

# Travel Advance Request / Expense Request

## FINANCE DEPARTMENT



Name:	Department:	Employee Number:
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Destination* :	Dates of Travel:
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Purpose:
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Cheque required on or before (please allow 10 working days for processing) :
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EXPENSES**	ADVANCE	ACTUAL EXPENSE
Claimants own vehicle:                      kilometres @                      /km		
Taxi / Car Rental / Airport Limo / Bus / Ferry / Departure Fee		
Airfare:                      Time of Departure:                      Time of Home Arrival:		
Accommodation:                      Number of Nights:		
Registration Fees:		
Other Expenses (please specify):		

MEAL ALLOWANCE					
If you choose to travel by car instead of by plane (where available) claim meals as though you were flying.					
DATE	BREAKFAST	LUNCH	DINNER	TOTAL	ACTUAL EXPENSE
				\$	\$

Total Advance Requested:	Total Actual Expense:
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Balance Due to Traveller (Expenses minus advance) :	Balance Due to College (Advance minus expenses) :
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_____	_____	_____
EMPLOYEE NAME	EMPLOYEE SIGNATURE	DATE

_____	_____	_____
APPROVED BY (PRINT NAME)	APPROVAL SIGNATURE	DATE

\*If OUT OF PROVINCE travel must be APPROVED BY THE PRESIDENT or VICE PRESIDENT prior to submitting report to Finance. \*\* Traveller must complete actual expenses and return ORIGINAL RECEIPTS with report within 5 days after trip for final settlements.

250 365 1222 Finance Department  
1 888 953 1133 selkirk.ca  
*Within Reach. Beyond Imagination.*

# Travel Advance Request / Expense Request

**FINANCE  
DEPARTMENT**



**OUT OF PROVINCE APPROVAL**

\_\_\_\_\_  
PRESIDENT NAME

\_\_\_\_\_  
PRESIDENT/VICE PRESIDENT SIGNATURE

\_\_\_\_\_  
DATE

**APPROVAL IF ACTUAL EXPENSES EXCEED ESTIMATE BY MORE THAN 10%**

\_\_\_\_\_  
APPROVED BY (PRINT NAME)

\_\_\_\_\_  
APPROVAL SIGNATURE

\_\_\_\_\_  
DATE

**ACCOUNT CODES**

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\_\_\_\_\_  
AMOUNT

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\_\_\_\_\_  
AMOUNT

\_\_\_\_\_  
TAX AMOUNT

**ADVANCE CLEARED**

\_\_\_\_\_  
AMOUNT

PAID

RECEIVED

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
DATE