## **Event Expense Reimbursement Report**



Expenses for Training / Event :	enses for Training / Event :		
Name:	Date submit	ted:	
Expenses Payable To:			
Mailing Address:			
City:	Prov:	Postal Code:	

Date	City	Description (airfare, hotel, meals, parking, taxi)	Amount	CODE (Office Use Only)
<b></b>		TOTAL:		

Notes:

2020-21 RATES			
Travel:	Mileage Air	\$0.48/km Economy - <i>Lowest fare available</i> (book <u>minimum</u> 2 weeks in advance)	
	Parking/Taxi	receipt required	
Meals:	Breakfast Lunch Dinner Incidentals	\$10.00 \$10.00 \$25.00 \$5.00 per day	

P	LEASE RETURN TO:
	Lynne Bearisto
	12 Henri Blanchard Dr
	Charlottetown PE
	C1A 8E2
	or by email: skatecanadapei@gmail.com
	(Please include ORIGINAL receipts)