# EXPENSES AND LOST WAGES STATEMENT OF CLAIM

Date

|                                       |                   |             | T      |          |                   |               |      |       |              |
|---------------------------------------|-------------------|-------------|--------|----------|-------------------|---------------|------|-------|--------------|
| Name                                  |                   |             | Event  |          |                   |               |      |       | _            |
| Address                               |                   |             |        | Employer |                   |               |      |       | _            |
|                                       |                   | Salary \$   |        |          | #H                | Hrs per week  |      |       |              |
| Postal Code                           |                   |             |        |          |                   |               |      |       |              |
| Date                                  | Detail of Expense | KM.<br>0.51 | Amount | HOTEL    | PER DIEM<br>MEALS | LOST<br>HOURS | TIME | OTHER | SUB<br>TOTAL |
|                                       |                   |             |        |          |                   |               |      |       |              |
|                                       |                   |             |        |          |                   |               |      |       |              |
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|                                       |                   |             |        |          |                   |               |      |       |              |
| Signature of Claim                    | ſ                 |             |        |          | TOTAL EXPENSES =  |               |      |       |              |
|                                       |                   |             |        |          |                   |               |      |       |              |
| Approved by Chairperson/Local Officer |                   |             |        |          |                   |               |      |       |              |

# LOCAL EXPENSE POLICY

#### ALL EXPENSE CLAIMS MUST BE SUBMITTED WITHIN 30 DAYS OF THE EXPENDITURE.

- 1. Expense forms will be submitted to the Executive Office, or in his/her absence the Local Representative who will approve or reject the claim based on local bylaws Executive Committee action and this expense policy. If the Executive Officer rejects a claim, he shall present it to the next meeting of the Office and Finance Committee.
- 2. If an expense claim is presented to and rejected by the O & F Committee, the Executive Officer will submit the claim to the next Executive meeting for final action, if so requested.
- 3. If no meeting is held in the interim by O & F Committee, any pending expense claims may be submitted to the Executive meeting next following the submission of the claim.
- 4. Lost time shall be paid as quickly as possible with the prior approval of the Executive.

# THE FOLLOWING ARE ALLOWABLE EXPENSES

## Conventions, Conferences and Seminars as approved by Executive Action:

Lost regular straight-time wages and lost night differential for the time booked off work. Any additional claim for lost pay such as statutory holiday premiums must be approved by the Executive, with request made in advance where possible.

Hotel - one to a room when in excess of 100 km from normal place of work.

Meals - breakfast \$20.00, lunch \$25.00. dinner \$40.00 (US if outside Canada)

Union Conferences & Conventions - \$90.00 per day and \$30.00 per half day except when meals are otherwise provided.

Out-of-town - \$10.00 per day, when entitled to hotel (US if outside Canada)

Members will use economy class except where otherwise authorized by the President or his or her designate.

Parking and kilometres over and above normal work to home (at best unit kilometre rate) currently @ 0.51 cents per km, if authorized to use own car — one claim per car.

Transportation to and from Airport or Transportation Terminal — Members travelling on Local business may submit receipts for the cost of transportation to and from the airport or transportation terminal.

## **BARGAINING COMMITTEE**

Lost regular straight-time wages and lost night differential for the time booked off work. Any additional claim for lost pay; such as holiday premiums must be approved by the Executive with requests made in advance where possible.

Parking, public transit or taxi fare equivalent to parking.

Kilometres to use own car over and above normal work to home kilometre at rate above.

Meals - breakfast \$20.00 - lunch \$25.00 - dinner \$40.00 (all meals on an "if required" basis).

Cab fare when meeting extends beyond 10 p.m.

Bargaining allowance of \$10.00 per day when bargaining last 12 hours or more.

### **EXECUTIVE AND OTHER COMMITTEES**

Parking or public transit

Kilometres to use own car over and above normal work to home kilometres at rate above.

Cab fare when meeting extends beyond 10 p.m.

Child care expenses - reimbursed when incurred due to Local business, up to the maximum of minimum wage. A receipt is required. This policy does not cover childcare that the member would normally incur for work.