

# TRAVEL EXPENSE CLAIM FORM NON-EMPLOYEE

An expense form must be completed for EACH event.
Claims must be received by FPSE no later than <u>45 days</u> after the event.

PLEASE TYPE OR PRINT LEGIBLY

NAME OF CLAIMANT OR ORGANIZATION								EMAIL ADDRESS					NUMBER	2		FACULTY ASSOCIATION/ LOCAL			
MAILING ADDRESS – must include street, city/town, province and postal code							PURPOSE OF TRAVEL / EVENT					EVENT DATE YYYY MM DD				COMMITTEE (IF APPLICABLE)			
							. CLAIMS ex se Claim Po												
					RAVEL COS	<del>-</del>			АССОМ	MODATION OSTS	INCIDENTALS & MEALS  TOTAL PER DIEM MUST NOT  EXCEED \$69/DAY				DEPENDEN CARE UP TO \$30	М	IISC OSTS		
DATE OF TRAVEL	PLACES TRAVELLED FROM	MILEAGE		AIR			PUBLIC	CAR		PRIVATE ACCOM	ı	В	L	D	PER HR RECEIPT	PLE	EASE ECIFY DE OF	TOTAL DAILY COSTS	FPSE USE ONLY
		# OF KMS	\$0.63 PER KM	FARE	FERRY	TAXI	TRANSIT	RENTAL	HOTEL	\$65 PER NIGHT	\$15	\$15	\$23	\$36	MUST SHOW HOURS WORKED	w co	OST		
		-																	
		-																	
Expense cla	ims without rece	eipts (except	em claims ex	ceeding \$6	ding \$69/day will be adjusted.						TOTAL VERIFIED CLAIM \$								
	t the above-listo uthorize FPSE to		y with FPSE SIGNATURE OF CLAIMANT							DATE SIGNED YYYY MM DD									
utilizes PLO	POSIT VIA PLOO POTO, a secure p n email from PL	olatform to	electronica	ılly transfei	funds to	Claimant	s. If you are i	not yet set	up for dire	ct deposit v	ia PLO	ΣΤΟ, γοι	ı will hav	ve to ma	anually ente	r your bai	nk acco		
	rocessing, you r : at jbuan@fpse.															sit forms v	via ema	il to the FF	SE Staff
I do <u>NOT</u> wish to receive payment via direct deposit. I understand that process longer when receiving payment via mailed cheque.								ing times take SIGNATURE OF CLAIMANT				DATE SI				NED YYYY MM DD			
FOR OFFICE		<b></b>		D00755	_									DATE DEPOSITED TO CLAIMANT'S ACCOUNT					
AUTHORIZED AND APPROVED POSTED DATE						TOTAL AMOUNT APPROVED								DATE DEF	OSITED T	O CLAI	MANT'S A	COUNT	

### **POLICY ON TRAVEL EXPENSE CLAIMS**

The following policies apply to all FPSE-related travel expense claims.

For full information regarding claims, please review the FPSE Policy and Procedures Manual found in our website (www.fpse.ca).

### **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 required 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 must be 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.

<u>Airfare:</u> All airfares must be booked through WE Travel whenever possible. Airplane tickets are booked in advance to take advantage of any special airfare that may be available.

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

Actual costs are reimbursed.

#### Taxi: (Receipts required):

Actual costs, including tips, are reimbursed. Ride hailing services such as Uber and Lyft will NOT be reimbursed.

### Auto: (No receipts required)

- Individuals are reimbursed for the use of personal vehicles at the BC government rate. The distance allowance does not apply when using
  car rentals.
- Individuals choosing to travel by personal vehicle when air transportation is available are reimbursed at the current mileage 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 their personal vehicle on FPSE business more than four times a month or more than 1,600 kilometers per year, the cost of additional business-use insurance will be reimbursed by FPSE, if approved in advance by the Secretary-Treasurer.

# Car Rental: (Prior approval and receipts required)

Car rental expenses require authorization from the Secretary-Treasurer prior to the meeting.

# **ACCOMMODATION: (Receipts required)**

If not booked by FPSE, commercial overnight accommodation will be 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 \$65.00 per night is paid when private accommodation is arranged by an individual.

# MEALS & INCIDENTALS: (No receipts required; Per Diem maximum total must not exceed \$69.00/day)

Breakfast \$15.00 Lunch \$23.00 Dinner \$36.00

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

Individuals are reimbursed \$15/day for incidental expenses, which covers items such as laundry, dry cleaning, gratuities, daily paper, etc.

If the total Meals & Incidentals claim exceeds \$69.00 per day, it will be adjusted accordingly.

## **DEPENDENT CARE: (Receipts required)**

Receipted dependent care expenses (e.g., childcare, eldercare, disabled care), up to \$30/hr will be covered for members of locals attending officially organized, or sanctioned FPSE meetings. In special circumstances, and with no less than 10 days' advance notice, additional support may be approved by the Secretary-Treasurer. Receipts from the provider must contain the number of hours worked, the amount, the name and address (including postal code) of the caregiver, and caregiver's signature are required.

## 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.