



**FEDERATION OF POST SECONDARY EDUCATORS**

400 - 550 West 6th Avenue, Vancouver, BC V5Z 1A1  
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**EXPENSE CLAIM**

Name: \_\_\_\_\_

Faculty Association: \_\_\_\_\_

Remittance Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

**Meeting:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Attach ORIGINAL receipts for all items except meals. If necessary, list details on attached sheet.  
To be reimbursed, this form must be received by FPSE no later than 45 days after the event.

**PLEASE NOTE POLICY PRINTED ON BACK OF THIS FORM.**

**Travel:**

Airfare ..... \$ \_\_\_\_\_

Ferry ..... \$ \_\_\_\_\_

Train or Bus ..... \$ \_\_\_\_\_

Taxi ..... \$ \_\_\_\_\_

Auto ( \_\_\_\_\_ km at 50¢ per kilometre) ..... \$ \_\_\_\_\_

Car Rental..... \$ \_\_\_\_\_

**Accommodation:**

Hotel \_\_\_\_\_ \$ \_\_\_\_\_

paid       charged to FPSE

OR allowance for private accommodation (\$50.00) ..... \$ \_\_\_\_\_

**Incidentals & Meals:** Please check applicable boxes only.

I <input type="checkbox"/>	B <input type="checkbox"/>	L <input type="checkbox"/>	D <input type="checkbox"/>	_____
I <input type="checkbox"/>	B <input type="checkbox"/>	L <input type="checkbox"/>	D <input type="checkbox"/>	_____
I <input type="checkbox"/>	B <input type="checkbox"/>	L <input type="checkbox"/>	D <input type="checkbox"/>	_____

**Date:**

\$ _____	<i>(Do not write in this space.)</i>
\$ _____	
\$ _____	
\$ _____	

**Childcare:** (Attach receipt showing time worked)

\_\_\_\_\_ hours at \$10.00 per hour ..... \$ \_\_\_\_\_

**Miscellaneous:** e.g., parking (*please specify*) ..... \$ \_\_\_\_\_

\_\_\_\_\_  
*Signature of Claimant*

**TOTAL CLAIM:** \$ \_\_\_\_\_  
*Do not write in this space*

<b>For FPSE Office Use:</b> Approved _____	Date _____
Cheque No. _____	Amount _____

## POLICY ON TRAVEL EXPENSE CLAIMS

This policy applies to all claims to FPSE for travel expenses pertaining to meetings or other FPSE business.

### **GENERAL:**

Individuals seeking reimbursement for expenses incurred while travelling on FPSE business must submit an Expense Claim Form and the necessary receipts.

- A separate Expense Claim Form is normally submitted for each distinct meeting/event attended or trip taken on FPSE business.
- Expense Claim Forms must be submitted no later than 45 calendar days after the event for which the expenses are being claimed.
- Original receipts (or photocopies of them) are submitted with the Expense Claim Form for expenses which require such documentation.

Expenses in addition to those detailed below are not reimbursed unless they are authorized in advance by the Secretary-Treasurer.

FPSE has a 'union preference' policy.

### **TRANSPORTATION:**

The most direct and efficient mode of transportation is used unless otherwise approved in advance by the Secretary-Treasurer.

#### Airfare

All airfare must be booked through WE Travel whenever possible. Airplane tickets are booked in advance to take advantage of any special airfares which may be available.

#### Ferry, Train, Skytrain or Bus: (Receipts required)

Actual costs are reimbursed.

#### Taxi: (Receipts required)

Actual costs, including tips, are reimbursed.

#### Auto: (No receipts required)

- Individuals are reimbursed for the use of personal vehicles at the BC government rate.
- Individuals choosing to travel by personal or rental vehicle when air transportation is available are reimbursed at the above rate only up to the cost of the lowest web airfare available. Any additional accommodation or meal expenses incurred as a result of choosing to travel by personal vehicle are the responsibility of the individual.
- If an individual uses his/her personal vehicle on FPSE business more than four times a month or more than 1,600 kilometres per year, the cost of additional business-use insurance will be reimbursed by FPSE, if approved in advance by the Secretary-Treasurer.

#### Car Rental: (Receipts required)

The actual cost of car rentals at the site of the meeting is reimbursed up to \$60.00 per meeting. Additional car rental expenses may be authorized by the Secretary-Treasurer prior to the meeting.

### **ACCOMMODATION:** (Receipts required)

Commercial overnight accommodation is reimbursed at the single room rate for those nights reasonably necessary to attend meetings/events or carry out FPSE business. The most reasonable accommodation in the immediate vicinity of the individual's meeting or business is used. For all meetings held at the FPSE office or conferences at a hotel, accommodation is booked through the FPSE office for the designated hotel with which FPSE has negotiated special rates.

Substitute hotels are normally not allowed unless previous arrangements have been made, and will be reimbursed only up to the cost of the FPSE designated hotel.

An allowance of \$50.00 per night is paid when private accommodation is arranged by an individual.

### **MEALS:** (No receipts required)

Breakfast.....	\$12.00
Lunch .....	\$17.00
Dinner.....	\$27.00

The meal allowance is not applicable when meals are provided by FPSE at meetings or other events.

**INCIDENTALS:** Individuals are reimbursed \$10/day for incidental expenses, which covers items such as laundry, dry cleaning, gratuities, daily paper, etc.

### **CHILDCARE:** (Receipts required)

Receipted child care expenses will be covered for members on all FPSE business.

### **MISCELLANEOUS:** (Receipts required)

Telephone: Actual cost of calls on FPSE-related business is reimbursed.

Hospitality: Hospitality expenses are not normally reimbursed, unless authorized by the Secretary-Treasurer.

Other expenses: Actual cost of other normal minor expenses, e.g., parking, is reimbursed. Internet access charges are reimbursed for members of Presidents' Council only. Additional expenses are not reimbursed unless authorized in advance by the Secretary-Treasurer. Additional or unforeseen expenses will not be unreasonably denied.