

Expense Claim – OSSTF District 28 (Renfrew)

Please complete expense claim in	in full.
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district 28 0 s s T F							For Treasurer use only:			
Name (print):							Date paid:			
School:							Cheque #:			
Home Civic Address:							Amount:			
Mailing Address(if different):										
Claimant Signature:							Authorization confirmed:			
Committee (DC,					Other ³					
Date	CBC, CPAC, Office Managers etc.)	PAC, Office Location km Solo eligible passenge		passenger)	Specify what (Meals, Office, Child care etc.)		Amount			
	managere etc.)		(rotarri)	MIII X VIOT	# of pass.	Amount (\$)	Omia da	0 010.)		
			Totals →							
u r. v						Grand Total →				
¹ Mileage is based on travel from your school to OSSTF meetings and return to your home.										
² If claiming carpooling, list passengers here:										

³Itemized Receipts must be submitted for all claims other than mileage.