

Board & Committee Expense Report

I certify the expenditures below were incurred solely on Association business. See Policy for further details.

NAME: _____ Dept.# _____ Signature _____ Date: **20-Sep-16**

Address: _____

Trip	Date	Journey	Detail Code for Project/Initiative, Committee, Program etc.	Mileage/Gas Allow. @ \$0.42 per km		Meals and Gratuities	Room	Other Trans. incl Parking	Misc. Other	Total
				KM	\$					
A				0	0.00					0.00
B				0	0.00					0.00
C					0.00					
				0	0.00					0.00
D					0.00					
				0	0.00					0.00
E					0.00					
				0	0.00					0.00
Column Totals (This Page)				0	0.00	0.00	0.00	0.00	0.00	0.00
Account No.										

Total Amount=	0.00
Less Advances:	0.00
Amount Payable:	0.00

PURPOSE OF TRIP

- A _____
- B _____
- C _____
- D _____
- E _____

Please attach original receipts for all items. Receipts must show all GST information.	EXAMINED & APPROVED By: _____ Date: _____	
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