

**INTERNATIONAL STUDENT
ASSOCIATION**



CLAIM FORM FOR ADVANCE PAYMENTS

A	<i>(To be completed by the claimant)</i>		
	Name:		
	Address:		
	Details of Amount Claimed:		Amount(s)
	<p>I hereby take an obligation to bring all receipts for authorized purchases and pay a monetary difference between value above and total value of receipts returned (if applicable).</p> <p>Signature of claimant*: Date:</p>	Total claimed	\$
B	<p><i>(To be completed by Treasurer)</i></p> <p>Approved at meeting on .../.../....</p>	<p>Amount paid</p> <p>Cheque No</p>	\$