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| **TRAVEL CLAIM EXPENSES REPORT** |
|  |  |  |  |  |  |  |  |  |  |  |  |
| **TRAVELER:** |       |  | **DEPARTMENT:** | **Faculty of Education** |
| **PAYABLE TO (if different than traveler)** |       | **DEPARTURE DATE:** | Click or tap to enter a date. |
| **MAILING ADDRESS:** |       | **RETURN DATE:** | Click or tap to enter a date. |
|  |  |       | **DESTINATION:** |       |
|  |  |       |  |  |  |  |  |
| **REASON FOR TRIP:** |       | **G/L ACCOUNT #:** |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| **EXPENDITURES CLAIMED** |
| Attach Receipts where needed - Use additional claim if more space is needed |
| **Date** | **Description** | **# Km \*** | **Transport** | **Lodging** | **Meals**  |  | **Other** | **GST \*\*** | **HST** | **TOTAL** |
|  |  |  | **($0.51 per km)** |  | **Per Diems****Breakfast - $12** **Lunch - $16** **Dinner - $26****DAILY $54** | **Receipts** |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |
| **TOTAL** | **km** | **$** | **$** | **$** | **$** | **$** | **$** | **$** | **$** |
|  |  |  |  |  |  |  |  **Total expenses**  |  **$**  |  |
| \* No Receipts are required for reimbursement related to kilometer and per diem reimbursements. Current per diem rates are noted in columns. | **Less Advance** |  **$** |  |
| \*\* Applicable only to expenses incurred in Canada but outside of NS, NB, NL, PEI and ON |  | **Balance Due to Claimant** | **$** |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| **I hereby certify that this claim is correct and that all expenditures were necessarily incurred with due regard to reasonable economy.** | **FOR USE OF BUSINESS OFFICE:** |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | Checked by: |  |  |  |
| **Signature of Claimant** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | Date: |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **Approved By:** |  |  |  |  |  |  |  |  |  |