

Northwest Territories Teachers' Association

5018 – 48th Street • Box 2340, Yellowknife, NT X1A 2P7 Office (867) 873-8501 • Fax (867) 873-2366 • e-mail: nwtta@nwtta.nt.ca

EXPENSE CLAIM

NAME

MAILING ADDRESS

ITEM DESCRIPTION	AMOUNT
Business Travel Expenses	
(Total from opposite side of page)	
	ITEM DESCRIPTION Business Travel Expenses (Total from opposite side of page)

TOTAL EXPENSE CLAIM \$

Signature

Date Submitted

RECEIPTS MUST BE ATTACHED FOR ALL CLAIMED ITEMS



BUSINESS TRAVEL EXPENSES Rates updated January 1, 2020

Purpose of Business Travel _____

Location of Business	Travel
Looution of Dusinoss	114701

_____ Date(s) of Business Event _____

Transportation							
1.	1. Air (attach receipts)						
		to Destination:			\$		
2.	Private Automobile						
	Origin:to Destination: Official GNWT driving distance within NWT grid used to calculate reimbursement						
	Within NWT kms @ \$0.662/km			n	\$		
		Outside NWT kms @ \$0.525/km Where the use of a privately-owned vehicle is authorized for the					
	¢						
A .cco	mmodations	Convenience	_ KMS @ \$0.27/KM		\$		
ACCO		meals (attach receints)		\$		
2.	Private Accommodations	\$					
		5	5				
Meals* (Total all B/L/D/I - \$100.00)							
	<u>Date</u> <u>Breakfast</u>	Lunch	Dinner I	ncidentals			
	\$20.00	\$25.00	\$45.00	\$10.00 🗌	\$		
	\$20.00	\$25.00	\$45.00	\$10.00 🔲	\$		
	\$20.00	\$25.00	\$45.00	\$10.00 🗌	\$		
	\$20.00	\$25.00	\$45.00	\$10.00 🗌	\$		
	\$20.00 [\$25.00	\$45.00	\$10.00 🗌	\$		
	\$20.00	\$25.00	\$45.00	\$10.00 🗌	\$		
	\$20.00	\$25.00	\$45.00	\$10.00 🗌	\$		
Other Expenses (attach receipts) Taxi (details):				\$			
Other (please specify)					\$		
TOTAL BUSINESS TRAVEL EXPENSE (transfer total to opposite side of page)					\$		

* Where the actual cost of meals and services exceeds the maximum allowance, and where the reason for this excess can be justified and the expenses supported by receipts (cost of meals are not to be included on hotel bill), the employee will be reimbursed for the actual expense incurred. Where receipts cannot be provided, reimbursement will be made for the meal allowance outlined above. Do not claim for any meals that were provided by the Association.

If claiming CHILD CARE EXPENSES, receipts <u>MUST</u> be attached.