

BURKS FALLS ARMOUR AND RYERSON UNION PUBLIC LIBRARY

EXPENSE REIMBURSEMENT FORM

[\(Policy: Travel Expenses D-2\)](#)

Expense Report of:

Address:

Meeting Information:

Signature: _____ Date: _____

Expense Description	Amount	GST	Total Amount

Please submit original receipts

***Note:** Mileage Rate: \$0.47 per kilometre (09/2015)

Meals: Up to \$45.00 per day, supported by original receipts. (09/2015)