



Expense Claim 2018

Archery Alberta - ATAA

c/o 2718 - 20 Avenue South
Lethbridge, AB, T1K 1G7

email: treasurer@archeryalberta.ca

Name: _____

Period of Claim: _____

Address: _____

Judge, Archer,

Executive: _____

City : _____

Postal Code: _____

Date	Description (Coaching clinic, Event etc.) Includes Meals/Accommodation	Sub-Total	Total

Travel

Date	Mileage	Rate	Km's	Total

Rates

Hotels
Mileage
Per Diem

AA Executive	Judges	AA Members	Total
Reasonable	Reasonable		
\$0.40/km	\$0.40/km	\$0.40/km	
	\$30/day - meals		

Prepared by: _____

Print Name

Signature

Office Use only:

Cheque# _____ Account: _____

Issued by: _____ Date: _____