



# BC Hockey Expense Form

## Personal Information

Event Type:

Event End Date\*:    
Date Format: yyyy-mm-dd

Level:

Clinic #:

Location:

Host Association:

First Name\*:

Last Name\*:

Street Address\*:

City/Town\*:

Postal Code\*:

Province\*:

Phone Number\*:   
Phone Number format is 555-555-5555

Email\*:

## Travel Allowance

Date	Description	Distance (KM)	Action
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="button" value="Add"/>

Date Format: yyyy-mm-dd

Note: Click 'Add' to save each line when it is complete.

## Meals Per Diem

Quantity	Category	Description	Action
<input type="text"/>	<input type="text" value="-Select a Meal Type-"/>	<input type="text"/>	<input type="button" value="Add"/>

Note: Click 'Add' to save each line when it is complete.

## Itemized Expenses

Date	Description	Category	Price	Action
<input type="text"/>	<input type="text"/>	<input type="text" value="-Select Category-"/>	<input type="text"/>	<input type="button" value="Add"/>

Date Format: yyyy-mm-dd

*Honorarium*

*Price - see Pg 2*

Note: Click 'Add' to save each line when it is complete.

## Receipts

It is BC Hockey policy that receipts are submitted for all claims, these are kept on file for audit purposes. If you are unable to upload receipts below, please mail, fax (250) 652-4536, or scan and email to [accounting@bchockey.net](mailto:accounting@bchockey.net)

Select File

No file chosen

Note: Click 'Upload' after selecting each file for submission.

# Price for Itemized Expenses:

Mudget Ref	\$ 40.00
hesman	\$ 30.00
hesman	\$ 30.00

Bantan Ref	\$ 35.00
hesman	\$ 25.00
hesman	\$ 25.00