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 pea.org

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 1410 Station Tower
 13401 108th Ave
 Surrey BC V3T 5T3
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EXPENSE CLAIM FORM

Effective March 29, 2009

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NAME (PLEASE PRINT CLEARLY)	PEA CHAPTER	
MAILING ADDRESS	CITY	POSTAL CODE
EMAIL ADDRESS	PHONE NUMBER	

DATE RECEIVED	PAYMENT AUTHORITIES
	PEA FINANCIAL OFFICER VERIFICATION
	EXECUTIVE DIRECTOR AUTHORIZATION

IMPORTANT NOTE: The *purpose* for each expense claimed must be indicated. Please list all matter(s) - e.g. "Executive Meeting" - and appropriate expenses as outlined by the chart below. Use as many lines as necessary for each purpose. If more space is required, please attach and number sufficient amount of extra forms and total all expenses on final page. You may claim postage to send this form as an expense. Please refer to policy 6.7 and guidelines, available online at http://pea.org/claim_forms.

Assemble all original receipts and staple to back of form.

CLAIMED EXPENSES

PURPOSE	LOCATION	DATE OF PURPOSE	MEALS: B-\$11.50 L-\$13.25 D-\$22.25			MILEAGE (\$0.50/km)		TRANSPORTATION		LODGING AMOUNT	MISCELLANEOUS (parking, materials, postage etc.)		TOTAL
			B	L	D	DISTANCE	AMOUNT	MODE	AMOUNT		ITEM	AMOUNT	
TOTALS FROM PREVIOUS PAGE													
NOTES: (please note travel departure and return dates & times)													
		TOTALS											
										GRAND TOTAL			

SIGNATURE	DATE
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Please complete and sign this form, **attach all original receipts**, and mail to the Victoria office. Receipts are required for all claimed expenses, except for meals, mileage, and postage.