CAYMAN ISLANDS GOVERNMENT
CREDIT CARD EXPENSE CLAIM FORM

PERSONAL INFO

Name:	Kenneth Jefferson
Title	Financial Secretary & Chief Officer Ministry of Finance & Economic Development
Destination or Purchase:	
Purpose:	Credit Card Statement Date – 3 Sept 2018
Travel or Purchase Date:	
Travel or Purchase Date:	

DETAILS OF TRANSACTIONS

Date (DD/MMM/YY)	Supplier and Description of Transaction	Foreign Amount	Exchange Rate	CI$ Equivalent	Type of Expense
25 Aug 2018	Payment	US$ -634.72	.84	-533.16	CC
			TOTAL		

DECLARATION

All transactions listed relate to expenditure incurred in the course of Government Business and is in accordance with the terms and conditions of use of the card.

Name of Cardholder: Kenneth Jefferson

Cardholder Signature: _____

Date: 1 October 2018

OFFICIAL USE ONLY

I have reviewed the above for accuracy and completeness.

Anne Owens, SFS _____ 1 October 2018
Name Signature Date

Approved By:

Anne Owens, SFS _____
Name Signature Date