

## Ontario Council on Articulation and Transfer EXPENSE REPORT

NAME:									
ADDRESS:							Fro		
							To:		
Date	Location and Particulars	km Amoun @ 46.56 per km		Hotel	Meals (Personal)	Meals (Business)	Incidentals Tips, Parking	Other	Daily Total
	TOTAL – All Columns								
Receipts re	equired for all expenses ex	ccept kilometres o	Iriven			Total amou	unt due to clain	nant:	
hereby cer	tify that the above is a corre	ect statement of my  DATE: Y	expenses while R. MO. DAY	engaged or	ONCAT busines ONCAT Aut	ss. horization	DA	TE: YR. MC	D. DAY