



Archery Alberta Expense Claim

Submit via email to:
vpfinance@archeryalberta.ca

Archery Alberta

Name: _____

Address: _____

City: _____

Postal Code: _____

Email Address: _____

Period of Claim: _____

Judge / Executive: _____

Event

Date	Description (coaching clinic, etc.) Includes meals/accommodation	Amount
Sub total		

Travel

Date	Mileage	Rate	Km's	Amount
Sub total				

Rates	AA Executive	Judges
Hotels	Reasonable	Reasonable
Mileage	\$.45km/\$.90 tow	\$.45km
Per Diem		\$50/day-meals

TOTAL	
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Prepared by: _____

Print name

Signature

Office Use	
Cheque#	Account:
Issued By:	Date: