

From (mm/dd/yy)	To (mm/dd/yy)
4/1/2017	4/30/2017

Name of Claimant: Surname, First Name
Lever, Dennis

I warrant that I have a valid driver's licence and vehicle insurance coverage.

Claimant's Signature / _____

15/05/17
Date (MM/DD/YY)

15/05/17
Date (MM/DD/YY)

Business Travel Detail						
Item No.	Date (mm/dd/yy)	Destination/Explanation	Daily Travel (km)	From (Location)	To (Location)	Includes return km (Yes/No)
1	4/19/2017	TAPMO meeting at OSSGA	110	Home	Mississauga	yes
2						
3						
4						
5						
6						
7						
8						
9						

Total Kilometers 110
Rate/km \$ 0.50
Total Mileage \$ 55.00

Business Expense Detail (Attach all original and itemized invoices/receipts)			
Item Number	Date (mm/dd/yy)	Destination/Explanation	Total Expenses (including taxes)
1			
2			
3			
4			
5			
6			
7			
8			
9			

Totals \$ -

Total \$ Amount Due \$ 55.00

FINANCE DEPARTMENT	
Prices, Extensions & Totals Checked:	
Cheque No.	21220
GL Account No.	180-4308
Approved By:	