

**FAX NO: (04) 496 6399**



# CONTRACTOR EXPENSE CLAIM FORM

*(also available in pdf format at [www.absoluteit.co.nz](http://www.absoluteit.co.nz))*

**Please fax by 12.00pm each Monday**

**Contractor:** \_\_\_\_\_

**Client:** \_\_\_\_\_

**Week Ending:**                      Sunday        /        /

Supplier	Description	Sub-total	GST	Total
<b>Total Expenses Claimed</b>				

**Contractor's Signature:** \_\_\_\_\_

**Authorised Client Signature:** \_\_\_\_\_

**Client's Position:** \_\_\_\_\_

**NB:** *This form should only be completed and forwarded to absoluteIT along with your timesheets if the client has authorized you to claim expenses via absoluteIT, otherwise they should be claimed directly from the client using their approved claim form. Expenses claimed correctly from absoluteIT (including all relevant invoices and receipts to support the claim) will be paid according to the normal monthly payment schedule.*