

**New Zealand Qualifications Authority Claim Form**  
**Exam Setting Contract for Services (Secondary Examinations Team)**  
 GST registered taxpayers must supply a tax invoice with this claim form,  
 attach all supporting documentation e.g. receipts

**Tick appropriate boxes.**

- NCEA level one     
  NCEA level two     
  NCEA level three     
  Scholarship  
 Examiner     
  Materials Developer     
  Materials Critiquer     
  Independent Checker

**Surname:**

**First Names:**

**Address:**

**IRD number:**

**Subject:**

**Achievement Standard Code(s):**


**Fees**  
(as stated in contract)

**Operational Expenses**  
attach receipts for all items over \$5

Examiner fee:  Fee 1 \$   
 (refer to contract) (after final draft submitted)

Fee 2 \$   
 (after print ready version is approved)

Other professional fees as approved:  \$   
 (refer to contract)

Materials Developer fee:  \$

Materials Critiquer fee:  \$

Independent Checker fee:  \$

Photocopying	\$ <input type="text"/>
Postage/Courier:	\$ <input type="text"/>
Email:	\$ <input type="text"/>
Telephone:	\$ <input type="text"/>
(attach <b>highlighted</b> copy of account)	
Use of private car:	\$ <input type="text"/>
_____ kms travelled @ 62c/km	
Other expenses (give details):	
	\$ <input type="text"/>
	\$ <input type="text"/>

**Fees Total:** \$       **Expenses Total:** \$

Reason for use of private car: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / 20..

**NZQA use only:** Date received:  Date processed:

Cost Centre/Activity/Resource Code

\$

\$

**Manager's Approval:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / 20

**Checked:** OPO  / \_\_\_\_ / 20.. NAF  / \_\_\_\_ / 20..