669	UNIVERSITY OF
29	TORONTO
COROR	

EXPENSE REPORT / ACCOUNTABLE ADVANCE SETTLEMENT Financial Services Dept. (revised May 1, 2018)											
TO BE COMPLETED BY CLAIMANT	Accounting Information - TO BE COMPLETED BY BUSINESS OFFICER										
Indicate reimbursement currency:	Claim Type: Select claim type. Enter 0 EMPLOYEE FIELD TRIP Business Area:	Business Area:									
For expense reimbursements in a currency CAD		ofT									
other than CAD, <u>DO NOT</u> convert expenses USD	G/L account is not listed, enter 2 STUDENT FIELD TRIP Document Number:										
to CAD value. Other	appropriate G/L account on "OTHER" 3 STUDENT CONFERENCE										
NOTE: Original receipts are required.	line. 4 VISITOR										

TO BE COMPLETED BY CLAIMANT					ine. 4 VISITOR									
Personnel Number	Period of Travel	EXPEN	ISE CATEGORIES	AMOUNT		G/L ACCOUNT NUMBER	TAX CODE	COST CENTER	OR	INTERNAL ORDER		FUNDS CENTER	FUND	COMMITMENT
Last Name	Initial	AIRFARE: Attach proof of payment & proof of	Travel within Canada			8 4 0 1 0	ER		Ť		. $dash$			
Lactitaine			Travel to USA from Ontario			8 4 0 1 0	EE				. 🗕			
Address		air travel (*)	All other Airfare			8 4 0 1 0	E0				. 🖯	-		
		ACCOMMODATION:	ON (13%HST)			8 4 0 2 0	ER		1		. $dash$			
			PEI, NS, NF, NB (15%HST)			8 4 0 2 0	EN				. 🖯	-		
Purpose and Relevance to University Business		1	All other provinces / territories			8 4 0 2 0	EE				. 🖯	-		
			USA / International			8 4 0 2 0	E0							
		ALLOWANCE:	Per Diem: Canada			8 4 0 3 0	EA							
Department Contact		1	Per Diem: USA / International			8 4 0 3 0	E0							
			KMS X 54 cents/km			8 4 0 4 0	EA							
Department		RAIL/BUS:	Travel within Canada			8 4 0 5 0	ER							
			Travel outside Canada			8 4 0 5 0	E0							
Telephone	Fax	PUBLIC TRANSIT	Travel within or outside Canada			8 4 0 5 5	E0							
		CAR RENTAL: Attach	ON (13%HST)			8 4 0 6 0	ER							
Date Prepared		detailed receipt & contract (*)	PEI, NS, NF, NB (15%HST)			8 4 0 6 0	EN							
		contract ()	All other provinces / territories			8 4 0 6 0	EE							
	certify that I have incurred the expenses		USA / International			8 4 0 6 0	E0							
claimed, they are in compliance with University policies & procedures, all sponsor terms and conditions (if applicable), & have		MEALS: Attach detailed	ON (13%HST)			8 4 0 7 0	ER							
not been claimed through		itemized receipts (*)	PEI, NS, NF, NB (15%HST)			8 4 0 7 0	EN							
			All other provinces / territories			8 4 0 7 0	EE							
Signature of Claimant			USA / International			8 4 0 7 0	E0							
		TAXI:	ON (13%HST)			8 4 5 0 0 0	ER							
			PEI, NS, NF, NB (15%HST)			8 4 5 0 0 0	EN							
Print Name	Title		All other provinces / territories			8 4 5 0 0 0	EE							
			USA / International			8 4 5 0 0 0	E0							
		OTHER:												
	claration: I certify the expenses claimed										L			
were reasonable & require are relevant to the research	ed for University business & (if applicable)										L			
	· ·										. L			
Signature of Authorized A	pprover										. L			
											. L			
											. L			
Print Name	Title		J		Ţ						丄			
ĺ			TOTAL EXPENSES	1	NO	DTES:								
For AA Coults	Figure 101 Octobro (calcius)		LESS: ACCOUNTABLE ADVANCE											
	: Financial Services (original copy) g department (photocopy)		REIMBURSEMENT REQUIRED	-										
Originating	a actar micrit (bijorocoh)	I	OR REPAYMENT											