008004E000 TC: 3DBE638A
ATC: 01DF
TSI: E800 PURC
HASE NZ$19.20TOTAL
NZ$19.20 ACCEPT
ED *
---* CUSTOMER COPY

SALE TOTAL: $19.20
EFTPOS: $19.20

GST total in sale: $2.50

Clerk: Benjamin
Terminal: 186 Aurora - Pos 2

814676 - 3269972

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	Robyn Scott	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:		Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 3:			
Address 4:			

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
							Meetings in Auckland with providers

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less then car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14680	1	[illegible]	Breakfast / lunch	28.52	4.28	32.80
139000	14680	1	[illegible]	Dinner	37.39	5.61	43.00
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	65.91	9.89	75.80

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	75.80
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$75.80

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

Signature of Claimant — Date: 23-Nov-16

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): M. Roberts
ASSOCIATE DCE COMMUNITY INVESTMENT.

Phone n 9(2)(a)

Signature of Approving Manager — Date: 25/11/2016

Date Received: 29 NOV 2016

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14680	1	65.91	9.89	75.80	Breakfast / lunch

National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

Dinner

madam WOO

TAX INVOICE / RECEIPT

Madam Woo - Takapuna
486 Lake Road
Takapuna Auckland 0622
Business #: 108 779 446
Phone: 09 489 4601
Email: takapuna@madamwoo.co.nz
Website: www.madamwoo.co.nz

Sale #: SP-25 2016-11-10 18:37:44
Served by Zoe T

(T83)

Description	Amount
~~Ginger Mojito~~	
Pork Hawker	$16.00
--- BREAK ---	$14.00
Char Kway Teow	$0.00
	$29.00
Subtotal:	$59.00
Total ex tax:	$51.30
- GST:	$7.70
Total Inc Tax:	$59.00
Tip:	16.00
Total:	$43.00

Signature:

Prices shown in NZD

Main
2016-11-10 19:35:47

Sale ID: 9bbcev5m

Mayfare Group

Genuine Dining Experiences

Breakfast/ lunch trip

PAPER MOON
TAX INVOICE

Outside Bar Table:	57
Guests	1
Invoice #	255013
Salesperson	Isaiah T
Date	11:29 AM 11 Nov 16

Latte Glass	4.40
Beans and Bacon	22.00
Potato Rosti	5.50
BALANCE DUE	**$ 32.80**
Includes GST	
EFTPOS	32.80
TENDERED	**$ 32.80**

GST # 83-150-084
437 Beach Rd, Mairangi Bay
Ph: 09 479 8872

Printed by onetap.systems

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
							Partnership Fund Board Meeting - 29 November 2016

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14680	YD1404		Food and snacks for the Partnership Fund Board meeting on 29 November. 13 people attending.	31.79	4.77	36.56
					0.00	0.00	
				Total	31.79	4.77	36.56

Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	36.56
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$36.56

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

Signature: 30-Nov-16 Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name (block letters): 9(2)(a)

Phone no:

Signature: Manager 30-11-16 Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative

Date Received
12 DEC 2016
National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

countdown

A division of General Distributors Limited.
Cable Car Lane | Ph: 04 499 3466
280 - 284 Lambton Quay, Wellington

Tax Invoice GST No. 44-833-938

	$
PAN AU RAISIN LARGE	
Qty 2 @ $2.40 ea	4.80
PAN AU CHOC LARGE	
Qty 2 @ $2.40 ea	4.80
APPLE TURNOVER LARGE	
Qty 2 @ $2.40 ea	4.80
MANDARIN ENCORE	
0.652 kg NET @ [illegible]/kg	3.25
BANANA CAVENDISH	
0.957 kg NET @ $3.49/kg	3.34
LOAF SLICE CRANBERRYAND PISTACHIO 300G	8.99
PASCALL FRUIT BURST CHEWS 190G	3.29
PASCALL SP/MINT IMPERIAL [illegible] 200G	3.29
11 SUBTOTAL	$36.56

COUNTDOWN CABLE CAR
CABLE CAR LNE NZ
MERCH ID:611000809009066
TERM ID: N9066005
CARD:.....3209 D
ANZ Visa Debit CHEQUE
AID A0000000031010
PURCHASE NZ$36.56

TOTAL NZ$36.56
APPROVED 00
29/11/16 07:42 009787

TOTAL	$36.56
EFT	$36.56
CHANGE	$0.00

Taxable Items
TOTAL includes GST
H Non GST Item $4.77

Thank you for visiting Countdown today.
Tell us about your experience
for a CHANCE TO WIN a
Countdown gift card
1x$500 and 5x$100 cards
to be won monthly.
Terms & Conditions apply.
Share your feedback at
www.countdownlistens.co.nz

JOIN ONECARD
Save your way, every day. PICK UP YOUR ONECARD today!

STORE 9066 POS 005 TRAN 9787 0035 7:42 29/11/16

818792-3278735

Sent to NAC via hard copy 25/11/16

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form using lemon coloured sections only)

Name:	Robyn Scott	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:		Supported by a deposit slip if 1st claim o	
Address 4:		last claim. If left blank, claim will be paid into payroll bank account.	

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
							Travel to Sydney to attend ANZOG meeting 16 Nov 2016

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days - 24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective.		35.00	0.00
	14680		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14625	1		Accommodation at Vibe Hotel Rushcutters Sydney	402.15	60.32	462.47
139000	14680	1		Breakfast	20.33	3.05	23.38
139000	14680	1		Breakfast 17/11/16	19.88	2.98	22.86
139000	14680	1		Dinner 17/11/16	28.46	4.27	32.73
139000	14680	1		Lunch 18/11/16	26.17	3.93	30.10
139000	14655	1		Taxi	9.50	1.43	10.93
139000	14655	1		Taxi	89.61	13.44	103.05
139000	14655	1		Taxi	25.96	3.89	29.85
139000	14655	1		Taxi	51.02	7.65	58.67
139000	14655	1		Taxi	18.03	2.71	20.74
139000	14680	1		Lunch with Foundaiton for Young Australians	68.41	10.26	78.67
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	759.52	113.93	873.45

Advances Already Received	
DATE	AMOUNT

17-11-16

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	873.45
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$873.45

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.	I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve
	Name and Designation (in block letters): M. Roberts ASSOCIATE DEE COMMUNITY INVESTMENT. Phone no: 9(2)(a)
R Scott 23-Nov-16	M Roberts 25/11/16
Signature of Claimant Date	Signature of Approving Manager Date

Data Input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14625	1	402.15	60.32	462.47	Accommodation at Vibe Hotel Rushcutters Sydney
139000	14680	1	163.25	24.49	187.74	Breakfast
139000	14655	1	194.12	29.12	223.24	Taxi

11018	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14918	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

MINISTRY OF YOUTH DEVELOPMENT
TE MANATŪ WHAKAHIATO TAIOHI
Administered by the Ministry of Social Development

Memo

To: Maree Roberts, Assoc DCE, Community Investment

From: 9(2)(a) Executive Assistant

Date: 9 December 2016

Security level: IN CONFIDENCE

Missing expense claim form and receipts

Please approve this memo for reimbursement for Robyn Scott, Director MYD. The original claim was sent in the internal mail to NAC on the 25 November 2016 and are now deemed missing. NAC have requested that you sign this memo so they can reimburse Robyn.

I have attached a scanned photocopy of the expense form but have not got copies of the receipts.

You signed the original document and sighted the receipts.

Action: For Approval 12 December 2016

Maree Roberts, Assoc DCE
Community Investment

12/12/2016
Date

820194-328578

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense 328578

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
07/11/16	2:30pm	Aurora	Lower Hutt	07/11/16	4:30pm		Partnership Fund meeting with Ignite Sport
06/12/16	9.00am	Aurora	Lower Hutt	06/12/16	11.00am		Partnership Fund meeting with Ignite Sport
08/12/16	8.30am	Aurora	Invercargill	09/12/16	7.30pm		Meeting with regional funders

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		Overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
139000	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*	50	0.74	37.00
			Other			
					Total	37.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day) 36.00

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	~~14680~~	1		Carparking	14.43	2.17	16.60
139000	14680	1		Lunch with MYD Director - Black Swan Café	17.22	2.58	19.80
139000	14680	1		Dinner with MYD Director - The Kiln, Invercargill	67.65	10.15	77.80
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	99.30	14.90	114.20

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	37.00
TOTAL ACTUAL AND REASONABLE EXPENSES	114.20
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$151.20

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

Signature 12-Dec-16 Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve $151.20

Name and Designation (in block letters):
ROBYN SCOTT
DIRECTOR, MYD

Phone no: 9(2)(a)

Signature of Approving Manager 12.12.16 Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14545		37.00	0.00	37.00	allowance & incidentals
139000	14680	1	99.30	14.90	114.20	Carparking

Date Received
14 DEC 2016
National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

811524

CARe PARK
NEW ZEALAND LTD

GST No. 81-682-062
PHONE 0800 CARE PARK

REGO CDL646

TIME IN

TIME OUT

FEE $ 16.60

DATE 07 NOV 2016

CONDITIONS OF PARKING
All motor vehicles enter this Car Park and park subject to the Conditions of Parking displayed at the entrance and/or throughout the Car Park and the Conditions of Parking are incorporated in the contract of parking and subject to the Conditions of Parking.

DISPLAY THIS TICKET ON YOUR DASHBOARD THIS SIDE UP

BLACK SWAN CAFE
40 GREENWICH STREET
WAIHOLA [illegible]

EFTPOS
TERMINAL 09565601
TIME 08DEC 16:38
TRAN 039342 CHEQUE
EFTPOS
CARD 6714

ASB Visa
RID: A0000000B3
PIX: 1010
TC: 4724644A7A0693B1
TVR: 00 80 04 80 00
TSI: F8 00
ATC: 004A

PURCHASE NZ$ 19.80
TOTAL NZ$ 19.80

ACCEPTED

INVOICE NUM 038344
CUSTOMER COPY

The Kiln
7 Don Street
Invercargill

GUEST BILL
GST No. 10-432-316

Table #08

	$
~~#Wen. Cider 435ml~~	~~7.70~~
~~#St Remy 1125 Db~~	~~8.60~~
#Lamb Wellington	36.90
#Oven Baked Blue Cod Lunch	36.90
#Side of Fries	4.00
AMOUNT DUE:	$94.10

- $16.30

Receipt #: 293668
Date: 9/12/2016 Time: 1:31:22 p.m.
Clerk: 10340 Caitlin
Terminal: 312 Kiln SP 2

$77.80

820194 - 3281579

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:		Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 3:			
Address 4:			

Details of travel or expense

3281579

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
21/11/16	7am	Wgtn	Chch	21/11/16	6.30pm		Meeting with Ngai Tahu Funds
06/12/16	7am	Wgtn	ChCh	06/12/16	5pm		Meeting with Singularity U youth attendees

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days - 24 hours)		63.00	0.00
139000	14660	1	PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective	2	~~35.00~~	~~70.00~~
139000	14660	1	Incidentals (do not include if claiming the overnight travel allowance)	2	~~8.00~~	~~16.00~~
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	~~86.00~~

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14660	1		Coffees for Netball NZ rep's and NZ community Trust CEO	12.52	1.88	14.40
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	14.40
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	~~0.00~~ 12.52	~~1.88~~	~~1.88~~

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	~~86.00~~
TOTAL ACTUAL AND REASONABLE EXPENSES	~~1.88~~
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	~~$87.88~~

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental and Employment Contract Terms.

9(2)(a)

Signature of Claimant — Date: 9-Dec-16

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve $14.40

Name and Designation (in block letters): Robyn Scott

Phone no:

Signature of Approving Manager — Date

Date Received
14 DEC 2016
National Accounting Centre

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
139000	14660	1	86.00	0.00	86.00	allowance & incidentals
139000	14660	1	12.52	1.88	14.40	Coffees for Netball NZ rep's and NZ community Tr

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14645	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

Reprinted by Michael

Mojo Coffee
Vic Square

Auckland

TAX INVOICE
G.S.T No: 065-389-940

Table #99

		$
1	x FLAT WHITE	4.40
1	x T/A FLAT WHITE	4.40
1	x T/A LATTE	4.70
	SOY	0.90

*------EFTPOS------*TERM
INAL 67507502TIME 1
ONQ[illegible]:04TRAN 022626
[illegible]:EFTPOS
CARD 1677
Visa RID:
A0000000003 PIX: 101
0 TC: 6A746388
97EE0AF8TVR: 008004E000
ATC: 0683
TSI: F800 PURC
BASE NZ$14.40TOTAL
NZ$14.40 ACCEPT
ED *----------
----* CUSTOMER COP[illegible]

SALE TOTAL: $14.40
EFTPOS: $14.40

GST total in sale: $1.88

Receipt #: 136370
Date: 10/11/2016 Time: 10:05:02 a.m.
Clerk: Michael
Terminal: 110 Vic Square - Pos 1

820820 - 3282664

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense 3282664

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
							Staff leaving gifts and meeting with potential providers

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days - 24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
139000	14680		25 Nov 16	Scent Floral Boutique - gifts for staff leaving	76.52	11.48	88.00
139000	14680		28 Nov 16	gotham - meeting with Kapa Haka	8.78	1.32	10.10
139000	14680		28 Nov 16	gotham - meeting with Kapa Haka	8.35	1.25	9.60
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	**93.65**	**14.05**	**107.70**

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	107.70
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$107.70

I certify that to the best of my knowledge and belief this claim is true and correct in every 9(2)(a) mental

Signature of C ec-16

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): Rosalin Scott

Phone no:

Signature of Approving Manager 14.12.16 Date

Data input fo

Date Received
16 DEC 2016
National Accounting Centre

Cost Centre				GST	Gross Amount	Narrative
139000	14680		93.65	14.05	107.70	Scent Floral Boutique - gifts for staff leaving

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

Scent Floral Boutique

Scent Floral Boutique
45 Johnston Street
Wellington
Wellington
Phone: 04 499 9040

Email: info@scentboutique.co.nz
Web: www.scentboutique.co.nz

Casual Customer

Tax Invoice/Receipt

Number: INV63267
Date: 25-Nov-16
Reference: Robyn Scott
GST No: 099 160 144

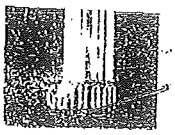
Date	Code	Description	Sales	Qty	Price	Disc%	Total
	2	Bouquet		1	$88.00		$88.00

Includes GST content of $11.48 Sales Person: Ingrid

Sub total: $88.00

TOTAL: $88.00

25 Nov 2016	Eft-Pos	Payment Received, Thank You	$88.00	Cr
		Total Payments	$88.00	
		Balance on Invoice	0.00	



Gotham

TAX INVOICE

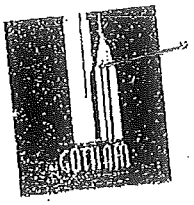
Destination	Cashier
Invoice #	827103
Salesperson	Ange M
Date	3:33 PM 29 Nov 16

Cappuccino	4.80
Hot Chocolate	5.30
BEVERAGE	$ 10.10
BALANCE DUE	$ 10.10
Includes GST	$ 1.32
EFTPOS	10.10
TENDERED	$ 10.10

info@gotham.co.nz
Thanks for popping into Gotham
WIFI Password: batman

GST # 97-787 581
4 Chews Lane, Victoria Street, Wellington
Ph: 021 541 161

Printed by onetap.systems



Gotham

TAX INVOICE

Destination	Cashier
Invoice #	827103
Salesperson	Ange M
Date	3:33 PM 29 Nov 16

Mochaccino	9.60
2 @ 4.80 ea	$ 9.60
BEVERAGE	$ 9.60
BALANCE DUE	$ 1.25
Includes GST	
EFTPOS	9.60
TENDERED	$ 9.60

info@gotham.co.nz
Thanks for popping into Gotham
WIFI Password: batman

GST # 97-787-581
4 Chews Lane, Victoria Street, Wellington
Ph: 021 541 161

Printed by onetap.systems

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

3122957

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)
Address 1:	
Address 2:	
Address 3:	Work NZW
Address 4:	

Employee no:	9(2)(a)
Bank Account Number	

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
24/02/16	8:30 a.m.	Wellington	Gisborne	25/02/16	12pm		Attended Health of Older People strategy workshop in Gisborne, conducted Interviews with local Positive Ageing Trust members

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
321200	14430	SCPACE	Overnight travel allowance (Complete Days -24 hours)	1	63.00	63.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.74	0.00
			Other			
					Total	63.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
321200	14430	SCPACE		Taxi fares on two days	89.22 101.70	13.38 13.27	101.70
				Dinner	0.00	0.00	102.60
					20.00 0.00	3.00 0.00	23.00
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
				Total	101.70	13.38 13.27	102.60 114.97

Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*

Advances Already Received	
DATE	AMOUNT

Cornil att - Recpt Rec.
Didn't pay Privately.
Meal receipt Br dinner Paid instead

112.22 89.22 13.38 125.60

TOTAL ALLOWANCES	63.00
TOTAL ACTUAL AND REASONABLE EXPENSES	114.97
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$177.97

9(2)(a)

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

1-Mar-16

Signature of Claimant — Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

125.60

Name and Designation (in block letters): Director

Phone 9(2)(a)

2 Mar 16

Signature of Approving Manager — Date

5 clear

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative

Date Received
4 MAR 2016
National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

Wellington COMBINED TAXIS

384 44 44

WELLINGTON COMBINED
TAXIS 4 4444
WELLINGTON
Tax Invoice
GST 67 694 969
TAXI MERCH 336672
TAXI ID FCW944
DRIVER ID IA141
TERMINAL 66739945
MERCHANT 10667399049
START 25/02/16 12:03
STOP 25/02/16 12:03
TRANS No. 001652
PICKUP 0004
WELLINGTON AIRPORT
DROPOFF 0021
THETERRACE/BOWENAREA
FARE $38.90
EXTRAS $0.00
ESF EX GST $0.00
TOTAL $38.90

CASH TRANSACTION

---CUSTOMER COPY---

DOWNLOAD BBAPP NOW
BBAPP.CO.NZ

Wellington COMBINED TAXIS

WELL
Tax Invoice
GST 71 .09-851
TAXI MERCH 336672
TAXI ID FLN428
DRIVER ID LIMA5
TERMINAL 66740170
MERCHANT 10667401070
START 07:44
STOP 07:44
TRANS No. 000709
PICKUP 0012
ORIENTAL BA/ROSENTH
DROPOFF 0004
WELLINGTON AIRPORT
FARE $27.60
EXTRAS $0.00
ESF EX GST $0.00
TOTAL $27.60

CASH TRANSACTION

---CUSTOMER COPY---

DOWNLOAD BBAPP NOW
BBAPP.CO.NZ

Received from .....
The sum of $ 15.00 Date .....
Trip from mid
to AP
G.S.T. No 625 915 28
Cab No 51 Rego .....
Driver KAS

Te Rau Print 159237

Fax No. 06 867 0246

Received from .....
The sum of $ 21-10 Date 24.2.16
Trip from Airport
to Hospital
G.S.T. No 20 458 526
Cab No 8 Rego .....
Driver .....

Te Rau Print 159237

Fax No. 06 867 0246

9(2)(a)

PEPPERS CAFE & BAR
40 CENTENNIAL MARINE DRIVE
GISBORNE
PHONE: 06-867-7696
GST: 104-314-716

#05362 | Steff 24/02/16 19:38:39

Table 52
1 Adult & 3 Kids $10.00

$2.00
$16.00

$33

Sub Total $33.00
GST Amount $4

EFTPOS $33.00

Hi 9(2)(a)

Please find attached original invoice for the meal I claim for my Gisborne trip. You have the claim form for this already.

Kind regards

9(2)(a)

PEPPERS CAFE & BAR
40 CENTENNIAL MARINE DRIVE
GISBORNE
PHONE: 06-867-7696
GST: 104-814-716

#053681 / Staff 24/02/16 19:38:39

Table 52

Almond PGris GLS*	$10.00
Enq. 28	
Marinated olives*	$7.00
LAMB MEATBALLS*	$16.00
TOTAL	$33.00
GST Subtotal	$33.00
GST Amount	$4.30
EFTPOS	$33.00

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

3114 1005

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	SARAH CLARK	Employee no:	9(2)(a)
Address 1:	Level 6 - Bowen State Building	Bank Account Number	
Address 2:	Bowen Street		
Address 3:	Wellington 6011	Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 4:			

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
18/03/16	8am	Wellington	Auckland	22/03/16	6pm		Positive ageing: presentations and stakeholder engagement

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		Overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.74	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
321200	14660	SCPACE		Travel - other (NZ) / Lunch - Emmalou NPL - 18/03/16	32.78	4.92	37.70
321200	14660	SCPACE		Travel - other (NZ) / Dinner - New World AKL - 21/03/16	24.21	3.63	27.84
321200	14660	SCPACE		Travel - other (NZ) / Breakfast - Box Café AKL - 22/03/16	7.83	1.17	9.00
321200	14660	SCPACE		Travel - other (NZ) / Lunch - Box Café AKL - 22/03/16	40.43	6.07	46.50
321200	14660	SCPACE		Travel - other (NZ) / PM Tea - Box Café AKL - 22/03/16	8.70	1.30	10.00
				Total	113.95	17.09	131.04

Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	131.04
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$131.04

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

SARAH CLARK — 8-Apr-16
Signature of Claimant — Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (In block letters): SACHA O'DEA / L3
Phone no: 9(2)(a)
Signature of Approving Manager — 19/4/16 Date

Date Received
20 APR 2016
National Accounting Centre

Data Input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
321200	14660	SCPACE	113.95	17.09	131.04	Travel - other (NZ) / Lunch - Emmalou NPL - 18/03

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

18/03/16.
NPL

21/03/16
AKL

[redacted]
[redacted]-905
[redacted] PLYMOUTH

TERMINAL 98876301
TIME 18MAR 13:32
RAN 026798 CHEQUE
EFTPOS
CARD 3161

PURCHASE NZ$ 37.70
TOTAL NZ$ 37.70

ACCEPTED

INVOICE NUM 026109
CUSTOMER COPY

NEW WORLD

***** MOUNT ROSKILL NEW WORLD *****
**** 53 MAY ROAD MOUNT ROSKILL ****
** SCANES SUPERMARKET LIMITED **
***** Tel: 09 621 2050 *****

ADDMORE SPRK ELDERFLOWER 750ML	$10.35
PROPER CRISPS ROSEMARY / THYME 150G	$3.79
APPLES SNITTEN	
0.340 Kg @ $4.29/Kg	$1.46
TOMATOES TASTY TRIO PP 180G	$3.49
ROSA SPAGHETTI BOLOGNESE 600G	$8.75
6 BALANCE DUE	$27.84
EFTPOS	$27.84
**********3061	
SUB TOTAL	$24.21
TOTAL GST	$3.63
TOTAL	$27.84
CHANGE	$0.00

NEW WORLD MT ROSKILL
53 MAY ROAD
MOUNT ROSKILL

----------EFTPOS----------
TERMINAL 67456401 TRAN 060217
TIME 21MAR 17:13 ACCT CHEQUE
EFTPOS 3161
AUTHORISATION
PURCHASE NZD27.84
TOTAL NZD27.84

ACCEPTED

CUSTOMER COPY

FLY BUYS

CARD NUMBER 6014351003734330
Standard Points: 1
CASHIER NAME: Ehren Newton
21/03/2016 17:13:43 04105 001 2583 0030
********** TAX INVOICE **********
*** GST No. 103-700-523 ***
ALL ITEMS GST INCLUSIVE
UNLESS SPECIFIED BY *
All promotions exclude Tobacco, Gift Card, Christmas Card Purchases and Payments on Account
THANK YOU FOR SHOPPING AT NEW WORLD

22/03/16
AKL

Box Cafe & Bar
Rutea Centre, 50 Mayoral Drive
Auckland
22/3/2016 9:47

BOX Cafe
Check: 603133 Table: 4
Server: Vivek
Terminal: 60

Regular Check

1 Flat White	4.50
1 Flat White	4.50
Sub-Total	9.00
S/Charge	0.00
Tax on S/Charge	0.00
Tip	0.00
Total	9.00

GST Amount: 1.18

TAX INVOICE
The total supply includes GST.
GST# 105- 233 - 221

EFT POS 9.00

GRAND TOTAL 9.00

T60 C7358 22/3/2016 09:48

Box Cafe & Bar is a part of
Regional Facilities Auckland
Ltd

22/03/16
AKL

Box Cafe & Bar
Rutea Centre, 50 Mayoral Drive
Auckland
22/3/2016 12:28

BOX Cafe
Check: 603161 Table: T/A
Server: Vivek
Terminal: 60

Regular Check

1 Flat White	4.50
1 Long Black	4.00
1 Flat White	4.50
1 Orange Juice	4.50
1 Earl Grey	4.00
1 Spicy Chai	5.00
1 Hot Choc	5.00
1 Spicy Chai	5.00
1 Spicy Chai	5.50
Soya Milk [0.50]	
1 Flat White	4.50
Sub-Total	46.50
S/Charge	0.00
Tax on S/Charge	0.00
Tip	0.00
Total	46.50

GST Amount: 6.07

TAX INVOICE
The total supply includes GST.
GST# 105- 233 - 221

EFT POS 46.50

GRAND TOTAL 46.50

T60 C7359 22/3/2016 12:29

Box Cafe & Bar is a part of
Regional Facilities Auckland
Ltd

22/03/16
AKL

Box Cafe & Bar
Aotea Centre, 50 Mayoral Drive
Auckland
22/3/2016 14:05

BOX Cafe
Check: 592886 Table: 19
Server: Kenneth
Terminal: 59

Regular Check

1 Brioche Cinnamon	4.50
1 Angostura Lemon	5.50
Sub-Total	10.00
S/Charge	0.00
Tax on S/Charge	0.00
Tip	0.00
Total	10.00

GST Amount: 1.31

TAX INVOICE
The total supply includes GST.
GST# 105-233-221

EFT POS 10.00

GRAND TOTAL 10.00

159 C10008190 22/3/2016 14:06

Box Cafe & Bar is a part of
Regional Facilities Auckland
Ltd

3/3

3167545

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	SARAH CLARK ✓	Employee no:	9(2)(a)
Address 1:	Level 6 - Bowen State Building	Bank Account Number	
Address 2:	Bowen Street		
Address 3:	Wellington 6011	Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 4:			

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
19/11/15	8am	Wellington	Palmerston	19/11/15	5.30pm		Promotion of Positive Ageing events

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		Overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
321200	14545	scpace	Mileage (per km) - *should be less than car hire ($47 per day) & petrol*	286km	0.74	211.64 ✓
321200	14545		Other			42327.00
					Total	42538.64

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
321200	14541	SCPACE		MV - petrol cost / Gull - Levin - 19/11/15	~~25.74~~	~~3.86~~	~~29.60~~ ✗
321200	14660	SCPACE		Travel - other (NZ) / Lunch - Bethany's - 19/11/15	35.65	5.35	41.00 ✓
321200	14660	SCPACE		Travel - other (NZ) / Excess bagage - Air NZ WLG - 08/03/16	52.17	7.83	60.00 ✓
321200	14660	SCPACE		Travel - other (NZ) / Dinner - Love Mussel WRE - 08/03/16	24.57	3.68	28.25 ✓
321200	14660	SCPACE		Travel - other (NZ) / Breakfast - Deluca WRE - 09/03/16	13.74	2.06	15.80 ✓
321200	14660	SCPACE		Travel - other (NZ) / Lunch - Deluca WRE - 09/03/16	12.00	1.80	13.80 ✓
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	163.87	~~24.58~~ 20.72	~~188.45~~ 158.85 ✓

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	42538.64
TOTAL ACTUAL AND REASONABLE EXPENSES	188.45
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	~~$42,727.09~~ $42,697.49

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

SARAH CLARK — 8/4/16 — 8-Apr-16
Signature of Claimant — Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): Phone no: 9(2)(a)

SACHA O'DEA — 15/4/16
Signature of Approving Manager — Date

Data Input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
321200	14545	scpace	211.64	0.00	211.64	allowance & incidentals
321200	14545		42327.00	0.00	42327.00	allowance & incidentals
321200	14541	SCPACE	25.74	3.86	29.60	MV - petrol cost / Gull - Levin - 19/11/15
321200	14660	SCPACE	138.13	20.72	158.85	Travel - other (NZ) / Lunch - Bethany's - 19/11/15

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

Discussed with 9(2)(a) Delete Petrol & Pay Mileage

Email Sent re claiming travel costs

RELEASED UNDER THE OFFICIAL INFORMATION ACT

19/11/15
Levin

(1)

PULL DOWN FIRMLY

Gull
LEVIN
150 OXFORD STREET
LEVIN
0800 00 GULL

19/11/2015 03:02PM
Transaction No. 187506
*** TAX INVOICE ***
GST INCLUSIVE
GST No. 88-213-157

3 REGULAR	NZ$29.60
15.920 ltr @NZ$1.859/ltr	
TOTAL	NZ$29.60
Tax amount	NZ$3.86

------EFTPOS------
TERMINAL 00717802
TIME 19NOV 15:02
TRAN 144882 CHEQUE
CARD 3161
PURCHASE NZ$29.60
ACCEPTED

CUSTOMER COPY

Thanks for choosing Gull.
Spinning kiwis' wheels
since 1998

19/11/15
PMR

(2)

BETHANY'S
Restaurant & Cafe
32a The Square - Palmerston North
Tax Invoice - G.S.T No 94 385 865

#361767 2 Sam 19/11/15 13:32:16

Table 300
KITCHEN FOOD

WITH SALAD	$0.00
2 @ $0.00 ea	$17.00
OMELETTE*	$0.00
WITH CHIPS	$24.00
THAI SALAD*	$0.00
-> CINNAMON	$0.00
-> Trim	
TOTAL	$41.00
Total Items: 5	
GST Subtotal	$41.00
GST Amount	$5.35
EFTPOS	$41.00
FOOD TOTAL	$41.00
BEVERAGE TOTAL	$0.00
Other Categories TOTAL	$0.00
COVERS TOTAL	910

Thank you

BETHANYS RESTAURANT&
32A THE SQUARE
PALMERSTON NORTH

------EFTPOS------
TERMINAL 78753301
TIME 19NOV 13:32
TRAN 022272 CHEQUE
EFTPOS 3161
CARD NZ$41.00
PURCHASE NZ$41.00
TOTAL ACCEPTED

CUSTOMER COPY

08/03/16
WLG

(3)

myreceipt

NAME: 9(2)(a)

DATE OF ISSUE: **08 03 2016**

PLACE OF ISSUE: **WLG Terminal**

SERVICE PROVIDED: **Excess Baggage Charge**

IRD Approved - Modified
Tax Invoice Receipt

TAX INVOICE
RECEIPT NO: **20160308977687**
GST NUMBER: **10-795-869**
FORM OF PAYMENT: **MASTERCARD**
TOTAL VALUE: **NZ$60.00**
Includes GST

airnewzealand.co.nz

thanks! have a great flight

AIR NEW ZEALAND LIMITED
PRIVATE BAG 92007, AUCKLAND
NEW ZEALAND

08/03/16 (4)
WRG

LOVE MUSSEL
Shop 8 - Quayside - PO Box 332
Town Basin - Whangarei 0110
New Zealand
Phone: (09) 971 8199

GST# 115-792-520

Table #199
Eat In

	$
0.5 x Steamed Mussels	0.00
# 0.5 x 1 Kg Coconut & As	12.00
#0.5 x MISC FOOD	0.00
SPECIAL OMELETTE ALREADY MADE	
#0.5 x Lemon Lime & Bitters	2.50
#0.5 x Soda	2.00
NO LEMON JUST WITH ICE	
#0.5 x Cappuccino	2.10
NOTHING ON TOP	
# 0.5 x Decaf	0.25
#0.5 x Flat White	2.40
SALE TOTAL:	$28.25
EFTPOS:	$28.25

Date 8/03/2016 Time: 7:37:40 p.m.
Clerk: Ecosse
Terminal: 2 Reception

LOVE MUSSEL CAFE
10 DENT STREET
WHANGAREI

EFTPOS
TERMINAL ...826102
TIME 08MAR16 19:37
TRAN 009022 CHEQUE
EFTPOS ...3161
CARD ...
PURCHASE NZ$28.25
TOTAL NZ$28.25
APPROVED

CUSTOMER COPY

2/3

09/03/16
WRE

(6)

DELUCA
6-8 RUST AVENUE
WHANGAREI

------EFTPOS------
TERMINAL 24124201
TIME 09MAR 13:37
TRAN 020200 CHEQUE
EFTPOS
CARD 3161
PURCHASE NZ$ 13.80
TOTAL NZ$ 13.80
ACCEPTED

INVOICE NUM 018638
CUSTOMER COPY

DELUCA CAFE
☎ (09)4387154
GST № 097546797

(5)

DELUCA
6-8 RUST AVENUE
WHANGAREI

<------EFTPOS------
TERMINAL 24124201
TIME 09MAR 08:
TRAN 020092 CHEQ
EFTPOS
CARD ...31
PURCHASE NZ$ 15.
TOTAL NZ$ 15.
ACCEPTED
INVOICE NUM 0186
CUSTOMER COPY

DELUCA CAFE
☎ (09)4387154
GST № 097546797

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	SARAH CLARK	Employee no:	9(2)(a)
Address 1:	Level 6 - Bowen State Building	Bank Account Number	
Address 2:	Bowen Street		
Address 3:	Wellington 6011	Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 4:			

Details of travel or expense 3158468

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
19/04/16	8.30 am	Wellington	Rotorua	21/04/16	6.30pm		Positive ageing: presentations and stakeholder engagement

Complete here for reimbursement of Allowances (Refer to your individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		Overnight travel allowance (Complete Days / 24 hours)		63.00	0.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.74	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
321200	14660	SCPACE		Travel - other (NZ) / Dinner - Nakontong Thames - 19/04/16	~~32.78~~ 31.11	~~4.92~~ 15.79	18.50
321200	14660	SCPACE		Travel - other (NZ) / Breakfast - Sola Café Thames - 20/04/16	~~24.21~~ 18.45	~~8.63~~ 2.55	11.00
321200	14660	SCPACE		Travel - other (NZ) / Breakfast - Jandals Cafe Whitianga - 21/04/16	~~7.83~~ 7.13	~~1.17~~ 1.07	8.40
321200	14660	SCPACE		Travel - other (NZ) / Dinner - Spotless Facility Hamilton - 22/03/17	~~40.43~~ 34.37	~~6.07~~ 5.63	9.00
					~~8.70~~	~~1.30~~	
					40.79	6.09	46.90
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST Invoices*				Total	~~113.95~~	~~17.09~~	~~131.04~~

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	~~134.04~~
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	~~$134.04~~

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

SARAH CLARK — 28-Apr-16
Signature of Claimant — Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (In block letters): 9(2)(a)
Phone no:

SACHA O'DEA
Signature of Approving Manager — Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
321200	14660	SCPACE	31.11	15.79	46.90	Travel - other (NZ) / Dinner - Nakontong Thames -

Date Received
11 MAY 2016

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel,Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

Jandals Cafe

5 Albert St Whitianga
Ph 07 866 0323
GST # 105-908-806

21/04/2016 000000#004316
7:36AM 01 Paula

Flat White	$	4.40 A
Muffin	$	4.00 A
SUBTOTAL	$	8.40
ITEMS	-	2
***TOTAL		
	$	8.40
CASH	$	20.00
CHANGE	$	11.60

Spotless Facility Services (NZ) Limited
TAX INVOICE
GST #: 13-478-198

Receipt

Hot Drinks	$4.00
8oz T/A Coffee	$3.80
FLAT WHITE	$0.20
Number	5 TYLIP
Hot Snacks	$5.00
PIE	$5.00
GST NZ	$1.17
Total	$9.00

$0.00

Terminal: HLZ D Velluto (1
Served by: Ravi
Date: 21-APR-2016 17:56PM
Dkt: GST inc where applicable

Thank you for your business !!

[redacted] RESTAURANT
[redacted] Thames
PH : 07-8686821
GST : 101-692-825

Roti	2.00
R[redacted]	1.00
T/A Main Meat	15.50
ITEM CT	3
CARD 2	18.50

Thank You
Call Again
19-04-2016 19:12

[redacted] CAFE
[redacted] STREET
THAMES

TAX INVOICE
GST No 83-163-976

REG 20 04-2016 09:11
000005
CT 1

1 F/W & LATTE	4.50
1 TOAST & TOP	6.50
TL	11.00
CASH	11.00

NEW / ~~AMEND~~

Work Address

Requested By : 9(2)(a) 13/4

Vec 14/4 Actioned By : [illegible] 14-4-16

9(2)(a) Checked By 14/4/16

3143330

MI DE TE

Expens

(Type data into form,

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:		Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 3:			
Address 4:			

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
							Wallplanner for Office of Seniors

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		Overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.74	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
21200	11450			Wallplanner for Office for Seniors 18/2/16	9.56 0.00	1.43 0.00	10.99
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
				Total	0.00	0.00	10.99 0.00

Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	0.00
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$0.00

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

4-Apr-16

Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): SARAH CLARK

Phone no:

Signature of Approving Manager

8/4/16

Date

Date Received 13 APR 2016

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative

1016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
1017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
4620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

National Accounting Centre

Whitcoulls

GST# 106-829-063
Whitcoulls 2011 Limited
For store details or to provide us with any feedback, visit our website: Whitcoulls.co.nz or Ph
Branch 9271 Wellington
Operator 370938 Till 4
Date 18/02/16 Time 09:40 Tr# 4128848

Tax Invoice / Credit Note

Code	Qty	Price	Extn
2016 Wallplanner Collins A1 DS Laminated			
5699461	1	10.99	10.99
8 - Promo Discount			

Total	10.99
Total GST 15%	1.43

WHITCOULLS 364
226-256 LAMBTON Q
WELLINGTON

----------EFTPOS----------
TERMINAL 90236404 TRAN 011993
TIME 18FEB 09:40 ACCT CHEQUE
EFTPOS 2789
VISA DEBIT
RID: A0000000003
PIX: 1010
AUTHORISATION
PURCHASE NZD10.99
TOTAL NZD10.99

ACCEPTED

CUSTOMER COPY
EFTPOS 10.99

Please choose carefully as we do not refund if you change your mind.
We are happy to exchange items that are in saleable condition within 28 days with proof of purchase

DvDs, electronic games and eReaders cannot be returned unless Faulty or defective

If the goods are faulty, we will meet our obligations under the Consumer Guarantees Act to provide a remedy
Thank you

9271-4-4128848

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:		Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.	
Address 3:			
Address 4:			

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
03/08/16							Team planning day
10/08/16							Tauranga Silver Symposium

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		PRIVATE STAY overnight travel allowance (Complete Days - 24 hours)		63.00	0.00
	14660		PRIVATE STAY overnight travel allowance (Part Days) - excludes CYF Collective		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.72	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
321200	14680	1		Team planning morning tea	13.66	2.05	15.71
321200	14912	1		Tauranga Silver Symposium	21.23	3.19	24.42
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	34.90	5.28	40.13

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	40.13
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$40.13

I certify that to the best of my knowledge and belief this claim is true and that I have complied with the Departmental Employment Contract Terms.

9(2)(a)

S

17-Aug-16
Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): Audley Bancroft

Phone no:

Signature of Approving Manager

17/8/16
Date

Date Received

Data input for NAC

19 AUG 2016
National Accounting Centre

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
321200	14680	1	13.66	2.05	15.71	Team planning morning tea
321200	14912	1	21.23	3.19	24.42	Tauranga Silver Symposium

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)

countdown

A division of General Distributors Limited,
Cable Car Lane | Ph: 04 499 3466
280 - 284 Lambton Quay, Wellington

Tax Invoice GST No. 44-833-938

	$
MUFFINS MIXED 6PK	3.50
MUFFIN ORANGE CHOCOLATE CHIP 6PK	3.50
BANANA CAVENDISH	
0.922 kg NET @ $3.49/kg	3.22
GRAPE GREEN 500G PP	5.49
4 SUBTOTAL	$15.71

COUNTDOWN CABLE CAR
CABLE CAR LNE NZ
MERCH ID:611000609009066
TERM ID: N9066086
CARD:.....0107 T
ASB Visa CREDIT
AID A0000000031010
ARQC BAD4819378C13062
PURCHASE NZ$15.71

TOTAL NZ$15.71
APPROVED 00
03/08/16 08:11 006406

TOTAL	$15.71
EFT	$15.71
CHANGE	$0.00

Taxable Items
TOTAL includes GST $2.05
Non GST Item

Thank you for visiting Countdown today.
Tell us about your experience
for a CHANCE TO WIN a
Countdown gift card
1x$500 and 5x$100 cards
to be won monthly.
Terms & Conditions apply.
Share your feedback at
www.countdownlistens.co.nz

STORE 9066 POS 086 TRANS 6406 0806 8:12 3/08/16

Team planning morning tea

[redacted]
WATT PCH SLCS [redacted] $4
2 @ [redacted]
PROL PICK N [redacted]
0.090 Kg @ $9.90/Kg $0
PROLIFE VITALITY
0.090 Kg @ $26.90/Kg $3
BEEF SCOTCH FILLET
APPLES PACIFIC ROSE
0.420 Kg @ $3.49/Kg
BEANS FSI GREEN
0.160 kg @ $25.00/Kg
CARROTS
0.555 Kg @ [redacted]/Kg
COURGETTES GREEN
0.085 kg @ $13.99/Kg
SCONE/MUFFIN

BALANCE DUE $4
EFTPOS $4
[redacted]0007
SUB TOTAL $3
TOTAL GST $
TOTAL $4

CHANGE $

BROOKFIELD NEW WORLD
69 WELLESLEY ROAD
TAURANGA

EFTPOS
TERMINAL 1400/14 TRAN 016153
TIME [redacted] ACCT CHEQUE
EFTPOS ...0107
ASB Visa
AID: A0000000003
PIX: 1010
AUTHORISATION
PURCHASE NZ$41.91
TOTAL NZ$41.91

Dinner Tauranga.
$24.42 total.

ACCEPTED

CUSTOMER COPY

FLY BUYS

CARD NUMBER 6014355727344524
Standard Points: 1
Bonus Points: 0

CASHIER NAME: ALESHAK
10/08/2016 16:32:34 03244 014 3405 6475
TAX INVOICE
GST No. 90-152-845
All items GST inclusive
unless otherwise specified by [redacted]
All promotions exclude tobacco, gift
card, christmas card purchases and
[redacted]
retail[redacted]base
[redacted]

317973

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Expense Claim Form

(Type data into form, using lemon coloured sections only)

Name:	9(2)(a)	Employee no:	9(2)(a)
Address 1:		Bank Account Number	
Address 2:			
Address 3:			
Address 4:			

Supported by a deposit slip if 1st claim or bank account details have changed since last claim. If left blank, claim will be paid into payroll bank account.

Details of travel or expense

Date of Departure	Time of Departure	Home Location	Destination Location	Date of Return	Time of Return	Ref	Reason for travel or expense *(Please provide adequate explanations)*
26/05/16	8:30am						Travel from Rotorua - WellingtonAirport to Bowen State

Complete here for reimbursement of Allowances (Refer to your Individual Employment Contract as to whether you claim *'Actual & Reasonable' expenses or allowances.)*

Cost Centre	Nominal	Project	Type of Allowance	Quantity	@ Rate	Amount
	14660		Overnight travel allowance (Complete Days -24 hours)		63.00	0.00
	14660		Overnight travel allowance (Part Days)		35.00	0.00
	14660		Incidentals (do not include if claiming the overnight travel allowance)		8.00	0.00
	14545		Mileage (per km) - *should be less than car hire ($47 per day) & petrol*		0.74	0.00
			Other			
					Total	0.00

Complete here for reimbursement of 'Actual & Reasonable' expenses (Guidance - reasonable limits $63 per day/$35 per half day)

Cost Centre	Nominal	Project	Reference	DETAILS OF EXPENSES (Actual & Reasonable costs) *Refer to Financial Policies for expense guidelines*	Net Amount	GST	Gross Amount
321200	14640	1		Taxi - wellington airport to Bowen State	40.52	6.08	46.60
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
					0.00	0.00	
Attach supporting documentation and valid GST invoices referenced to above items - *EFTPOS and Credit Card receipts are not valid GST invoices*				Total	40.52 S78 6.08 40.82		46.60

Advances Already Received	
DATE	AMOUNT

TOTAL ALLOWANCES	0.00
TOTAL ACTUAL AND REASONABLE EXPENSES	46.60
LESS ADVANCE RECEIVED	0.00
AMOUNT PAYABLE TO CLAIMANT	$46.60

I certify that to the best of my knowledge and belief this claim is true and correct in every particular and that I have complied with the Departmental Policies and Employment Contract Terms.

9(2)(a)

31-May-16
Date

I certify that to the best of my knowledge and belief this claim is correct in all particulars and within my delegation to approve

Name and Designation (in block letters): ALEX MCKENZIE, ACTING GM ADI POLICY

Phone no: 9(2)(a)

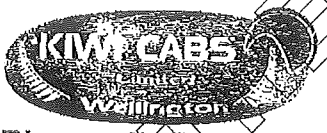
31/05/16
Signature of Approving Manager — Date

Data input for NAC

Cost Centre	Nominal	Project	Net Amount	GST	Gross Amount	Narrative
321200	14640	1	40.52	6.08	46.60	Taxi - wellington airport to Bowen State

Date Received
2 JUN 2016
National Accounting Centre

11016	Secondments - Travel	14561	Car Parking	14620	Accommodation (NZ)	14910	Relationship Management
11017	Secondments - Accommodation	14545	Mileage	14660	Travel Other (NZ)	14912	Staff Recognition (no FBT)
14620	Accommodation (NZ)	14640	Taxi Fares	11245	Professional Subscriptions	11102	Staff Recognition (FBT liable)



Phone : 389 99 09
THE LOWEST TAXI FARE

Tax Invoice
GST 76-753-105
TAXI MERCH 470576
TAXI ID GEL176
DRIVER ID ALLAN200
TERMINAL 47057680
MERCHANT 10470576080
START 26/05/16 08:29
STOP 26/05/16 08:29
TRANS No. 001606
EFTPOS
FARE $44.30
EXTRAS $0.00
ESF EX GST $2.30
TOTAL $46.60

EFTPOS ACCEPTED

---CUSTOMER COPY---

THANK YOU FOR
USING KIWI CABS