

# TRAVEL CLAIM EXPENSES REPORT

TRAVELER: \_\_\_\_\_  
 PAYABLE TO (if different than traveler) \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 REASON FOR TRIP: B.Ed. student teacher supervisions



DEPARTMENT: Faculty of Education  
 DEPARTURE DATE: \_\_\_\_\_  
 RETURN DATE: \_\_\_\_\_  
 DESTINATION: \_\_\_\_\_  
 G/L ACCOUNT #: \_\_\_\_\_

## EXPENDITURES CLAIMED

Attach Receipts where needed - Use additional claim if more space is needed

Date	Description	# Km * (\$0.37 per km)	Transport	Lodging	Meals		Other	GST **	HST	TOTAL
					Per Diems Breakfast - \$8 Lunch - \$12 Dinner - \$25	Receipts				
<b>TOTAL</b>		\$	\$	\$	\$	\$	\$	\$	\$	\$

<b>Total expenses</b>	\$
<b>Less Advance</b>	\$
<b>Balance Due to Claimant</b>	\$

\* No Receipts are required for reimbursement related to kilometer and per diem reimbursements. Current per diem rates are noted in columns.

\*\* Applicable only to expenses incurred in Canada but outside of NS, NB, NL, PEI and ON

I hereby certify that this claim is correct and that all expenditures were necessarily incurred with due regard to reasonable economy.

\_\_\_\_\_  
 Signature of Claimant

\_\_\_\_\_  
 Approved By:

**FOR USE OF BUSINESS OFFICE:**

Checked by: \_\_\_\_\_

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