
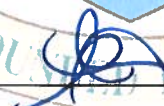
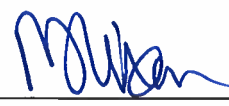




**CAYMAN ISLANDS GOVERNMENT  
CREDIT CARD EXPENSE CLAIM FORM**

|                                |  |  |  |                    |                      |                 |
|--------------------------------|--|--|--|--------------------|----------------------|-----------------|
| <b>PERSONAL INFO</b>           | Name:  |  | Kenneth Jefferson  |                    |                      |                 |
|                                | Title  |  | Financial Secretary & Chief Officer<br>Ministry of Finance & Economic Development                |                    |                      |                 |
|                                | Destination or Purchase:   |  | Continuing Professional Education  |                    |                      |                 |
|                                | Purpose:   |  | Training for Ministry staff  |                    |                      |                 |
|                                | Travel or Purchase Date:   |  | June 2019  |                    |                      |                 |
|                                | Travel or Purchase Date:   |  | Credit Card Statement Date – July 2019   |                    |                      |                 |
| <b>DETAILS OF TRANSACTIONS</b> | Date (DD/MM/YY)  | Supplier and Description of Transaction  | US\$   | Exchange Rate      | CI\$ Equivalent      | Type of Expense |
|                                | 26 Jun 2019  | Surgent McCoy Self Study   | 299.40   | 0.84               | 251.50               |                 |
|                                | 25 Jun 2019  | Payment  | -495.19  | 0.84               | -415.96              |                 |
|                                |  |  |  |                    |                      |                 |
|                                |  |  |  |                    |                      |                 |
|                                |  |  |  |                    |                      |                 |
|                                | <b>TOTAL</b>   |  |  |                    |                      |                 |
| <b>DECLARATION</b>             | 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<br>Cardholder Signature: <br>Date: 10 July 2019 |  |  |                    |                      |                 |
| <b>OFFICIAL USE ONLY</b>       | I have reviewed the above for accuracy and completeness.   |  |  |                    |                      |                 |
|                                | Anne Owens, SAFS<br>Name   |  | <br>Signature |                    | 10 July 2019<br>Date |                 |
| Approved By:                   |  |  |  |                    |                      |                 |
| Michael Nixon, SAFS<br>Name    |  | <br>Signature |  | 10 July 19<br>Date |                      |                 |