

EXPENSE CLAIM 2024-25

Date Submitted: _____ Meeting attended: _____

Cheque payable to: _____ Signature: _____

Address/City/PC: _____

Or e-transfer to: _____

MEALS: In province and out of province

DATES:						TOTAL
Breakfast \$20.00						
Lunch \$20.00						
Dinner \$30.00						

TRANSPORTATION:

DATES:						TOTAL
*Air - Rail - Bus						
Personal vehicle - Km x \$0.5496 OR North of 54 th \$0.5918	km: <input style="width: 40px;" type="text"/>	km: <input style="width: 40px;" type="text"/>	km: <input style="width: 40px;" type="text"/>	km: <input style="width: 40px;" type="text"/>		
*Taxi						
*Parking						

ACCOMMODATION: (If you are making your own arrangements)

DATES:					TOTAL
*Hotel (\$125 per night or reasonable charges supported by receipts)					
Private Residence (\$35.00 per night)					

***OTHER:**

DATES:					TOTAL

TOTAL: _____

* **RECEIPTS WILL BE REQUIRED** except for claims for automobile travel, parking expenses where no receipts are available or for meal per diems. (2024-25 rates based on SaskCulture)

SCAA USE ONLY

 Authorized signature

 Date paid

 Cheque/e-transfer confirmation #