

TRAVEL EXPENSE SUMMARY AND AUTHORIZATION
RÉSUMÉ DE FRAIS DE VOYAGE ET AUTORISATION

DEPT/ORG/PROG MIN/ORG/PROG	ACCOUNT COMPTE	TASK TACHE	OPTION	ACTIVITY ACTIVITÉ	AMOUNT MONTANT

DEPARTMENT/MINISTÈRE: **E.I.E. WRITERS IN THE SCHOOLS**

Name/Nom: Your Name:
Your Address:
Date or month/date ou mois: Date of Visit:

Details: Place visited/reason Renseignements- endroits visit raison	KM	Honorarium Honoraire &	Lodging hébergement	Meals/Repas **	HST TVN	Total

*Honorarium/Honoraire: In person visit, full day : \$300.00 Virtual visit : \$150 (one hour)

**Meals/Repas: Breakfast/déjeuner: \$10.25; Lunch/dîner: \$14.35; Dinner/Souper: \$26.60

Administrator only
Total kms @ .50 = \$
Total claim : \$

Send completed form to: Ginny Hill (WiSP) 184 Hennessey Road, Moncton, NB, E1A 6B3
ginnyh184@gmail.com

Employee signature
Your signature declares that this is a true and accurate
accounting of your expense incurred as a WiSP participant.

Supervisor Signature