



The Anglican Diocese of Calgary

8336 - 34 Avenue NW, Calgary, AB T3B 1R2

Tel: 587 320 1346 **Fax:** 403 243 2182

email: bgogol@calgary.anglican.ca

EXPENSE REIMBURSEMENT CLAIM

Name: _____

Address: _____

Expenses Incurred From: _____ **To:** _____

Office Use

Approved by: _____

Authorized by: _____ Net to be Paid: \$ _____

Cheque Number _____ Date Paid: _____

Submitted by:

Approved by:

Authorized by:

Net to be Paid: \$

Cheque Number

Date Paid:

Total Claim: \$

Instructions for Completing the Expense Reimbursement Claim

In order for you to claim reimbursement for expenses, we ask that you complete this form and submit it to the Diocesan Office **including all receipts**.

Here are a few directions to help you in filling out the form:

- Place the Name and Address of the person being reimbursed;
- Fill in the Dates these expenses were incurred;
- Complete chart of expenses and attach receipts for each entry;
 - **Receipts** must itemize what was purchased
 - **Kilometres** are reimbursed at \$0.62/km
 - **Meals** expensed should only include food and not alcohol
- Sign Submitted By as the person submitting this Expense Claim;
- Complete Total Claim including all expenses to be reimbursed;
- Mail, fax, deliver or email a scanned version (including receipts) to the Diocesan Office.

If you have any questions about completing the Expense Reimbursement Claim, please contact:

Barb Gogol

Telephone: 587 320 1346 or

888 999 1551, Ext. 106

email: bgogol@calgary.anglican.ca

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