

**Western Teacher's Association Expense Form**

Cheque Number: \_\_\_\_\_

Name \_\_\_\_\_  
First Name Initial Surname

Address \_\_\_\_\_  
Street, City/Town Postal Code Phone Number

**1. OPERATING**

a. \_\_\_\_\_

**2. SOCIAL**

a. \_\_\_\_\_

**3. PUBLIC RELATIONS**

a. \_\_\_\_\_

**4. SCHOLARSHIP**

a. \_\_\_\_\_

**5. COLLECTIVE BARGAINING**

a. \_\_\_\_\_

**6. EQUALITY AND SOCIAL JUSTICE**

a. \_\_\_\_\_

**7. PROFESSIONAL DEVELOPMENT**

a. \_\_\_\_\_

**8. NEW TO WESTERN**

a. \_\_\_\_\_

**9. INDIGENOUS EDUCATION**

a. \_\_\_\_\_

**10. RETREAT**

a. \_\_\_\_\_

**11. MTS A.G.M.**

a. \_\_\_\_\_

**12. FINANCIAL REVIEW**

a. \_\_\_\_\_

**13. PRESIDENT RELEASE TIME**

a. \_\_\_\_\_

**14. OTHER**

a. \_\_\_\_\_

b. \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Approved by: \_\_\_\_\_

**If you require reimbursement for transportation, meals or accommodations, please use the scale below.**

**Transportation (please show details of exact route, including street address, and distance in kilometers)**

c. From(address) \_\_\_\_\_ To (address) \_\_\_\_\_

return km \_\_\_\_\_ 59 cents per km

d. From(address) \_\_\_\_\_ To (address) \_\_\_\_\_

return km \_\_\_\_\_ 59 cents per km

**Meals** -Breakfast (up to \$15.00) on (dates) \_\_\_\_\_

-Lunch (up to \$20.00) on (dates) \_\_\_\_\_

-Dinner (up to \$35.00) on (dates) \_\_\_\_\_

\*Meal costs are to include gratuities

**Accommodations**

-Hotel \_\_\_\_\_ -up to \$133.62 per day (attach detailed receipts showing payment) \_\_\_\_\_