

**HOLY SPIRIT CATHOLIC A.T.A. LOCAL NO. 5  
EXPENSE CLAIM FORM**

Cheque Payable to: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

**PLEASE FILL IN THE APPLICABLE BLANKS. SUPPORT THIS CLAIM WITH RECEIPTS AND/OR INVOICES.**

**ACCOUNT: (From handout)** \_\_\_\_\_

**COMMITTEE:** \_\_\_\_\_

**COMMITTEE CHAIR:** \_\_\_\_\_

**NATURE OF BUSINESS  
OR ACTIVITY:** \_\_\_\_\_

**DATE(S) OF ACTIVITY:** \_\_\_\_\_

**LOCATION OF ACTIVITY:** \_\_\_\_\_

**NUMBER OF MEMBERS INVOLVED  
FROM THIS LOCAL:** \_\_\_\_\_

Lethbridge to (return):

|                                |                                   |
|--------------------------------|-----------------------------------|
| Banff – 668 km = \$434.20      | Edmonton – 1006 km = \$653.90     |
| Bow Island – 222 km = \$144.30 | Picture Butte – 60 km = \$39.00   |
| Calgary – 424 km = \$275.60    | Pincher Creek – 200 km = \$130.00 |
| Coaldale – 36 km = \$23.40     | Taber – 108 km = \$70.20          |

**\*\* Receipts required \*\***

**TRAVEL**

AUTO: \_\_\_\_\_ X 65¢ = \_\_\_\_\_  
 \* AIR FARE (economy) = \_\_\_\_\_  
 \* OTHER \_\_\_\_\_ = \_\_\_\_\_

**ACCOMMODATION**

\* HOTEL (maximum \$175/night inc. GST) \_\_\_\_\_  
 \* Hotel Parking \_\_\_\_\_  
 \_\_\_\_\_ PRIVATE RESIDENCE (\$50/night) \_\_\_\_\_  
 \_\_\_\_\_ OTHER \_\_\_\_\_

**MEALS**

Breakfast \_\_\_ X \$20 = \_\_\_\_\_  
 Lunch \_\_\_ X \$30 = \_\_\_\_\_  
 Supper \_\_\_ X \$40 = \_\_\_\_\_      Total Meals: \_\_\_\_\_

**DAILY UNRECEIPTED EXPENSES**

Number of 24 hr. days \_\_\_ X \$100 = \_\_\_\_\_

**OTHER (List Below)**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TOTAL:**

**PLEASE DO NOT WRITE IN  
THIS SPACE**

Return this form to:

**Joan Rogers  
1208 Henderson Lake Blvd. S.  
Lethbridge, AB  
T1K 3B7**

**OR**

**John Templin  
Father Van Tighem School  
25 Stoney Cr  
Lethbridge, AB  
T1K – 6V5**

**By email:**

**[Atalocal5treasurer@gmail.com](mailto:Atalocal5treasurer@gmail.com)  
(please scan and include receipts)**

**Date Paid:** \_\_\_\_\_

**Amount:** \_\_\_\_\_

**Cheque #:** \_\_\_\_\_

**APPROVED BY:** \_\_\_\_\_  
(Committee Chairperson)