

GL: _____

Taxes: _____

Booked: _____

Synod Cheque # _____

Church Society Cheque # _____

office use only

Diocese of Quebec Travel reimbursement request

Meeting:

- **D.E.C.**
- **Synod Planning Committee**
- **Archbishop's Council**
- **Quebec Diocesan Gazette Board**
- **Church Society Central Board**
- **Church Society Standing Committee**
- **Other** _____

Dates of meeting _____

Name: _____

Address: _____

My expenses to attend the above meeting were:

Air/Train fare \$ _____

Car Use @ .38 cents@km.: _____ Km \$ _____

Meals (*Maximum: breakfast-\$15; lunch- \$15; supper-\$25 or a maximum per diem rate of \$55, rather than claiming individual meals*). \$ _____

Hotel* & Lodging@ \$20.00 per night \$ _____

Airport taxes, parking, taxi, bus, etc. \$ _____

TOTAL EXPENSES \$ _____

Signature: _____

ALL RECEIPTS MUST BE ATTACHED
Diocesan policy regarding travel reimbursement on reverse side

* Maximum \$100. or in the case where the event is using a specific hotel the amount cannot exceed the rate the diocese would pay at the hotel where it is placing participants