

Cheque #  
Date



### Travel/Expense Claim Form

Name: \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Home or Cell Telephone Number: \_\_\_\_\_

School: \_\_\_\_\_

**Reason for Travel/Event/Committee:** \_\_\_\_\_

Date(s): \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Kms: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Kms: \_\_\_\_\_

Total Kilometers \_\_\_\_\_ x Rate (\$0.44 per km) \$ \_\_\_\_\_

<b>Meals:</b>	#	Amount	
Breakfast	_____	(\$11)	\$ _____
Lunch	_____	(\$13)	\$ _____
Dinner	_____	(\$30)	\$ _____

**Accommodation Details** (Attach receipts)  
\_\_\_\_\_ \$ \_\_\_\_\_

**Incidentals:** (\$8 per night) \$ \_\_\_\_\_

**Other Expenses** (Attach receipts)  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

Grand Total (CAD) \$ \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_