

TRAVEL EXPENSE FORM

Name (Ple	ease Print)		I						
,	,	Mailir	ng Address						
Phone									
Purpose of	f Travel	Tips/	mission D Gratuities: 1 tel, up to \$10	0% on a tax	ki fare; \$2-	\$5 for house	last day of t keeping for up t or a porter	the event o two nights in	_
	Particulars Destination, time of departure, return, etc. and mode of travel. Explain General Expense items.	or				Accom.	Travel & Other	Total Amount	
	Please attach receipts	N. Ont.41¢/	B 10.00	L 12.50	D 22.50				
Month Day									
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	Totals								
Total km			Sub Total :						
Cost/ km			├						
Total Km Cost			Total Claim Amount :						
Signature of Claimant			Date Approved (yyyy/mm/dd) OHTN Manager Name (Please print)					Cost Centre:	
Date (yyyy/mm/dd)			OHTN Manager Signature						



OHTN Expense Form Instructions

This travel information applies to members of the Board of Directors, OHTN staff and any other person who is required to submit expense claims for trips made on official business for the OHTN.

1. Travel

Air: economy travel
Rail: coach class
Bus: regular fare
Private car: mileage

Note: Please attach your ticket receipt & boarding pass (if applicable) to this claim.

<u>Taxi & Ride-hailing services</u>: Original receipts are required for fares as well as for parking charges.

Note: Taxi chits can be obtained from the OHTN. Please be sure to put your name on the taxi chit.

<u>Parking:</u> Reimbursement is provided for necessary and reasonable parking expenses with original receipts.

TTC: Original proof-of-payment (POP) are required.

2. Accommodation

Moderately priced hotels are to be used and reimbursement is provided for the room only – items such as laundry service, pay-per-view, mini-bar items will not be reimbursed.

If desired, a member may make accommodation arrangements (e.g. with a relative or friend) and claim \$30.00 per night for such accommodation. Instead of a receipt, you must submit a written explanation describing the purpose of the trip, identifying the host and the number of days you stayed.

3. Daily Meals

Meal expenses will be reimbursed at the established meal allowance rates, regardless of the actual meal costs. Taxes and gratuities are included in the meal allowance rates. Receipts are not required to be submitted or retained. Meals must be purchased in order to be able to submit a claim for reimbursement. Alcohol cannot be claimed and will not be reimbursed.

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4. Other

Please identify what the expense is and attach an original receipt to this claim.

<u>Dependent care:</u> Prior approval for reimbursement of dependent care expenses is required, as well as a documented explanation of the circumstances.

- Max. \$75/day/dependent, if you have a caregiver's receipt
- Max. \$35/day/dependent, if you provide a documented explanation

5. Tips/Gratuities

You may be reimbursed for reasonable gratuities for porter, hotel room services, and taxis. Keep a record of gratuities paid.

Examples of reasonable amounts for gratuities include:

- 10% on a taxi fare
- \$2-\$5 for housekeeping for up to two nights in a hotel, up to \$10 for a longer stay
- \$2-\$5 per bag for a porter

6. General

For travel outside Canada, all expenses will be reimbursed in Canadian funds for the equivalent of the currency for the amount claimed. The maximum meal allowance will be based on federal guidelines.

If you are unsure, please send us the expense claim form with a short note.

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