

**STATEMENT OF EXPENSES FOR CHURCH VISITING
CLASSIS BC NORTH-WEST**

Please submit this form to the Stated Clerk for reimbursement: kathy.bcnw@outlook.com

The undersigned incurred the following expenses in participating in an official classical church visit as a representative of Classis BCNW.

Name: _____ Date: _____

Address: _____

Home Church: _____ Church Visited: _____

Airfare: \$ _____

Ferry: \$ _____

Car Rental: \$ _____

Mileage _____ km @ \$0.70: \$ _____

Any Additional Expenses:
List:

TOTAL EXPENSES: \$ _____
\$ _____

APPROVED FOR PAYMENT: _____

Stated Clerk, Classis BCNW
Classical Interim Committee