



MERRITT & DISTRICT MINOR HOCKEY ASSOCIATION
 BOX 936
 MERRITT, B.C.
 V1K 1B8

EXPENSE REIMBURSEMENT FORM

Cheque Payable to: _____

Date of Travel: _____

Reason for Travel: _____

Travel to (Name of City or Town): _____

RECEIPTS PERTAINING TO ALL ACCOMMODATIONS AND MEALS MUST ACCOMPANY THIS FORM, OR NO REIMBURSEMENT WILL BE ISSUED.

Mileage: _____ Total KM's travelled @ .60¢ per km per round trip = \$ _____
 (as per OMAHA chart on reverse)

Accommodations: \$ _____

Meals:
 Breakfast (Maximum \$15.00) \$ _____
 Lunch (Maximum \$20.00) \$ _____
 Supper (Maximum \$30.00) \$ _____

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 Supper (Maximum \$30.00) \$ _____

Other Expenses:
 1. _____ \$ _____
 2. _____ \$ _____
 3. _____ \$ _____

Total Reimbursement: \$ _____
 (Mileage, accommodations, meals & other)