

# Out of District Travel Advance/Expense Report



Note: Advance cheques are processed bi-weekly. Documentation must reach Accounting by 12:00pm Tuesday to be included.

Name \_\_\_\_\_ Department \_\_\_\_\_

Departure Date \_\_\_\_\_ Time \_\_\_\_\_  a.m.  p.m.

Return Date \_\_\_\_\_ Time \_\_\_\_\_  a.m.  p.m.

Destination \_\_\_\_\_ Purpose \_\_\_\_\_

	<b>ADVANCE</b>	<b>EXPENSE</b>	<b>GST</b>
<b>Mileage</b> _____ <input type="checkbox"/> 55¢ per km (effective Jan 1, 2018)	_____	_____	_____
<b>Airfare or other</b> _____	_____	_____	_____
<b>Ground Transportation or Parking</b>	_____	_____	_____
<b>Meal Allowance</b>			
____ Breakfasts @ 10.00 = _____			
____ Lunches @ 15.00 = _____			
____ Dinners @ 25.00 = _____			
____ Incidentals @ 10.00 = _____	_____	_____	_____
<b>Deduct Complimentary Meals Received</b>			
____ @ 10.00 + ____ @ 15.00 + ____ @ 25.00 = (_____)	(_____)	(_____)	(_____)
<b>Accommodation</b>			
____ Nights @ _____	_____	_____	_____
<b>Other Expenses</b>			
_____	_____	_____	_____
<b>ADVANCE TOTAL</b>	<b>\$_____</b>	(_____)	(_____)
<b>AMOUNT DUE (REFUNDABLE)</b>		<b>\$_____</b>	<b>\$_____</b>

<b>Approvals</b>	<b>Advance</b>	<b>Expense</b>
Traveler _____	_____	_____
Supervisor _____	_____	_____
Account Code _____	_____	_____

Mailing Instructions: Name \_\_\_\_\_ Department \_\_\_\_\_  
 Internal Mail  Pick Up  Other (please indicate): \_\_\_\_\_ Vendor No. \_\_\_\_\_

Copies: Advances – 2 copies to Accounting, retain 1 copy  
 Expenses – 1 copy to Accounting, retain 1 copy