

TRUSTEE EXPENSE FORM

NAME: _____

MONTH: _____

<u>DATE</u>	<u>COMMITTEE MEETINGS/ DETAILS OF TRIP</u>	<u>KILOMETERS</u>	<u>NO. OF DAYS DAILY ALLOWANCE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL		=====	=====

MEALS: Sunday Monday Tuesday Wednesday Thursday Friday Saturday

DATE							
BREAKFAST							
LUNCH							
DINNER							

MEAL TOTAL \$ _____

Total Mileage: _____ kms @ 0.41 per kilometer \$ _____

Total Daily Allowance: _____ days @ \$126.00 (maximum per day)
(2 hours or less \$63.00) \$ _____

Meals: (Breakfast \$7.85, Lunch \$9.85 and Dinner \$16.70) \$ _____

Registration Fee (attach receipts): \$ _____

Hotel Accommodation (attach receipts): \$ _____

Telephone Calls (statement attached): \$ _____

Other Expenses (paid receipts attached): \$ _____

Subtotal: \$ _____

Less: Personal Expenses \$ _____

TOTAL: \$ _____

Certified Correct:

Approved by:

Trustee
(Revised – January 1, 2018)

Secretary-Treasurer