



IslandLink Library Federation Travel Expense Claim Form

Name:

Address:

Purpose:

Payable to:

Expense Details	Day 1	Day 2	Day 3	Day 4	GST Yes/No	Total
Date						
Mileage km@\$.61						
Airfare						
Bus/Taxi/Ferry						
Parking						
Accommodation						
Breakfast \$23.75 daily						
Lunch \$25.75 daily						
Dinner \$35.50 daily						
Totals						

Please attach original receipts for all expenses except mileage. Meals and accommodation will be paid at the receipt amount, or the daily maximum, whichever is less.

Certified that this is a true statement of disbursements made as a result of IslandLink business and that I have not and will not be reimbursed for them by any other party.

Signature: _____ Date: _____

Submit completed form to: IslandLink Library Federation Attn. Laura Beswick
3185 West Road, Nanaimo BC, V9R 6X1