989	UNIVERSITY OF
39	TORONTO
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EXPENSE REPORT / ACCOUNTABLE ADVANCE SETTLEMENT Financial Services Dept. (revised May-2013) TO BE COMPLETED BY CLAIMANT Accounting Information - TO BE COMPLETED BY BUSINESS OFFICER Indicate reimbursement currency: EMPLOYEE FIELD TRIP Business Area: Purpose: Select purpose. Enter For expense reimbursements in a CAD UofT code, below, to complete G/L Company Code: EMPLOYEE CONFERENCE currency other than CAD, **DO NOT** convert USD account. If G/L account is not STUDENT FIELD TRIP Document Number:

Charlo		expenses to CAD value. NOTE: Original receipts are required.				listed, enter appropri	ate G/L	3 STUDENT CONFERENCE		Document Number.		
TO BE	COMPLETED BY CLAIMANT	NOTE: Original r	eceipts are required.			account on "OTHER"	line.	4 VISITO	R			
Personnel Number	Period of Travel	EXPEN	ISE CATEGORIES	AMOUNT		G/L ACCOUNT NUMBER	TAX CODE	COST	INTERNAL OR ORDER	FUNDS CENTER	FUND	COMMITMENT
Last Name	Initial	AIRFARE:	Travel within Canada		11	8 4 0 1 0	ER					
			Travel to USA from Ontario		11	8 4 0 1 0	EE					
Address			All other Airfare		11	8 4 0 1 0	E0					
		ACCOMMODATION:	ON, NF, NB (13%HST)		11	8 4 0 2 0	ER					
			PEI (14%HST)] [8 4 0 2 0	EP					
Location and Descripti	ion		NS (15%HST)] [8 4 0 2 0	EN					
			All other provinces / territories] [8 4 0 2 0	EE					
			USA / International			8 4 0 2 0	E0					
		ALLOWANCE:	Per Diem: Canada			8 4 0 3 0	EA					
			Per Diem: USA / International		▋▐	8 4 0 3 0	E0					
			KMS X 47 cents/km			8 4 0 4 0	EA					
Department Contact		RAIL/BUS:	Travel within Canada		▋▐	8 4 0 5 0	ER					
			Travel outside Canada			8 4 0 5 0	E0					
Department		CAR RENTAL:	ON, NF, NB (13%HST)		▋▐	8 4 0 6 0	ER					
			PEI (14%HST)		┚▮	8 4 0 6 0	EP					
Telephone Fax			NS (15%HST)		┚┃	8 4 0 6 0	EN					
			All other provinces / territories		╛┫	8 4 0 6 0	EE					
Date Prepared			USA / International		╛┫	8 4 0 6 0	E0					
		MEALS:	ON, NF, NB (13%HST)		╛┫	8 4 0 7 0	ER					
I have read the Univer	rsity's regulation on reimbursements		PEI (14%HST)		╛┫	8 4 0 7 0	EP					
	irm that I am in compliance.		NS (15%HST)		╛┫	8 4 0 7 0	EN					
Signature of Claimant			All other provinces / territories		╛┫	8 4 0 7 0	EE					
			USA / International		╛┫	8 4 0 7 0	E0					
		TAXI:	ON, NF, NB (13%HST)		╛┫	8 4 5 0 0 0	ER					
Print Name	Title		PEI (14%HST)		↓ I	8 4 5 0 0 0	EP					
			NS (15%HST)		╛┫	8 4 5 0 0 0	EN					
			All other provinces / territories		╛┫	8 4 5 0 0 0	EE					
Authorized Approval			USA / International		╛┫	8 4 5 0 0 0	E0					
		OTHER:			41							
					↓ ┃							
					↓ ▮							
Print Name	Title				↓ 							
				00.00						1		
			TOTAL EXPENSES		NO	IES:						
For Accountable Advance Settlements:			LESS: ACCOUNTABLE ADVANCE		\vdash							
Financial Services (Original copy) Originating Department (Photocopy)			REIMBURSEMENT REQUIRED		\vdash							
Originating Depar	птепт (Рпотосору)		OR REPAYMENT									