

Expense Claim – Please complete all sections!

Name, Union position (of the person cheque should be payable to): _____

Contact email: _____

Complete Mailing address (cheque should be sent to): _____

Description of the Expense: (e.g., coffee for mobilization event): _____

Date submitted: _____

Date on the receipt	Name of the business that the purchase was made at	Description of expense (e.g., paper, food, art supplies, etc)	Receipt* (Y/N)	Amount
	Less any advances received:			
Total				

*Explanation (if no receipt attached):

*Note: For Union conferences and conventions, in-town events are permitted a non-receipted \$50.00 per diem for meals. Out-of-town events are permitted a non-receipted \$75.00 per diem for meals. Other reasonable expenses will be reimbursed with receipts. **Only in extremely rare instances will expenses be reimbursed without receipt.** Reimbursement of all expenses is dependent upon approval of the Secretary Treasurer.*

Submitted By _____

Approved By _____

Approved By _____

Budget	Executive	GMM/AGM	1281 CA	Other
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