

## Claimant

Name

Association / union

Month

Purpose of expenditure / event(s)

### Claim for

- CAUT  
 Defence Fund  
 NUCAUT  
 Harry Crowe Foundation

# General Expense Claim

## Expenditure

Indicate date(s)

S \_\_\_ M \_\_\_ T \_\_\_ W \_\_\_ T \_\_\_ F \_\_\_ S \_\_\_

### PARKING

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### TAXI

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### HOTEL / INTERNET

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### BREAKFAST \$21.10/day

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### LUNCH \$21.35/day

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### DINNER \$52.40/day

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### INCIDENTALS \$17.30/day

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### FOR OFFICE USE ONLY

## Travel

### TICKET

Enter \$ amounts for air, rail, bus & car rental

Prepaid

+

Exchange

+

Other

Paid by member

+

Exchange

+

Other

### AUTO

Enter km amount

Kilometres

x

Kilometre rate

1

2

3

4

5

6

7

8

9

10

11

12

## Subtotals

### ADVANCE TOTAL

Cash advance

+

Prepaid ticket

From line 8 above

### Cost

Add lines 1 to 10

### Less Advance

Cash + prepaid ticket

# CLAIM TOTAL

Line 11 - 12

### Please complete in full.

Attach receipts for air, rail, bus fare, parking, taxis, hotel & internet access.

Submit completed claims by email to [TravelClaims@caut.ca](mailto:TravelClaims@caut.ca)

Questions may also be directed to [TravelClaims@caut.ca](mailto:TravelClaims@caut.ca)

## Cheque payable to

Name

Address

City

Province

Postal code

Signature (of claimant)

Date signed

### FOR OFFICE USE ONLY

Approved