



## Lay Preaching Travel

*Please complete this form and return it to your pastor who will sign it and forward it to the Welsh Mission office.*

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

| Date | Destination(s) | Remarks | Miles | Other travel expenses |
|------|----------------|---------|-------|-----------------------|
|      |                |         |       |                       |
|      |                |         |       |                       |
|      |                |         |       |                       |
|      |                |         |       |                       |
|      |                |         |       |                       |

**TOTAL** \_\_\_\_\_

Signed: \_\_\_\_\_  
(Claimant)

Signed: \_\_\_\_\_  
(Pastor)



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|      |                |         |       |                       |
|      |                |         |       |                       |
|      |                |         |       |                       |
|      |                |         |       |                       |

**TOTAL** \_\_\_\_\_

Signed: \_\_\_\_\_  
(Claimant)

Signed: \_\_\_\_\_  
(Pastor)