Summer Conference Expense Claim

| | Name: |
|--------------------------------------|--|
| (a) | Address: |
| PEMBINA HILLS LOCAL 22 | S.I.N(If claiming an honorarium for the first time.) |
| Summer Conference Program/Da | ntes |
| Excluding mile | eage, receipts are required for all expenses. |
| Accommodation | |
| (Accommodation reimburseme | ent is equal to that of single occupancy at . Please contact the treasurer if you have |
| Transportation | |
| \$0.67 per km x total distant | nce \$ |
| Parking | \$ |
| Subsistence | |
| If residing at the Banff Centre, up | o to \$210.00 |
| If residing off-site, up to \$300.00 | \$ |
| Other | |
| Park Entry Fee | \$ |
| Clothing/Other (you may purch | hase an item for sale at the conference) \$ |
| Honoraria (\$75.00 x full- | days, \$37.50 x half-days) \$ |
| Discretionary (candy, gum, et | c no receipts required) \$ 30.00 |
| Other – Specify | \$ |
| | Total Claim |
| Claimant Signature: | Date: |