Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM	FOR	TRANSPOR	RT AND	SUBSISTEN	ICE
Name of Claima	nt					
Address						
					ode	
Telephone numb	er		Fax	number		
MEE PARTY*/ORGA *Delete where not app	NISATION		MANAGEMENT IINISTRATION			
DEPARTURE FROM	M RESIDENC	E	ARRIVAL AT I	RESIDENCE		
DATE	TIME		DATE	T	ME	
			EXPE	NSES		
ACCOMMODA (Telephone and ba			xpenses <i>(Slips</i>	must be a	ttached) MOUNT CLAI	MED
COST OF AIR Journey from	TRAVEL (P	<i>lease a</i> Jou	nttach flight tic rney to	ket)		
COST OF TRA	VELLING B	Y CAR	REGISTRATIO	N NO		
(Details of Journey) Journey From Journey To		Kilometers travelled	Engine capa- city of vehicle		E USE ONLY Amount	
		*				
SIGNATURE OF	CLAIMAN	Г				DATE
FOR OFFICE US	E ONLY					
Certified correct			ate	Approve	ed	Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	<u>CLAIM I</u>	<u>FOR TRANSP</u>	<u>ORT AN</u>	ID SUBSISTEN	CE
Name of Claima Address					
Telephone numb	oer	Fa	x numbe	r	
PARTY*/ORGA*Delete where not app	NISATION*/	G OF WORKING ADMINISTRATIO	GROUPS:)N*	6 FEBRUARY 199	2
DEPARTURE FROM	M RESIDENCE	ARRIVAL A	T RESIDEN	ICE	
DATE	TIME	DATE		TIME	4
		EXI	PENSES		
ACCOMMODA (Telephone and ba		of expenses <i>(Slij</i> ded)	os must b	<i>ne attached)</i> AMOUNT CLAIM	ED
COST OF AIR T	ΓRAVEL (Plea	ese attach flight in Journey to	ticket)		
COST OF TRAV	/ELLING BY	CAR REGISTRAT	ION NO		
(Details of Jour	ney)				
Journey From	Journey To	Kilometers travelled	Engine capa- city of vehicl	Tariff	Amount
SIGNATURE OF	CLAIMANT				
				DA	TE
FOR OFFICE USE	ONLY				1 - 1

Certified correct

Date

Approved

Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FO	OR TRANSPOR	I AND S	ORSIS I ENG	<u>, E</u>
Name of Claimant					
Address					
				de _	
Telephone number	r	Fax n	umber		
	ISATION*/A	COMMITTEE: WODMINISTRATION*			BRUARY 1992
DEPARTURE FROM	RESIDENCE	ARRIVAL AT R	ESIDENCE		
DATE	TIME	DATE	TII	ME	
		EXPEN	ISES		
ACCOMMODATI		f expenses <i>(Slips</i>)	must be at	tached) MOUNT CLAIM	IED
COST OF AIR TE Journey from	RAVEL (Pleas	e attach flight tick lourney to	ket)		
COST OF TRAVE	ELLING BY C	AR REGISTRATIO	N NO		
(Details of Journey) Journey From Journey To		Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	USE ONLY Amount
SIGNATURE OF C	CLAIMANT			D/	ATE
FOR OFFICE USE	ONLY				

Approved

Date

Date

Certified correct

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FOR	TRANSPOR	RT AND	SUBSISTENCE	
Name of Claimar	nt				
Address					
				ode	
Telephone numb	er				
	NISATION*/ADM			: 10 FEBRUARY 1	
DEPARTURE FROM	M RESIDENCE	ARRIVAL AT I	RESIDENCE		
DATE	TIME	DATE		TME	473
		EXPE	NSES		
	TION Nature of e	xpenses <i>(Slips</i>	must be	attached) AMOUNT CLAIMED	
COST OF AIR Tourney from	TRAVEL (Please a	attach flight tic urney to	ket)		
COST OF TRA	VELLING BY CAP	REGISTRATIO	N NO		
(Details of Jou Journey From	etails of Journey)		Engine capa- city of vehicle	FOR OFFICE US	SE ONLY Amount
		,			
SIGNATURE OF	CLAIMANT			DAT	E
FOR OFFICE US	E ONLY				

Approved

Date

Date

Certified correct

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

CLAIM FOR TRANSPORT AND SUBSISTENCE

Name of Claima Address							
				ode			
Telephone numb	per						
					UARY 1992		
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT	RESIDENCE				
DATE	TIME	DATE	1	TME			
		EXPE	NSES				
(Telephone and ba	ACCOMMODATION Nature of expenses (Slips must be attached) AMOUNT CLAIMED (Telephone and bar charges excluded) COST OF AIR TRAVEL (Please attach flight ticket) Journey from Journey to						
travelled cap city of		Engine capa-	FOR OFFICE Tariff	USE ONLY Amount			
SIGNATURE OF CLAIMANT DATE FOR OFFICE USE ONLY							

Approved

Date

Date

Certified correct

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIN FUR	RIKANSPU	KI AND	208212 I EI	NCE
Name of Claimar	nt				
Address					
				ode	
Telephone numb	er	Fax	number		
	NISATION*/ADM				FEBRUARY 1992
DEPARTURE FROM	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	T	IME	
		EXPE	NSES		
	TION Nature of e	expenses (Slips		nttached) MOUNT CLAI	MED
COST OF AIR 1 Journey from	TRAVEL (Please a	attach flight tic Irney to	ket)		
COST OF TRAV	ELLING BY CAR	REGISTRATIO	N NO		
(Details of Jour					
Journey From	Journey To	Kilometers travelled	Engine capa- city of vehicle	Tariff	E USE ONLY Amount
SIGNATURE OF				С	DATE
OR OFFICE USE	UNLY				

Approved

Date

Date

dpcod60

Certified correct

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FO	R TRANSPO	RT AND	SUBSISTENC	E
Name of Claim	ant				
Address					
		<u> </u>			
				ode	
Telephone num	ber	Fax	number		
PARTY*/ORG	ANISATION*/AD			FEBRUARY 199	
DEPARTURE FRO	OM RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE		TIME	
					-17
		EXPE	NSES		
(Telephone and L	ATION Nature of par charges excluded TRAVEL (Please	ı)	A	attached) MOUNT CLAIME	D
COST OF TRA	VELLING BY CA	R REGISTRATIO	N NO		
(Details of Jou Journey From	Details of Journey) Journey From Journey To Kilon trav		Engine capa-city of vehicle	FOR OFFICE U	SE ONLY Amount
SIGNATURE OF				DAT	E

Approved

Date

Date

dpcod50

Certified correct

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FO	R TRANSPOR	T AND SUBSISTENCE
Name of Clair	mant		
Address			
			Postal Code
Telephone nu	mber		
	GANISATION*/AD		RKING GROUP 5 : 10 FEBRUARY 1992
DEPARTURE F	ROM RESIDENCE	ESIDENCE	
DATE	TIME	DATE	TIME
		EXPEN	SES
ACCOMMO	DATION Nature of	expenses (Slips n	nust be attached) AMOUNT CLAIMED
(Telephone and	d bar charges excluded	0	
COST OF AI Journey from	R TRAVEL (Please	attach flight ticke urney to	et)

1000		ELLING BY CAF	REGISTRATIO	ON NO			
	(Details of Jour Journey From	ney) Journey To	Kilometers	Engine		E USE ONLY	
			travelled	capa- city of vehicle	Tariff	Amount	

SIGNATURE OF CLAIMANT	DATE

FOR OFFICE USE ONLY

Certified correct

Date

Approved

Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM F	OR TRANSPO	RT AND	SUBSISTE	VCE
Name of Claima	nt				
Address	***************************************				
-				Code	
Telephone numb	per	Fax	number		
1	NISATION*/A	ECURITY SUB-CO			RY 1992
DEPARTURE FROM	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	7	TIME	· · · · · · · · · · · · · · · · · · ·
		EXPE	NSES		
ACCOMMODA:	TION Nature o	f expenses <i>(Slips</i>	must be a	ettached) AMOUNT CLAIR	MED
(Telephone and ba	r charges exclude	nd)			
COST OF AIR T Journey from	RAVEL (Please	e attach flight tic ourney to	ket)		
COST OF TRAV	ELLING BY CA	AR REGISTRATIO	N NO		
(Details of Jour		1 80	Leura	I FOR OFFICE	HEE ONLY
Journey From	Journey To	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	Amount
IGNATURE OF	CLAIMANT			DA	ATE
OR OFFICE USE	ONLY		have a		

Approved

Date

Date

Certified correct

Convention for a Democratic South Africa

		CLAIM	FOR	TRANSPOR	RIAND	SUBSISTEN	UE .
Name of Claim Address	nant						
Address							
						ode .	
Telephone nur	nber		•••••	Fax	number	**	************
	SANIS	SATION				UP 1: 11 FEBR	UARY 1992
DEPARTURE FR	OM R	ESIDENCI	•	ARRIVAL AT	RESIDENCE		
DATE	T	IME		DATE	1	IME	
				EXPE	NSES		
ACCOMMOD (Telephone and				kpenses <i>(Slips</i>	must be a	attached) MOUNT CLAIM	1ED
	R TRA		0250 A	ttach flight tic	ket)		
COST OF TR	AVE	LLING B	Y CAR	REGISTRATIC	N NO		
(Details of Journey) Journey From Journey To		То	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	USE ONLY Amount	
SIGNATURE (OF CL	.AIMAN	г			Di	ATE
FOR OFFICE	JSE (ONLY					
Cartified correct			0	•••	Annroy	red.	Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM F	OR TRANSPO	RT AND	SUBSISTEN	CE	
Name of Claima	nt					
Address						
				de		
Telephone num		Fax				
	ANISATION*/	ROUP 2 OF WOR ADMINISTRATION			RUARY 1992	
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT	RESIDENCE			
DATE	TIME	DATE	ना	ME		
		EXPE	NSES			
ACCOMMODA (Telephone and b		of expenses (Slips	must be a	ttached) MOUNT CLAII	MED	
COST OF AIR Journey from		ase attach flight tid Journey to	cket)			
COST OF TRA	VELLING BY	CAR REGISTRATIO	ON NO			
(Details of Journey From	Journey T	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	Amount	
SIGNATURE OF	F CLAIMANT			D	ATE	_
FOR OFFICE US	SE ONLY					
Certified correct		Date	Approve	ed	Date	

Convention for a Democratic South Africa

	CLAIM	FOR	TRANSPO	RT AND	SUBSISTE	NCE
Name of Claim	ant					
Address				- 5 7		
					ode	
Telephone num						
PARTY*/ORG	ANISATION		WORKING GRO			1992
DEPARTURE FR	OM RESIDENC	E	ARRIVAL AT	RESIDENCE	-	
DATE	TIME	EXPENSES Nature of expenses (Slips must be attached)	. 7			
	-		EXPE	NSES		
ACCOMMOD			xpenses <i>(Slips</i>	must be a	ittached) MOUNT CLA	MED
COST OF AIR Journey from	TRAVEL (P		ttach flight tic rney to	ket)		
COST OF TR	AVELLING B	Y CAR	REGISTRATIO	N NO		
(Details of Jo						
Journey From	Journey	, To	Kilometers travalled	Engine capa- city of vehicle	FOR OFFIC Tariff	Amount
SIGNATURE O	F CLAIMAN	г				DATE
FOR OFFICE U	SE ONLY					
Certified correct		D	ate	Approv	ed	Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

CLAIM FOR TRANSPORT AND SUBSISTENCE

	OLANII.	OII THAILOT O	III AIID		
Name of Claim	nant				
Address					
			Postal Co	ode	
Telephone nur	mber	Fax	number		
PARTY*/ORC	SANISATION*/	OF WORKING GRO ADMINISTRATION			
DEPARTURE FA	OM RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	T	IME	
		EXPE	NSES		
	DATION Nature	of expenses (Silps	must be a	ttached) MOUNT CLAIN	MED
COST OF All Journey from	R TRAVEL (Plea	se attach flight tid Journey to	ket)		
COST OF TR	AVELLING BY	CAR REGISTRATIO	N NO		
(Details of Jo					
Journey From	Journey To	o Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	Amount
SIGNATURE (F CLAIMANT			D	ATE
FOR OFFICE L	JSE ONLY				
Certified correct		Date	Approv	ed	Date

Convention for a Democratic South Africa

	CLAIM	FOR 3	RANSPOR	RT AND	SUBSISTEN	CE
Name of Claima	nt	•••••				
Address	************				*****	
					de	
Telephone numb					00	
	NISATION*					FEBRUARY 1992
DEPARTURE FRO	M RESIDENCE		ARRIVAL AT	RESIDENCE		
DATE	TIME		DATE	T	ME	
			EXPE	NSES		
ACCOMMODA			oenses <i>(Slips</i>	must be a	ttached) MOUNT CLAII	MED
COST OF AIR Journey from	TRAVEL (PI	ease att Journ	tach flight tic ney to	ket)		
COST OF TRA	VELLING BY	CAR F	REGISTRATIO	N NO		
(Details of Jou Journey From	irney) Journey	То	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	Amount
SIGNATURE OF	CLAIMAN	Г			Ď	ATE
FOR OFFICE US	SE ONLY			- Production and and and and		
Certified correct		Da	te	Approv	ed	Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM	FOR	TRANSPOR	RT AND	SUBSISTER	ICE
Name of Claims	ant					
Address			••••			
Telephone num			Fay		ode	
	-					
MEETING PARTY*/ORG. *Delete where not as	ANISATION*					FEBRUARY 1992
DEPARTURE FRO	OM RESIDENCE		ARRIVAL AT	RESIDENCE		4
DATE	TIME		DATE	T	IME	
			EXPE	NSES		
ACCOMMOD			kpenses <i>(Slips</i>	must be a	ntteched) MOUNT CLAI	MED
COST OF AIR Journey from			ttach flight tic ney to	ket)		
COST OF TRA	AVELLING BY	CAR	REGISTRATIC	N NO	*************	
(Details of Journey From			Kilometers travelled	Engine capa- city of vehicle	FOR OFFIC Tariff	E USE ONLY Amount
SIGNATURE O	F CLAIMANT					DATE
FOR OFFICE U	SE ONLY					
Certified correct		D	ate	Approv	ed	Date

deced50

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FOR	R TRANSPO	RT AND	SUBSISTE	NCE
Name of Claimant	t				
Address					
			Partal Car		
Telephone number	r		Postal Co	ae	
	ANISATION*/ADM				17 FEBRUARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	Т	IME	
		EXP	ENSES		
ACCOMMODA	ATION Nature of ex	kpenses (Slips m	ust be attach	ned) MOUNT CLA	IMED
(Telephone and bar	charges excluded)				
COST OF AIR Journey from	TRAVEL (Please of Journal	attach flight tick rney to	cet)		
COST OF TRA	VELLING BY CA	R REGISTRA	TION NO		
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	CE USE ONLY Amount
SIGNATURE OF	CLAIMANT			J	DATE
FOR OFFICE US	SE ONLY				
Certified correct	Date	At	proved		Date

Convention for a Democratic South Africa

	CLAIM FOR	R TRANSPOR	T AND	SUBSISTENC	E	
Name of Claiman	t					
Address						
			Postal Co	ie		
Telephone numbe	r	Fax n	umber			
The same of the sa	TING OF DAILY I ANISATION*/ADM				JARY 1992	
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT R	ESIDENCE			
DATE	TIME	DATE	T	IME		
		EXPEN	NSES			
ACCOMMODA (Telephone and bar	ATION Nature of excharges excluded)	xpenses (Slips mus	st be attach	ned) MOUNT CLAIME	ED	
COST OF AIR Journey from	TRAVEL (Please a	attach flight ticker rney to				
COST OF TRA	VELLING BY CA	R REGISTRATI	ON NO			
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	USE ONLY Amount	
SIGNATURE OF	CLAIMANT			DAT	re	_
FOR OFFICE U	SE ONLY					
Certified correct	Date	Appr	roved	Da	te	

Convention for a Democratic South Africa

	CLAIM FO	R TRANSPO	RT AND	SUBSISTEN	CE
Name of Claiman	t				
Address					
				de	
Telephone number		Fax 1			
					RUARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT I	RESIDENCE		
DATE	TIME	DATE	Т	IME	
		EXPE	NSES		
ACCOMMODA (Telephone and bar	ATION Nature of	expenses (Slips mi	ust be attach	hed) MOUNT CLAIM	ED
	TRAVEL (Please	attach flight ticke urney to	et)		
COST OF TRA	VELLING BY C	AR REGISTRAT	ION NO		
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	USE ONLY Amount
SIGNATURE OF	CLAIMANT			DA	TE
FOR OFFICE US					
Certified correct	Date	An	proved	D	ate

Convention for a Democratic South Africa

	!	CLAIM FOR	TRANSPO	<u> PRT ANI</u>	D SUBSISTENCE
Name of Claima	nt				
Address					
				Postal C	Code
Telephone numb	er				
	ANI				ROUP 1: 17 FEBRUARY 1992
DEPARTURE FR	ом і	RESIDENCE	ARRIVAL AT	RESIDENCI	E
DATE	7	TIME	DATE	T	TIME
			EXP	ENSES	
ACCOMMOD (Telephone and bo		ON Nature of exp	oenses (Slips m	ust be attac	ched) AMOUNT CLAIMED
COST OF AIR Journey from	TR	AVEL (Please at Journ	tach flight tick ney to	ket)	
COST OF TR	AVE	LLING BY CAR	REGISTRA'	TION NO	
(Details of Journey From	ney)	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE USE ONLY Tariff Amount
SIGNATURE O	F CL	AIMANT			DATE
FOR OFFICE U	JSE	ONLY			
Certified correct		Date	Aı	proved	Date

Convention for a Democratic South Africa

	CLAIM FO	R TRANSPO	RT AND	SUBSISTEN	NCE
Name of Claimant					
Address					
			Postal Co	ode	
Telephone number		Fax	number		
PARTY*/ORGAL *Delete where not applical	NISATION*/AD	F WORKING G MINISTRATION			1992
DEPARTURE FROM	A RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	Т	TIME	
		EXP	ENSES		
ACCOMMODA'		expenses (Slips m	ust be attac	hed) AMOUNT CLAI	MED
COST OF AIR T Journey from		attach flight tick urney to	ket)		
COST OF TRAV	ELLING BY C	AR REGISTRAT	TION NO		
(Details of Journe Journey From		Kilometers travelled	Engine capa-city of vehicle		E USE ONLY Amount
SIGNATURE OF	CLAIMANT			D	ATE
FOR OFFICE US	E ONLY				
Certified correct	Data	Ar	proved		Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM	FOR TRANSPO	RT AND	SUBSISTE	NCE
Name of Claimant					
Address					
				ie	
Telephone number		Fax	number		
	NISATION*				17 FEBRUARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	T	IME	
		EXP	ENSES		
ACCOMMODA (Telephone and bar		of expenses (Slips m	ust be attach	ned) MOUNT CLA	IMED
COST OF AIR ' Journey from	TRAVEL (Pl	ease attach flight tick Journey to	set)		
COST OF TRA	VELLING B	Y CAR REGISTRA	TION NO		
(Details of Journal Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	CE USE ONLY Amount
SIGNATURE OF	CLAIMANT			1	DATE
FOR OFFICE US	SE ONLY				
Certified correct	Dat	e Ar	proved		Date

Convention for a Democratic South Africa

Telephone number	Name of Claiman			R TRANSPO			<u>ENCE</u>	
Telephone number Fax number MEETING OF WORKING GROUP 3: 17 FEBRUARY 1992 PARTY*/ORGANISATION*/ADMINISTRATION* *Delete where not applicable DEPARTURE FROM RESIDENCE ARRIVAL AT RESIDENCE DATE TIME DATE TIME EXPENSES ACCOMMODATION Nature of expenses (Slips must be attached) AMOUNT CLAIMED (Telephone and bar charges excluded) COST OF AIR TRAVEL (Please attach flight ticket) Journey from Journey to Kilometers travelled Engine capacity of vehicle COST OF TRAVELLING BY CAR REGISTRATION NO	Address							
MEETING OF WORKING GROUP 3: 17 FEBRUARY 1992 PARTY*/ORGANISATION*/ADMINISTRATION* *Delete where not applicable DEPARTURE FROM RESIDENCE ARRIVAL AT RESIDENCE DATE TIME DATE TIME EXPENSES ACCOMMODATION Nature of expenses (Slips must be attached) AMOUNT CLAIMED (Telephone and bar charges excluded) COST OF AIR TRAVEL (Please attach flight ticket) Journey from Journey to Kilometers travelled capacity of vehicle SIGNATURE OF CLAIMANT DATE						ode		
PARTY*/ORGANISATION*/ADMINISTRATION* *Delete where not applicable DEPARTURE FROM RESIDENCE	Telephone numbe	r		Fax	number			
EXPENSES ACCOMMODATION Nature of expenses (Slips must be attached) AMOUNT CLAIMED (Telephone and bar charges excluded) COST OF AIR TRAVEL (Please attach flight ticket) Journey from COST OF TRAVELLING BY CAR REGISTRATION NO (Details of Journey) Journey From Journey To Kilometers travelled capacity of vehicle SIGNATURE OF CLAIMANT DATE		ANISATION		•				
EXPENSES ACCOMMODATION Nature of expenses (Slips must be attached) AMOUNT CLAIMED (Telephone and bar charges excluded) COST OF AIR TRAVEL (Please attach flight ticket) Journey from Journey to COST OF TRAVELLING BY CAR REGISTRATION NO (Details of Journey) Journey From Journey To Kilometers travelled capacity of vehicle FOR OFFICE USE ONLY Tariff Amount SIGNATURE OF CLAIMANT DATE	DEPARTURE FRO	OM RESIDEN	C E	ARRIVAL AT	RESIDENCI	2		
ACCOMMODATION Nature of expenses (Slips must be attached) AMOUNT CLAIMED COST OF AIR TRAVEL (Please attach flight ticket) Journey from COST OF TRAVELLING BY CAR REGISTRATION NO (Details of Journey) Journey From Journey To Kilometers travelled capacity of vehicle Engine capacity of vehicle SIGNATURE OF CLAIMANT DATE	DATE	TIME		DATE		TIME		
ACCOMMODATION Nature of expenses (Slips must be attached) AMOUNT CLAIMED COST OF AIR TRAVEL (Please attach flight ticket) Journey from COST OF TRAVELLING BY CAR REGISTRATION NO (Details of Journey) Journey From Journey To Kilometers travelled capacity of vehicle Engine capacity of vehicle SIGNATURE OF CLAIMANT DATE								
COST OF TRAVELLING BY CAR REGISTRATION NO (Details of Journey) Journey From Journey To Kilometers travelled capacity of vehicle SIGNATURE OF CLAIMANT AMOUNT CLAIMED AMOUNT CLAIMED AMOUNT CLAIMED AMOUNT CLAIMED FOR OFFICE USE ONLY Tariff Amount DATE	Y A			EXP	ENSES			
COST OF TRAVELLING BY CAR REGISTRATION NO				kpenses (Slips m	ust be atta	ched) AMOUNT CL	AIMED	
(Details of Journey) Journey From Journey To Kilometers travelled Capacity of vehicle SIGNATURE OF CLAIMANT Kilometers travelled Engine Capacity of vehicle DATE	COST OF AIR Journey from	TRAVEL (Please d Jour	attach flight tick	ket)			
(Details of Journey) Journey From Journey To Kilometers travelled Capacity of vehicle SIGNATURE OF CLAIMANT Kilometers travelled Engine Capacity of vehicle DATE	COST OF TRA	VELLING	BY CA	R REGISTRA	TION NO			
	(Details of Journ	ney)		Kilometers	Engine capa-city	FOR OFF	ICE USE ONLY	
FOR OFFICE USE ONLY	SIGNATURE OF	CLAIMAN	T				DATE	
Certified correct Date Approved Date	FOR OFFICE U							

Convention for a Democratic South Africa

	CLAIM FO	RTRANSPO	KT AND	SUBSISTENCE	
Name of Claimant					
Address					
				ode	
Telephone number		Fax			
PARTY*/ORGA *Delete where not applic	NISATION*/ADI			7 FEBRUARY 1992	
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	Т	TIME	
		EXP	ENSES		
ACCOMMODA	TION Nature of e	xpenses (Slips m	ust be attach	hed) AMOUNT CLAIMED	
(Telephone and bar	charges excluded)				
COST OF AIR Journey from	TRAVEL (Please Jou	attach flight tick rney to	et)		
COST OF TRA	VELLING BY CA	R REGISTRAT	NO		
(Details of Journ Journey From	ey) Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE USE ONLY Tariff Amount	
SIGNATURE OF	CLAIMANT			DATE	
FOR OFFICE US	SE ONLY				
Certified correct	Date	Ap	proved	Date	

Convention for a Democratic South Africa

	CLAIM FO	OR TRANSPO	RT AND	SUBSISTEN	CE
Name of Claimant					
Address					
				de	
Telephone number		Fax r			
	NISATION*/A	ROUP 1 OF WOR DMINISTRATION			UARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT A	RESIDENCE		
DATE	TIME	DATE	T	IME	
		ЕХРЕ	NSES		
		f expenses (Slips mu	ust be attach	ned) MOUNT CLAIM	ED
(Telephone and bar	charges excluded)				
COST OF AIR Journey from	TRAVEL (Pleas	se attach flight ticke ourney to	et)		
COST OF TRA	VELLING BY	CAR REGISTRAT	ION NO		
(Details of Journ Journey From	ey) Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	USE ONLY Amount
SIGNATURE OF	CLAIMANT			DA	TE
FOR OFFICE US	SE ONLY				
Certified correct	Date	Anr	proved	D	ate

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FO	R TRANSPO	RT AND	SUBSISTE	ENCE
Name of Claiman	t				
Address					
			Postal Co	de _	
Telephone numbe	r	Fax	number		
	FING OF SUBGROANISATION*/ADM				
DEPARTURE FRO	OM RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	Т	IME	
		EXP	ENSES		
ACCOMMODA (Telephone and bar	ATION Nature of e	xpenses (Slips m	ust be attack	hed) MOUNT CLA	AIMED
COST OF AIR Journey from	TRAVEL (Please Jou	attach flight tick rney to	ket)		
COST OF TRA	VELLING BY CA	R REGISTRA	TION NO		
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capacity of vehicle	FOR OFFI Tariff	CE USE ONLY Amount
SIGNATURE OF	ECL AIMANT				DATE
					DATE
FOR OFFICE U					
Certified correct	Date	Ar	proved		Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FOR	R TRANSPO	RT AND	SUBSISTE	NCE
Name of Claimant	t				
Address					
				le	
Telephone number	r	Fax n	umber		
					BRUARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT R	ESIDENCE		
DATE	TIME	DATE	T	IME	
		EXPE	NSES		
ACCOMMODA (Telephone and bar	ATION Nature of ex	xpenses (Slips mu	st be attach	ed) MOUNT CLA	IMED
	TRAVEL (Please	attach flight tickerney to			
COST OF TRA	VELLING BY CA	R REGISTRAT	ION NO		
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	CE USE ONLY Amount
SIGNATURE OF	CLAIMANT				DATE
FOR OFFICE US	SE ONLY				
Certified correct	Date	Ann	roved		Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FO	RTRANSPO	ORT AND	SOBSISTI	ENCE
Name of Claimant					
Address					
Telephone number		Fax			
					EBRUARY 1992
DEPARTURE FROM	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	DATE TIME		
		EXP	ENSES		
ACCOMMODA (Telephone and bar	TION Nature of e	expenses (Slips m	ust be attach	ned) MOUNT CLA	AIMED
COST OF AIR 7 Journey from	FRAVEL (Please Jou	attach flight tick	(et)		
COST OF TRAY	VELLING BY CA	AR REGISTRA	TION NO		
(Details of Journe Journey From		Kilometers travelled	Engine capa-city of vehicle		ICE USE ONLY Amount
SIGNATURE OF	CLAIMANT				DATE
FOR OFFICE US	E ONLY				
Carl Carl compat	Data		nnavad		Data

Convention for a Democratic South Africa

	CLAIM	I FOR	TRANSPO	RT AND	SUBSISTEN	<u>ICE</u>
Name of Claiman	t					
Address						
Telephone numbe			Fax		ue	
			Contract of the Contract of th	-	C CDOVD 5 4	# NEDDY 1 DY 1000
	ANISATION					7 FEBRUARY 1992
DEPARTURE FRO	M RESIDENC	Œ	ARRIVAL AT	RESIDENCE		
DATE	TIME		DATE	Т	TIME	
			EXPI	ENSES		
ACCOMMODA			penses (Slips m	ust be attack	hed) AMOUNT CLAIR	MED
(Telephone and bar		-				
COST OF AIR Journey from	TRAVEL (I		ttach flight tick ney to	ret)		
COST OF TRA	VELLING	BY CAI	R REGISTRAT	TION NO		
(Details of Journ Journey From	Journey	То	Kilometers travelled	Engine capa- city of vehicle	FOR OFFIC	E USE ONLY Amount
		_				AME
SIGNATURE OF	CLAIMAN				D	ATE
FOR OFFICE U						
Certified correct	D	ate	An	nroved		Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FC	OR TRANSPO	KT AND	SUBSISTENCE		
Name of Claimant						
Address						
				 ode		
Telephone number		Fax				
PARTY*/ORGA *Delete where not applica	NISATION*/AI			7 FEBRUARY 1992		
DEPARTURE FROM	M RESIDENCE	ARRIVAL AT	RESIDENCE			
DATE	TIME	DATE	Т	TIME		
		EXPI	ENSES			
ACCOMMODA	TION Nature of	expenses (Slips m	ust be attach	hed) AMOUNT CLAIMED		
(Telephone and bar	charges excluded)					
COST OF AIR 7 Journey from	TRAVEL (Please	e attach flight tick ourney to	cet)			
COST OF TRAY	VELLING BY C	AR REGISTRA	TION NO			
(Details of Journey Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE USE ONLY Tariff Amount		
SIGNATURE OF	CLAIMANT			DATE		
FOR OFFICE US	E ONLY					
Certified correct	Date	Ar	nroved	Date		

Convention for a Democratic South Africa

Name of Claim	***	FOR TRANSPO			
elephone num		Fax	Postal Co	ode	
	MEETING OF GANISATION*/	SECURITY SUBC	OMMITTE		UARY 1992
DEPARTURE F	ROM RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	7	TIME	
		EXP	ENSES		
	DATION Nature	of expenses (Slips m	ust be attac	hed) AMOUNT CL	AIMED
COST OF AI Journey from	R TRAVEL (Plea	ase attach flight tick Journey to	kel)		
COST OF TR	AVELLING BY	CAR REGISTRA	TION NO	***************************************	
(Details of Journey From		Kilometers travelled	Engine capa- city of vehicle		ICE USE ONLY Amount
GNATURE C	F CLAIMANT		••••		DATE
OR OFFICE	USE ONLY				
rtified correct	Date	Ap	proved		Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

73	CLAIM FO	R TRANSPO	RT AND	SUBSISTEN	CE
Name of Claim	ant				
ddress					
.1				de	
elephone num	ber	Fax	number		***************************************
	ETING OF SUBGREGANISATION*/ADM				
DEPARTURE F	ROM RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	1	IME	
		EXP	ENSES		
	DATION Nature of e	xpenses (Slips m		<i>hed)</i> AMOUNT CLAIN	MED
COST OF AI Journey from	R TRAVEL (Please Jou	attach flight tick	(et)		
COST OF TH	RAVELLING BY CA	R REGISTRA	TION NO		•
(Details of Jou					
Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	E USE ONLY Amount
IGNATURE (OF CLAIMANT			D.	ATE
OR OFFICE	USE ONLY				
rtified correct	Date				D-4-

dprod50

Convention for a Democratic South Africa

6 Cl-i		FOR	TRANSPO	KI AND	SUBSISTE	NCE
ame of Claimant						
'elephone number			Fax		ie _	
MEETING C	F STEERIN	NG CO	MMITTEE OF	WORKIN		18 FEBRUARY 1992
DEPARTURE FRO	M RESIDENC	E	ARRIVAL AT	RESIDENCE		
DATE	TIME		DATE TI		IME	
1 2						
			EXPE	ENSES		
ACCOMMODA			penses (Slips m	ust be attach	hed) MOUNT CLA	MED
COST OF AIR		Please a	attach flight tick ney to	et)		
COST OF TRA	VELLING I	BY CA	R REGISTRAT	TION NO		••••
(Details of Journ Journey From	ey) Journey	То	Kilometers travelled	Engine capa-city of vehicle	FOR OFF	Amount
SIGNATURE OF	CLAIMAN	· r				DATE
FOR OFFICE U						
Certified correct		ate	Aı	proved		Date

Convention for a Democratic South Africa

	CLAIM FO	R TRANSPO	RT AND	SUBSISTE	NCE	
Name of Claimant						
ddress						
			Postal Cod	le		
elephone number		Fax				
	NISATION*/AD	NAGEMENT C MINISTRATION			JARY 1992	
DEPARTURE FROM	A RESIDENCE	ARRIVAL AT	RESIDENCE			
DATE	TIME	ME DATE TIME				
		EXPI	ENSES			
ACCOMMODA?		expenses (Slips m	ust be attach	<i>ed)</i> MOUNT CLA	IMED	
COST OF AIR Tourney from	TRAVEL (Please Jon	attach flight tick urney to	cet)			
COST OF TRAV	ELLING BY C	AR REGISTRAT	TION NO			
(Details of Journe Journey From	y) Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	CE USE ONLY Amount	
GNATURE OF (CLAIMANT				DATE	
OR OFFICE US	E ONLY					
wified someont	Data	A=	mound		Data	

Convention for a Democratic South Africa

	CLAIM FO	R TRANSPOR	RT AND	SUBSISTENC	E
Name of Claimant					
Address					
			Postal Co	de	
Telephone number		Fax n		ue	
	ANISATION*/ADM			ITEE: 24 FEBRU	JARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT R	ESIDENCE		
DATE	TIME	DATE	T	TME	
		EXPE	NSES		
ACCOMMODA (Telephone and bar	TION Nature of excharges excluded)	xpenses (Slips mu	st be attack	hed) MOUNT CLAIME	ED
COST OF AIR Journey from	TRAVEL (Please)	attach flight ticke rney to			
COST OF TRA	VELLING BY CA	R REGISTRATI	ON NO		
(Details of Journ Journey From	ey) Journey To	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	USE ONLY Amount
SIGNATURE OF	CLAIMANT			DAT	TE
OR OFFICE US	SE ONLY				
Cortified correct	Data	Ann	roved	Dat	te

Convention for a Democratic South Africa

Name of Claimant	CLAIM FOR				NCE
Telephone number		Postal Cod	Code		
					BRUARY 1992
DEPARTURE FROM	RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	TIME		
		EXP	ENSES		
ACCOMMODAT		penses (Slips m	ust be attach	ed) MOUNT CLAI	IMED
COST OF AIR T Journey from	RAVEL (Please a	attach flight tick ney to	et)		
COST OF TRAV	ELLING BY CA	R REGISTRAT	TION NO		
(Details of Journey Journey From	y) Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	CE USE ONLY Amount
SIGNATURE OF C	CLAIMANT			I	DATE
FOR OFFICE USI	E ONLY				
Contified compact	Data	A	proved		Date

Convention for a Democratic South Africa

	CLAIM FO	R TRANSPO	RT AND	SUBSISTE	NCE		
Name of Claiman	t						
Address							
				de			
Telephone number Fax number							
					BRUARY 1992		
DEPARTURE FROM RESIDENCE		ARRIVAL AT	ARRIVAL AT RESIDENCE				
DATE	TIME	DATE	DATE TIME				
		EXPE	ENSES				
ACCOMMODA (Telephone and bar	ATION Nature of charges excluded)	expenses (Slips ma	ust be attack	hed) MOUNT CLA	IMED		
COST OF AIR Journey from	TRAVEL (Please	attach flight tick urney to	et)				
COST OF TRA	VELLING BY C	AR REGISTRAT	ON NO				
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE Tariff	CE USE ONLY Amount		
SIGNATURE OF	CLAIMANT			1	DATE		
FOR OFFICE U	SE ONLY						
Contified compact	Data	An	proved		Date		

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM	FOR	TRANSPO	RT AND	SUBSISTEN	CE	
Name of Claiman	t						
Address							
F-1					de		
Telephone numbe	r		Fax	number			
	ANISATION				OUP 5: 24 FEBI	RUARY 1992	
DEPARTURE FRO	M RESIDENC	E	ARRIVAL AT	RESIDENCE			
DATE TIME DATE TIME							
			EXP	ENSES			
ACCOMMODA (Telephone and bar			enses (Slips m	ust be attach	ned) MOUNT CLAIM	1ED	
COST OF AIR Journey from	TRAVEL (F	Please at Journ	tach flight tick ey to	ret)			
COST OF TRA	VELLING I	BY CAR	REGISTRAT	TION NO			7
(Details of Journ Journey From	Journey	Го	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	E USE ONLY Amount	
SIGNATURE OF	CLAIMAN	r			D.A	ATE	
FOR OFFICE U	SE ONLY						
Certified correct		ate	An	proved	Г	Date	

Convention for a Democratic South Africa

		ZAINI FU	K TRANSFO	RIAND	SUBSISTEN	CE
Name of Claim Address	ant					
Calanhona num			Fax		de	
elephone num						
PARTY*/OR *Delete where not ap	GANISA				4 FEBRUARY 19	
DEPARTURE F	ROM RES	IDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIM	1E	DATE	7	TIME	
			EXP	ENSES		
ACCOMMO			expenses (Slips m	ust be attac	hed) AMOUNT CLAIM	ED
COST OF AI Journey from	R TRAV	/EL (Please Jon	attach flight tick urney to	set)		
COST OF TH	RAVELL	ING BY C	AR REGISTRAT	TION NO		
(Details of Journey From		ourney To	Kilometers travelled	Engine capa-	FOR OFFICE Tariff	USE ONLY Amount
				of vehicle		
SIGNATURE (OF CLAI	MANT			DA	TE
OR OFFICE	USE ON	ILY				
Certified correct		Date	Ap	proved	D	ate

Convention for a Democratic South Africa

	CLAIM	FOR	TRANSPO	RT AND	SUBSISTER	NCE
Name of Claimant						
Address						
					de	
Telephone number			Fax			
PARTY*/ORGA *Delete where not applica	NISATION				4 FEBRUARY	1992
DEPARTURE FROM	A RESIDENC	E	ARRIVAL AT	RESIDENCE		
DATE TIME			DATE	Т	TIME	
			EXPE	INSES		
ACCOMMODA'			penses (Slips mi	ust be attack	hed) AMOUNT CLAII	MED
(Telephone and bar	charges exclud	led)		100		
COST OF AIR 7 Journey from	TRAVEL (I	Please a Journ	ttach flight tickeney to	et)		
COST OF TRAY	ELLING	BY CA	R REGISTRAT	ON NO		
(Details of Journe Journey From	Journey	То	Kilometers travelled	Engine capacity of vehicle	FOR OFFIC Tariff	E USE ONLY Amount
SIGNATURE OF	CLAIMAN'	Г			D	ATE
FOR OFFICE US	E ONLY					
Certified correct	D	ate	App	proved		Date

Convention for a Democratic South Africa

	CLAIM FO	RTRANSPO	ORT AND	SUBSISTE	NCE
Name of Claimant					
Address					
				de.	
Telephone number		Fax			
	NISATION*/ADI				FEBRUARY 1992
DEPARTURE FROM	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	Т	IME	
		EXPI	ENSES		
ACCOMMODA (Telephone and bar	TION Nature of e	expenses (Slips m	ust be attaci	hed) MOUNT CLAI	MED
COST OF AIR Tourney from	FRAVEL (Please Jou	attach flight tick arney to	ket)		
COST OF TRAY	VELLING BY CA	AR REGISTRAT	TION NO		
(Details of Journey Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFIC Tariff	CE USE ONLY Amount
SIGNATURE OF	CLAIMANT			Г	DATE
FOR OFFICE US Certified correct	E ONLY Date	Aŗ	pproved		Date

Convention for a Democratic South Africa

	CLAIM	FOR TH	CANSPO	OKT ANI	DSUBSISTENC	<u>E</u>
Name of Claimant						
Address						
				Postal C	ode	
Telephone number						
					ROUP 1: 24 FEBR	IIADY 1002
	NISATION*					
DEPARTURE FRO	M RESIDENCE	. A	RRIVAL AT	RESIDENCE	E	
DATE	TIME	D	ATE		TIME	
			EXP	ENSES		
ACCOMMODA (Telephone and bar			es (Slips m	ust be atta	ched) AMOUNT CLAIMI	ED
COST OF AIR ' Journey from	ravel (Pl	Journey 1	flight tick	ket)		
COST OF TRA	VELLING B	Y CAR RI	EGISTRA	TION NO		
(Details of Journe Journey From		o K	ilometers avelled	Engine capa-city of vehicle	FOR OFFICE Tariff	USE ONLY Amount
SIGNATURE OF	CLAIMANT				DA'	TE
FOR OFFICE US	E ONLY					
Certified correct	Dat	te	A	pproved	Da	ite

Convention for a Democratic South Africa

	CLAIM FO	R TRANSPO	RT AND	SUBSISTENCE	
Name of Claimant					
Address					
				de	
Telephone number					
PARTY*/ORGAN *Delete where not applicab	NISATION*/AD			4 FEBRUARY 1992	
DEPARTURE FROM	RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	Г	TIME	
		EXPE	NSES		
ACCOMMODAT		expenses (Slips m	ust be attac	hed) AMOUNT CLAIMED	
COST OF AIR T Journey from	RAVEL (Please	attach flight tick urney to	et)		
COST OF TRAV	ELLING BY C.	AR REGISTRAT	ON NO.		
(Details of Journey Journey From	y) Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE USE ONLY Tariff Amount	
SIGNATURE OF C	CLAIMANT			DATE	
FOR OFFICE USI Certified correct	E ONLY Date	Ар	proved	Date	

Convention for a Democratic South Africa

	100	R TRANSPO	RT AND	SUBSISTENC	<u>E</u>
Name of Claimant Address					
Tudicos					
				de	
Telephone number	r	Fax	number		
					BRUARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	Т	IME	
		EXPI	ENSES		
ACCOMMODA (Telephone and bar	ATION Nature of e.	xpenses (Slips m	ust be attach	ned) MOUNT CLAIME	ED
COST OF AIR Journey from	TRAVEL (Please of Jou	attach flight tick rney to	cet)		
COST OF TRA	VELLING BY CA	R REGISTRA	TION NO		
(Details of Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	USE ONLY Amount
SIGNATURE OF	CLAIMANT			DA	 ΓΕ
FOR OFFICE US	SE ONLY				
: 6: 1	Data		proved	Do	ta

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM	FOR	TRANSPO	RT AND	SUBSISTENC	E
Name of Claimant						
Address						
				Postal Co	de	
Telephone number			Fax			
	NISATION				IP 4: 24 & 25 FEB	
DEPARTURE FROM	A RESIDENC	Œ	ARRIVAL AT	RESIDENCE		
DATE	DATE TIME		DATE		IME	
			EXPE	ENSES		
ACCOMMODAT			penses (Slips m	ust be attack	hed) MOUNT CLAIME	ED
COST OF AIR T Journey from	RAVEL (I	Please a	ttach flight tick ney to	et)		
COST OF TRAV	ELLING I	BY CA	R REGISTRAT	ON NO		
(Details of Journe Journey From	y) Journey	То	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE Tariff	USE ONLY Amount
SIGNATURE OF (CLAIMAN'	Г			DAT	TE
FOR OFFICE US Certified correct		ate	An	proved	Da	te
Continua contect	D	uto	Ap	provou	Du	

Convention for a Democratic South Africa

	CLAIM	FOR TRA	NSPORT	AND	SUBSISTENC	E
Name of Claimant						
Address						
			D.	tal Co	de	
Telephone number					ue	
					D / 0/0 05 PPP	
	NISATION*				P 4: 24 & 25 FEI	SKUART 1992
DEPARTURE FRO	M RESIDENCI	E ARRI	VAL AT RESII	ENCE		
DATE	TIME	DAT	E	T	IME	
			EXPENSE	S		
ACCOMMODA	TION Nature	e of expenses	(Slips must be	attach	hed) MOUNT CLAIME	ED
(Telephone and bar	charges exclude	ed)				
COST OF AIR Journey from	TRAVEL (PA	lease attach fla Journey to	ight ticket)			
COST OF TRA	VELLING B	Y CAR REG	ISTRATION	NO		
(Details of Journ Journey From	ey) Journey T	o Kilom travel	led ca cit of	-	FOR OFFICE	USE ONLY Amount
SIGNATURE OF	CLAIMANT				DA	ΓE
OR OFFICE US	SE ONLY					
Cartified correct	Do	te	Annrove		Da	te

Convention for a Democratic South Africa

Name of Claimant	CLAIM FO	R TRANSPO	RT AND	
Address				
				ode
Telephone number		Fax		
	NISATION*/ADI			& 25 FEBRUARY 1992
DEPARTURE FROM	M RESIDENCE	ARRIVAL AT	RESIDENCE	
DATE	TIME	DATE	T	TIME
		EXPE	ENSES	
ACCOMMODA'		expenses (Slips m	ust be attac	ched) AMOUNT CLAIMED
COST OF AIR 7 Journey from	TRAVEL (Please	attach flight tick	et)	
COST OF TRAV	ELLING BY CA	AR REGISTRAT	NO NO	
(Details of Journe Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFICE USE ONLY Tariff Amount
SIGNATURE OF	CLAIMANT			DATE
FOR OFFICE US	E ONLY			
Cartified correct	Data	A.,	neovod	Data

Convention for a Democratic South Africa

	CLAIM	FOR	TRANSPO	RT AN	D SUBSISTENC	E
lame of Claiman	t					
ddress						
					Code	1 2 2 3
elephone number	r		Fax	number		
	ANISATION		19	92	DITIONAL LEADER	
DEPARTURE FRO	M RESIDENC	E	ARRIVAL AT	RESIDENC	r E	49.77
DATE	TIME		DATE		TIME	
	1		EXPE	ENSES		
Telephone and bar COST OF AIR Journey from	r charges exclud	led) Please a Jour	attach flight tick ney to	ret)	AMOUNT CLAIME	D
COST OF TRA	VELLING	BY CA	R REGISTRAT	rion no		
(Details of Journ Journey From	ney) Journey	То	Kilometers travelled	Engine capa- city of vehicle	FOR OFFICE U	SE ONLY Amount
IGNATURE OF	CLAIMAN	T			DAT	E
OR OFFICE U	SE ONLY					
) ata		nnovad	Det	

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FOR	R TRANSPO	RT AND	SUBSISTE	NCE
Name of Claiman	t				
Address					
			Postal Cod	e	
Telephone numbe					
					ARY 1992
DEPARTURE FRO	M RESIDENCE	ARRIVAL AT	RESIDENCE		
DATE	TIME	DATE	TI	ME	
		EXPI	ENSES		
ACCOMMODA (Telephone and bar	ATION Nature of excharges excluded)	kpenses (Slips m	ust be attach	<i>ed)</i> MOUNT CLAI	MED
COST OF AIR Journey from	TRAVEL (Please o	attach flight tick	ket)		
COST OF TRA	VELLING BY CA	R REGISTRA	TION NO		
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFIC Tariff	CE USE ONLY Amount
SIGNATURE OF	CLAIMANT				DATE
OR OFFICE U	SE ONLY				
Cartified correct	Date	Ат	pproved		Date

Convention for a Democratic South Africa

PO Box 307 ISANDO 1600 South Africa ** Telephone (011) 397-1198/99 Fax (011) 397-2211

	CLAIM FOI	RTRANSPO	RT AND	SUBSISTE	NCE	
Name of Claiman	t					
Address						
				do		
Telephone numbe	r		Postal Code			
				OLID 1. 25 DEL	DILADY 1002	
					SKUART 1992	
DEPARTURE FROM RESIDENCE		ARRIVAL AT RESIDENCE				
DATE	TIME	DATE	Т	TIME		
EXPENSES						
ACCOMMODA (Telephone and bar	ATION Nature of excharges excluded)	xpenses (Slips m	ust be attach	hed) MOUNT CLAI	MED	The state of
COST OF AIR Journey from	TRAVEL (Please of Jour	attach flight tick rney to	xet)			
COST OF TRA	VELLING BY CA	R REGISTRA	rion no			
(Details of Journ Journey From	Journey To	Kilometers travelled	Engine capa-city of vehicle	FOR OFFIC Tariff	EE USE ONLY Amount	
SIGNATURE OF	CLAIMANT		DATE			
FOR OFFICE U	SE ONLY					-
Certified correct	Date	Ar	proved		Date	