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|  | **Travel Expense Form** |

|  |  |  |  |
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| PURPOSE of Travel: |  | Board Meeting: |  |
|  |  | AGM: Specify Club |  |
|  |  | SAGM: Specify Club |  |
|  |  | Committee Meeting: (specify) |  |
|  |  | Youth: (refer to guidelines) |  |
|  |  | Other Travel: (specify) |  |
|  |
| PAYEE Name: |  |  |
| Address: |  |  |
| City: |  |  | Postal Code: |  |
| Phone Number: |  |  | Email: |  |
|  |
| DETAILS: |  |  |  |  | AMOUNT |
| Km Travelled: |  |  | X $ .50 | $ |
| Ferry: |  |  |  | $ |
| Ferry: |  |  |  | $ |
| Meals: |  |  |  | $ |
| Meals: |  |  |  | $ |
| Other: (specify) |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  |  | $ |
|  |  |  | TOTAL PAYMENT | $ |
|  |  |  |  |  |  |
| FOR OFFICE USE: |  |  |  |  |
| Date Approved: |  |  |  |  |
| Approved By: |  |  |  |  |
| Signed: |  |  |  |  |
|  |  |  |  |  |
| Cheque #: |  |  | Program #: |  |
| Cheque Date: |  |  | Account #: |  |

Submit to: Bowls BC, c/o 293 West Kings Road, North Vancouver, BC V7N 2M1