

Please complete in full. Attach receipts for air, rail, bus fare, parking, taxis, hotel & internet access.

Submit completed claims and questions by email to TravelClaims@caut.ca

All travel-related expenses must be submitted within 30 days of the event's completion.

General Expense Claim

Executive Committee,
Committee Members, NUCAUT,
Defence Fund, Guest

Claimant

Name

Association / union

Month

Purpose of expenditure / event(s)

Select Organization for claim

- CAUT
- Defence Fund
- NUCAUT
- Harry Crowe Foundation

Expenditure

Indicate date(s)

S	M	T	W	T	F	S
---	---	---	---	---	---	---

PARKING

--	--	--	--	--	--	--

TAXI

--	--	--	--	--	--	--

HOTEL / INTERNET

--	--	--	--	--	--	--

BREAKFAST \$24.90/day

--	--	--	--	--	--	--

LUNCH \$25.20/day

--	--	--	--	--	--	--

DINNER \$61.85/day

--	--	--	--	--	--	--

INCIDENTALS \$17.30/day

--	--	--	--	--	--	--

APPROVED
DEPENDANT CARE

--	--	--	--	--	--	--

MISCELLANEOUS

--	--	--	--	--	--	--

1	<input type="text"/>
2	<input type="text"/>
3	<input type="text"/>
4	<input type="text"/>
5	<input type="text"/>
6	<input type="text"/>
7	<input type="text"/>
8	<input type="text"/>
9	<input type="text"/>

Travel

TICKET

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

Paid by member

+

Other

AUTO

Enter km amount

Kilometres

x

Kilometre rate

Cost

Add lines 1 to 10

Subtotals

ADVANCE TOTAL

Cash advance

Less cash advance

CLAIM TOTAL

10	<input type="text"/>
11	<input type="text"/>
12	<input type="text"/>
13	<input type="text"/>

Line 12 – 13

Cheque payable to

Name

Address

City

Province

Postal code

Signature (of claimant)

Date signed