

Botanical Society of Otago

Student Members Travel Subsidy

CLAIM FORM

Date Issued

Date of Trip.....

Destination.....

Student Details **(only financial members eligible)**

Name.....

Amount paid to driver. (Rate of 5c/km) \$

Signature.....

Driver Details

Name.....

Address for rebate.....

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Total km traveled.....

Amount claimed.....

Signature.....

Post claim to: The Treasurer, BSO, PO Box 6214, Dunedin North

Or Put in BSO pigeonhole in Botany Mailroom