



EXPENSE REPORT / ACCOUNTABLE ADVANCE SETTLEMENT Financial Services Dept. (revised May 1, 2018)

TO BE COMPLETED BY CLAIMANT		Accounting Information - TO BE COMPLETED BY BUSINESS OFFICER																			
<p>Indicate reimbursement currency: For expense reimbursements in a currency other than <input type="checkbox"/> CAD <input type="checkbox"/> USD <input type="checkbox"/> Other</p> <p>CAD, DO NOT convert expenses to CAD value. NOTE: Original receipts are required.</p>		<p>Claim Type: Select claim type. Enter code, below, to complete G/L account. If G/L account is not listed, enter appropriate G/L account on "OTHER" line.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:20px; text-align: center;">0</td><td>EMPLOYEE FIELD TRIP</td></tr> <tr><td style="text-align: center;">1</td><td>EMPLOYEE CONFERENCE</td></tr> <tr><td style="text-align: center;">2</td><td>STUDENT FIELD TRIP</td></tr> <tr><td style="text-align: center;">3</td><td>STUDENT CONFERENCE</td></tr> <tr><td style="text-align: center;">4</td><td>VISITOR</td></tr> </table>				0	EMPLOYEE FIELD TRIP	1	EMPLOYEE CONFERENCE	2	STUDENT FIELD TRIP	3	STUDENT CONFERENCE	4	VISITOR	<p>Business Area:</p> <p>Company Code: UofT</p> <p>Document Number:</p>					
0	EMPLOYEE FIELD TRIP																				
1	EMPLOYEE CONFERENCE																				
2	STUDENT FIELD TRIP																				
3	STUDENT CONFERENCE																				
4	VISITOR																				
Personnel Number	Period of Travel	EXPENSE CATEGORIES		AMOUNT	G/L ACCOUNT NUMBER	TAX CODE	COST CENTER	OR	INTERNAL ORDER	FUNDS CENTER	FUND	COMMITMENT ITEM									
<p>Last Name Initial</p> <p>Address</p> <p>Purpose and Relevance to University Business</p> <p>Department Contact</p> <p>Department</p> <p>Telephone Fax</p> <p>Date Prepared</p> <p>Signature of Claimant</p> <p>Print Name Title</p> <p>Signature of Authorized Approver</p> <p>Print Name Title</p>		<p>AIRFARE: Attach proof of payment & proof of air travel (*)</p> <p>Travel within Canada</p> <p>Travel to USA from Ontario</p> <p>All other Airfare</p> <p>ACCOMMODATION:</p> <p>ON (13%HST)</p> <p>PEI, NS, NF, NB (15%HST)</p> <p>All other provinces / territories</p> <p>USA / International</p> <p>ALLOWANCE:</p> <p>Per Diem: Canada</p> <p>Per Diem: USA / International</p> <p>KMS X 54 cents/km</p> <p>RAIL/BUS:</p> <p>Travel within Canada</p> <p>Travel outside Canada</p> <p>PUBLIC TRANSIT</p> <p>Travel within or outside Canada</p> <p>CAR RENTAL: Attach detailed receipt & contract (*)</p> <p>ON (13%HST)</p> <p>PEI, NS, NF, NB (15%HST)</p> <p>All other provinces / territories</p> <p>USA / International</p> <p>MEALS: Attach detailed itemized receipts (*)</p> <p>ON (13%HST)</p> <p>PEI, NS, NF, NB (15%HST)</p> <p>All other provinces / territories</p> <p>USA / International</p> <p>TAXI:</p> <p>ON (13%HST)</p> <p>PEI, NS, NF, NB (15%HST)</p> <p>All other provinces / territories</p> <p>USA / International</p> <p>OTHER:</p>		<p>TOTAL EXPENSES</p> <p>LESS: ACCOUNTABLE ADVANCE</p> <p>REIMBURSEMENT REQUIRED</p> <p>OR REPAYMENT</p>	<p>NOTES:</p>																
<p>Authorized Approver Declaration: I certify the expenses claimed were reasonable & required for University business & (if applicable) are relevant to the research being funded.</p> <p>Signature of Authorized Approver</p> <p>Print Name Title</p> <p>James Allen Director, CPAMP</p> <p>For AA Settlements: Financial Services (original copy) Originating department (photocopy)</p>																					

(*) Refer to expense reimbursement checklist @ [Expense Reimbursement Checklist - Template - Financial Services](#) and the Guide to Financial Management @ [Travel and Other Reimbursable Expenses - Policies and Guidelines - Financial Services](#)