



Canadian Yachting Association

EXPENSE REPORT for Volunteers

Name: _____

Address: _____ Postal Code: _____

Telephone: (O) _____ (H) _____ e-mail _____

Purpose of Travel: _____ Dates: from _____ to: _____

Budget Manager: _____ Authorization Attached: Yes / No

Travel Location: From _____ To _____

<u>EXPENSE</u>	<u>CLAIM</u>
Travel	
Air	\$ _____
Auto \$0.36 x _____ kms	\$ _____
Towing \$0.10 x _____ kms	\$ _____
Taxis	\$ _____
Other	\$ _____
Accommodation	
No. of Nights x\$ _____	\$ _____
No. of Nights x\$ _____	\$ _____
Meals	
Per Diem \$50.00 as detailed below .	\$ _____
	\$ _____
	\$ _____
Miscellaneous	
_____	\$ _____
_____	\$ _____
_____	\$ _____
Totals	\$ _____

**Original receipts must be attached – photocopies and travel agent billings are not acceptable.
Complete, sign and return within three weeks of event.**

Air Travel: Only reasonable economy airfare will be reimbursed. Original proof of purchase and boarding pass must be included.

Travel by Private Car: Reimbursed \$.36/km up to maximum of most economical means available.

Train, Bus, Ferry, & Taxi Travel: Original receipts required. Only reasonable amount for taxi fares will be considered.

Hotel Accommodation: Up to a maximum of \$60.00 per day will be reimbursed (original receipt required), \$13.50/day without receipt.

Meals: Maximum amounts: \$10.00/Breakfast, \$15.00/Lunch, \$25.00/Dinner.

I certify that the expenses claimed were incurred on behalf of the Canadian Yachting Association and will not be reimbursed from any other source.

Signature: _____ Date: _____

Mail signed form to: CANADIAN YACHTING ASSOCIATION, 53 Yonge St. ,Kingston, Ontario K7M 6G4