



MNO Synod CONVENTION
April 26-28, 2018 Grace Lutheran, Winnipeg

DELEGATE EXPENSE FORM

Travel Dates: _____

NAME _____

ADDRESS _____ Postal Code _____

CONGREGATION _____

PUBLIC TRANSPORTATION
(Receipts must be attached)

From	Method of Travel	Cost

AUTO TRAVEL (travel will be paid for delegates travelling more than 100 kms. to the convention site at 20 cents per km for the driver plus 3 cents per passenger who is a registered delegate, for kms, driven over 100 kms. Each way.

From	Distance Traveled (round trip)	Km. travelled x 20¢
	Total kms. traveled _____	_____

AUTHORIZED PASSENGERS (must be convention delegates) (3¢ per km. per passenger)

Passenger Name	Cost

TOTAL CLAIM \$ _____

Signature _____