



**Claimant**

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

Association: \_\_\_\_\_

Month: \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

**Expenditure**

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Dates:								
Parking								\$ -
Taxi								\$ -
Hotel								\$ -
Internet								\$ -
Breakfast \$28.40/Day								\$ -
Lunch \$27.40/Day								\$ -
Dinner \$57.70/Day								\$ -
Incidentals \$17.30/Day								\$ -
Other								\$ -
								<b>Sub-Total</b> \$ -
<b>Travel</b>								<b>Travel</b> \$ -
(air, rail, bus, car rental)								
<b>Auto</b>								<b>Kms</b> \$ -
(enter amount of kms)	Kilometres		Kilometre rate	\$0.64				
								<b>Claim Total</b> \$ -

**Please complete form in full.**  
 Attach receipts for air, rail, bus fare, parking, taxis, hotel and internet access.  
 Only signed and dated forms accompanied by receipts will be processed.  
 Submit claims to the Faculty Association office within 7 days of travel.  
 UNBC Faculty Association Rm 3084, Administration Building.

**Cheque payable to:**

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

City: \_\_\_\_\_ Province: \_\_\_\_\_

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

Signature of Claimant \_\_\_\_\_ Date Signed \_\_\_\_\_