

PVNC ~ OECTA Expense Report

(NOT for use in conjunction with PD subsidy form)

Please submit via Board courier, FAX (705 742 8599) or email office@pvncoecta.ca.

Please print legibly

Name: _____ Location: _____

Home Address: _____



| Date | Description (i.e. origin & destination for kilometrage, name of meeting, etc.) | Travel (\$0.72 / km, please list kilometrage) | Accommodation | Meals (maximums: Dinner \$45 Lunch \$30 Breakfast \$25) | Other |
|---------|---|--|---------------|---|-------|
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| | | | | | |
| Totals: | | | | | |

Total all items: _____

Less advance: - _____
(if applicable)

Claim: _____

Signature: _____

Date: _____

For Office Use Only:

Approved by: _____

Amount: _____

Cheque No. _____

Date: _____

Department: _____

effective 2025 02 25

(all claimed expenses, except kilometrage, **MUST** be accompanied by proper receipts)