

## Synod 2019 Travel Expense Claim Form

Name: \_\_\_\_\_ Region/Deanery: \_\_\_\_\_

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

**Expenses:**

DATE	MEALS	HOTEL	PUBLIC TRANSPORT	PARKING	OTHER	PRIVATE TRANSPORT
<b>SUBTOTAL:</b>						
					<b>TOTAL:</b>	

**Private Transport:**

DATE	FROM	TO	KMS	RATE	AMOUNT
				<b>TOTAL:</b>	

**Allowable expenses:**

- Air/train/bus/Taxi/parking fare (full compensation-receipts are necessary)
- Car use: \$.33/km plus \$0.05/passenger to a maximum of \$0.48/kilometre
- Meals: Maximum: breakfast: \$12; lunch: \$20; supper:\$35 (Synod does not reimburse for meals provided for on Synod sites)
- Hotel: Maximum \$125/night (for extra hotel accommodation – example: Wednesday and Sunday)
- Lodging: \$40.00 per night (for extra lodging accommodation – example: Wednesday and Sunday)

**N.B.**

- Reimbursements are payable to Synod members (clergy, officers, delegates, postulants)
- All receipts, except for lodging and car use, must be attached

Please indicate the name(s) of the person(s) you transported:

\_\_\_\_\_

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

\_\_\_\_\_

GL: \_\_\_\_\_  
 Taxes: \_\_\_\_\_

Synod Chq #: \_\_\_\_\_