

**The Anglican Church of Canada
General Synod, Winnipeg, Manitoba, June 19 – 25, 2007**

***Please read the Travel Expense Policy before completing this form.
Some limitations apply.***

I certify that I am a member or an authorized partner/guest of General Synod entitled to reimbursement, and that I have incurred the following travel expenses:

Note: Receipts are required for ALL expenses other than mileage allowance.

| | <u>TOTAL AMOUNT</u> |
|---|--------------------------------|
| Rail fare [Section 1] | \$ _____ |
| Bus fare [Section 1] | \$ _____ |
| By car _____ kms @ 40¢ km [Sections 2, 3, 4] | \$ _____ |
| Meals en route [maximum \$35 day] | \$ _____ |
| Hotel en route [economy, please] | \$ _____ |
| Airport Tax/ Bus / Taxi / Parking, etc. | \$ _____ |
| Day care above normal costs @ \$5 /hour | \$ _____ |
| TOTAL EXPENSES SUBMITTED FOR REIMBURSEMENT: | \$ _____ |

Name: _____ **[please print]**

Address: _____

Member of General Synod from the Diocese of: _____

Partner or authorized guest. Specify: _____

Signature: _____ Date: _____

Make cheque payable to me - OR - Make cheque payable to the Diocese

Please complete this form, **attach the required receipts** and deposit it in the designated box, located at the General Synod Information Desk in the Plenary Hall. *Thank you.*

Should further information/clarification be required, contact Peter Blachford, General Synod Treasurer.

For office use only:

Approved: _____ **Date:** _____ **Ck. #** _____