

CUPE 4802 EXPENSE FORM

Name	Date
School	Mailing Address

Description of Professional Development Activity:

Location	Actual Date(s) of PD Activity
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Are substitute costs involved? Yes No

No. of Days _____

*Please provide receipts

Expenses	Category		Estimate	Actual
	Km _____ @	\$0.45	\$	\$
	Breakfast _____ @	\$10.00	\$	\$
	Lunch _____ @	\$15.00	\$	\$
	Supper _____ @	\$20.00	\$	\$
	Private Accomodation _____ @	\$15.00	\$	\$
	Accomodation _____		\$	\$
	Registration _____			
Living Allowance	In town conference, meeting, convention, etc. plus any wages lost as a result of attendance	\$25.00	\$	\$
	Out of town conference, meeting, convention, etc. plus any lost wages as a result of attendance	\$75.00	\$	\$
	Outside Saskatchewan conference, meeting, convention, etc. plus any lost wages as a result of attendance	\$100.00	\$	\$
Other Expenses: Attach receipts and explain below				
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
Total			\$	\$

Signature of Member: _____

Signature of Treasurer: _____

Cheque #: _____

Date Paid: _____

Initials of Exec. Member: _____

Please mail completed expense forms to the Treasurer:

Brenda Ohlheiser
 7 McEwen Drive
 Kindersley, SK S0L 1S1