

## EXPENSE CLAIM FORM - President, VP, Board

DATE November 10, 2014

VENDOR/STAFF#  
(as applicable) VE-0342

NAME  
(Claimant/Payee) Carolyn Warren

Position VP Arts

FIRST MIDDLE LAST

Permanent Mailing Address: \_\_\_\_\_

Itinerary and Purpose of Travel/Expense: Business Travel: QC, OT, NY (cont)

Receipt no.	Date	Expense Type	GL Acct	Fund	Cost Centre	Activity Type	Activity Code	Sub-activity Code	Activity Locn	Description	NET Amount	GST Amount	Total Amount
1	10/8/2014	Travel-General (Pres,VP)	3101	2100	270900	690				taxi	\$ 11.40	\$ 0.60	\$ 12.00
2	10/8/2014	Travel-General (Pres,VP)	3101	2100	270900	690				taxi	\$ 15.20	\$ 0.80	\$ 16.00
3	10/10/2014	Travel-General (Pres,VP)	3101	2100	270900	690				taxi	\$ 12.35	\$ 0.65	\$ 13.00
4			#N/A	2100									
5			#N/A	2100									
6			#N/A	2100									
7			#N/A	2100									
8			#N/A	2100									
9			#N/A	2100									
10			#N/A	2100									
11			#N/A	2100									
12			#N/A	2100									
13			#N/A	2100									
14			#N/A	2100									
15			#N/A	2100									
16			#N/A	2100									
17				2100									\$ -
18				2100									\$ -
19				2100									\$ -
20				2100									\$ -
<b>Total Expenses : A</b>													<b>41.00</b>

GL Code Summary										
GL	Expense Type	Cost Centre	Fund	Activity Type	Activity Code	Sub-activity Code	Activity Location	NET Amount	GST	Total Amount
3101	Travel-General (Pres,VP)	270900	2100	690				38.95	2.05	41.00
3102	Travel-General (BOG)	270900	2100	690				-	-	-
3105	Travel-Accommodation	270900	2100	690				-	-	-
3106	Travel-Meals	270900	2100	690				-	-	-
3107	Travel-Incidentals	270900	2100	690				-	-	-
3610	Hosting	270900	2100	690				-	-	-
3611	Hosting (Alcohol)	270900	2100	690				-	-	-
6132	Travel Advance	270900	2100	690				-	-	-
	Other1	270900	2100	690				-	-	-
	Other2	270900	2100	690				-	-	-
	Other3	270900	2100	690				-	-	-
<b>Total</b>										<b>41.00</b>

Travel Advance	B	
Balance Due to Claimant	A-B	\$ 41.00

If Travel Advance exceeds expenses and the Centre is to be reimbursed, please attach top copy of cheque or claim.

Nov 27 2014

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Return to Requestor (RTR)	Mail to Claimant
Requestor Name (if RTR)	
Requestor Dept (if RTR)	
Prepared by (if not claimant)	

ENTERED NOV 12 2014

Luminato  
1817

**RECEIPT**

Cab No. 1817 G.S.T. \_\_\_\_\_

From Harbord House

To Hotel on Bloor

Date Oct 8 14 Amount 12.00

Signature 

Download the free Hailo app from  
**HALOAPP.COM** and enter this promo  
code to **save \$20** off your first ride\*



**TRIP RECEIPT**

Searchlight meetings  
TORONTO.SUPPORT@HALOAPP.COM

Date Oct 8 14 Reference \_\_\_\_\_  
From \_\_\_\_\_ Car # \_\_\_\_\_  
To 29-Queen Signature \_\_\_\_\_  
Amount 16.00 HST# \_\_\_\_\_

\*To enter code tap 'Account' then 'Halo Credits'. Unused value will not carry forward. Code must be entered before taking ride.

**REÇU - RECEIPT**

04/10/14  
DATE j/d m/m a/y

\$1300  
I.P.S. & T.V.Q. incluse  
G.S.T. & P.S.T. included

VOYAGE DE/FROM \_\_\_\_\_  
TRIP À/TO \_\_\_\_\_

No. Vignette No. Permis de travail  
Sticker No. Workpermit No.  
TPS/GST 2775  
TVQ/QST \_\_\_\_\_  
**CHAMPLAIN TAXIS FAX: (514) 273-4445**  
ADMINISTRATION: (514) 273-3377

1

2

3