

**NORTHWEST LIBRARY FEDERATION
Expense Claim Form**

Name: _____

Library: _____

Conference/event: _____

Date(s): _____

Please circle one: Cheque is to be made out to CLAIMANT or LIBRARY

Receipts are necessary *except for mileage*. Please use the charts below to calculate meal and mileage claims.

Meals	Breakfast \$12.00	Lunch \$13.80	Dinner \$23.25	Total
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				
Total				

The rate for reimbursement of travel expense using own vehicle is **\$0.53 per km**.

Library	Hazelton	Houston	Kitimat	Prince Rupert	Smithers	Stewart	Terrace
Hazelton	xxxxx	270	412	578	150	508	280
Houston	270	xxxxx	670	834	130	792	536
Kitimat	412	670	xxxxx	410	536	748	146
Prince Rupert	578	834	410	xxxxx	706	926	294
Smithers	150	130	536	706	xxxxx	664	410
Stewart	508	792	748	926	664	xxxxx	632
Terrace	280	536	146	294	410	632	xxxxx

Total

Item	Description	GST	Amount	Total
Total Meals				
Total Mileage				
Hotel				
Taxi				
Airfare				
Other				
TOTAL CLAIM				