



Part A

Female Principal Conference 2017

**VENUE: Old Mutual Building, Jan Smuts Drive, Pinelands
Saturday, 12 August 2017, 08:00–15:00**

1. Will you be able to attend the Female Principal Support Network 2017? Yes/No
2. Full names and surname:
3. Position:
4. Name of school:
5. Name of district:
6. Telephone number:
7. Email address:
8. Please specify dietary requirements, if any:
9. Do you have special needs/disability? If yes, please specify:
.....
10. In case of disability, do you require assistance? If yes, please specify:
.....

Please return the RSVP form **on or before 04 August 2017** by fax to 086 729 5347 or email avril.malgas@westerncape.gov.za



Part B

Female Principal Conference 2017

**VENUE: Old Mutual Building, Jan Smuts Drive, Pinelands
Saturday, 12 August 2017, 08:00–15:00**

1. Will you be able to attend the Female Principal Support Network 2017? Yes/No
2. Full names and surname:
3. Position:
4. Name of school:
5. Name of district:
6. Telephone number:
7. Email address:
8. Please specify dietary requirements, if any:
9. Do you have special needs/disability? If yes, please specify:
.....
10. In case of disability, do you require assistance? If yes, please specify:
.....
11. Do you require accommodation?

Please return the RSVP form **on or before 04 August 2017** by fax to 086 729 5347 or email
avril.malgas@westerncape.gov.za

**EIS TEN OPSIGTE VAN REISE MET PRIVATE MOTORVERVOER OP AMPTELIKE DIENS
CLAIM IN RESPECT OF OFFICIAL JOURNEYS UNDERTAKEN BY PRIVATELY OWNED MOTOR TRANSPORT**

Geëis deur (in blokletters) Claimed by (in block letters)	Department van Department of	EDUCATION
Rank:		
Adres Hoofkwartier/Headquarters	Maand	
	vir Rekenmeester/for Accountant	
	Eis/Claim No.	

BESKRYWING VAN VOERTUIG/DESCRIPTION OF VEHICLE

Fabrikaat en model Make and model	Jaar van vervaardiging Year of manufacture	Tipe(motor, motorfiets, bromponie, ens.) Type(motor-car, motor cycle, scooter, ect.)	Registrasie nommer Registration number	Enjinslag, volumegroep in cm3 Engine swept volume group in cm3

**OPSOMMING VAN REISE AFGELê EN EIS OM TOELAES
SUMMARY OF JOURNEYS UNDERTAKEN AND CLAIM FOR ALLOWANCES**

(Vir besonderhede sien anderkant/For details see reverse)

					Vir Rekenmeester Accountant	For Accountant
		Tarief per kilometer Tariff per kilometre	Bedrag Amount		Toewysing Allocation	Kode Code
			R	c		
Kilometertoelae Kilometre allowance						
*Passasierstoelae Passenger allowance						
*Nie van toepassing op motorfiets en bromponies nie Totaal Not applicable in the case of motor cycles and scooters						
Total						

Ek sertifiseer dat dit vir my nodig was om ampshalwe die reise te onderneem ten opsigte waarvan ek 'n eis indien en dat die toelae wat ek I certify that I was required to perform the travelling claimed for on official duty and that the allowances claimed are in accordance with the eis in coreenstemming is met die gemagtigde tariewe ten opsigte van my motorkar/motorfiets/bromponie en dat die passasiers werklik en rates authorisec in respect of my motor-car/motor cycle/scooter and that the passengers were actually and necessarily conveyed on official noodsaaklik op amptelike diens vervoer is. business.

Handtekening van eiser Signature of claimant		
KORREK VERKLAAR/CERTIFIED CORRECT		GOEDGEKEUR/APPROVED
Hoof van afdeling/Kantoor / Head of Branch/Office		Departements hoof/Head of Deptment
Datum/Date		Datum/Date
Ontvang van die rekenpligtige amptenaar die bedrag van Received from the accounting officer the amount of		
Rand	cent	Betaal per s/o No. Paid by W V No
Handtekening/Signature	Datum Date	Datum Date