



British Columbia Target Sports Association

PO Box 496, Kamloops, B.C. V2C 5L2

Expense Claim

Claimants Name: _____ **Phone:** _____

Mailing Address: _____

Dates Covered: _____ **Postal Code:** _____

Transportation, Accommodation & Miscellaneous Expenses

Travel To: _____ **From:** _____

		Description			Amount
Date:	Accommodation				
	Ferry / Air Fare				
	Meals	Br <input type="checkbox"/>	Lu <input type="checkbox"/>	Di <input type="checkbox"/>	
	Receipted Fuel				
	Miscellaneous				
Date:	Accommodation				
	Ferry / Air Fare				
	Meals	Br <input type="checkbox"/>	Lu <input type="checkbox"/>	Di <input type="checkbox"/>	
	Receipted Fuel				
	Miscellaneous				
Date:	Accommodation				
	Ferry / Air Fare				
	Meals	Br <input type="checkbox"/>	Lu <input type="checkbox"/>	Di <input type="checkbox"/>	
	Receipted Fuel				
	Miscellaneous				
Date:	Accommodation				
	Ferry / Air Fare				
	Meals	Br <input type="checkbox"/>	Lu <input type="checkbox"/>	Di <input type="checkbox"/>	
	Receipted Fuel				
	Miscellaneous				

Note: Funding is not provided for ground travel of less than 100 Km round trip
 Note: Receipted Fuel claim shall not exceed cost of available regular economy airfare
 Note: Accommodation must be at 'reasonable' rates
 Note: Coaching Honorariums - Level I - \$40.00 / Level II - \$60.00 / Level III - \$80.00
 Note: Meal Costs - to a maximum of \$45.00 per day - B 10 / L 15 / D 20

Other Expenses: (with receipts)

Reason For Expenses: _____ **Total Claim**

I certify this is a true and correct statement of my claim for BCTSA business on behalf of the BCTSA, or for events which are financially supported by the BCTSA and that I have not received nor claimed compensation from any other Agency for these expenses

Signature _____ Date _____

BCTSA Use Only

Cheque # _____ Date: _____

Account _____ Amount _____

Total _____

Approved: _____

Date: _____

Title: _____

Please attach receipts in support of each expense claim item