

# 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](mailto:office@pvncoecta.ca).

Please print legibly



Name: \_\_\_\_\_ Location: \_\_\_\_\_

Home Address: \_\_\_\_\_

Date	Description (i.e. origin & destination for kilometrage, name of meeting, etc.)	Travel (\$0.73 / km, please list kilometrage)	Accommodation	Meals (maximums: Dinner \$45 Lunch \$30 Breakfast \$25)	Other
<b>Totals:</b>					

Total all items: \_\_\_\_\_

Less advance: - \_\_\_\_\_  
(if applicable)

Claim: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For Office Use Only: Approved by: _____ Amount: _____ Cheque No. _____ Date: _____ Department: _____
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effective 2025 02 25

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