

Saskatchewan Elks Association

508 12th STREET EAST, SASKATOON, SK. S7N OH2

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Expense Form

Date: _____

Name: _____

Position: _____

Address: _____

Telephone #: _____

City or Town: _____

Postal Code: _____

Purpose: _____

Travel:

Mileage _____ @ 40 cents per km. \$ _____

Lodging _____ nights @ \$ _____ (act./max. \$130.00) \$ _____
(whichever is less)

Meals per Diem _____ @ \$ _____ (\$40.00/day) \$ _____

Total Travel \$ _____

Other Eligible Expenses: Telephone \$ _____

Postage \$ _____

Office Supplies \$ _____

Other (explain & attach bills) \$ _____

_____ \$ _____

Less any Registration or Expenses paid on your behalf: \$-- _____

Total Other Expenses \$ _____

Total Expenses \$ _____

In order for payment to be made a copy of the above bills must be attached & this Expense Form must be Signed to be re-imbursed.

Printed Name: _____ Signature: _____

Certified Correct: _____ Authorized: _____

FOR OFFICE USE ONLY:

Cheque # _____ Date _____ Amount \$ _____
(M/D/Y)