BC Union Workers' Union
PO Box 80165, Station South
Burnaby, BC V5H 3X5

EXPENSE CLAIM FORM

Note: All expenses must be prior approved

Name: _____

Address: _____

_____

Phone: _____

Rates (effective July 1, 2024)

1) Meals: Breakfast: $25.00; Lunch: $30.00; Dinner: $40.00
2) Hotel: overnight incidental: $20.00
3) Automobile Expenses: $0.70 per kilometre
4) Private accommodation: $100.00 per night (Cannot claim incidentals. No receipt required)

Travel Reimbursement
Receipts Required

DATE: YY/MM/DD	ACCOMMODATION AMOUNT	√ B	√ L	√ D	MEAL AMOUNT	CAR AMOUNT	TAXI/CAR RENTAL	AIR COST	FERRY COST	INCIDENTAL EXPENSES	MISC. EXPENSES	RECEIPTS ATTACHED √	EXPLANATION/REASON FOR CLAIM Describe Union Function Attended, Incidental and Miscellaneous Expenses Incurred (Use as many lines as necessary)
TOTALS													

Less Advance	-
TOTAL OWING:	+

I certify that the above is a true statement of disbursements made by me for the reasons noted above.

_____ Signature

_____ Date

Payment Approved By:

_____ (Signature)

_____ (Print Name)

Date Approved: _____