

2014
PLEASE PRINT
CLEARLY



3 Concorde Gate, Suite 211, Toronto, Ontario, M3C 3N7
t. 416-426-7215 | f. 416-426-7358

Method of payment:
Cheque or Cash
Date: _____
Amount: _____

Technical Official Travel Expense Claim Form*

Name of traveler: _____ Telephone: _____

Home address: _____

Mailing address (if different from above): _____

City / Town: _____ Postal Code: _____

Name of event (and location): _____

Travel dates (M/D/Y) departure: _____ return: _____

Expense(s):

- | | |
|---|-------------|
| 1. Automobile** _____ km @ 0.35/km
(for each vehicle***) | 1. \$ _____ |
|---|-------------|

[A] Sub-total: \$ _____

Other expense(s) (details)

- | | |
|----------|-------------|
| 2. _____ | 2. \$ _____ |
| 3. _____ | 3. \$ _____ |
| 4. _____ | 4. \$ _____ |
| 5. _____ | 5. \$ _____ |

[B] Sub-total: \$ _____

[2 to 5]

Note: * The AO Travel Policy can be found online at the Athletics Ontario website at <http://athleticsontario.ca/officials-forms/> ** If carpooling with other Officials, please provide their names below under 'Travel Information/Comments'. *** All mileage claimed will be verified using Map Quest and based on the fastest route available at the time of travel.

Total: \$ _____

[A] + [B]

Travel Information/Comments:

I hereby certify that the above Expense Claim was incurred while representing Athletics Ontario.

Meet Director or Officials Coordinator

Claimant Signature

Date

Note: (1) Travel Expense Claim Forms are processed within 10 business days from the date received. Please contact the AO Office if you have not received payment with 2 weeks. (2) All claims must be made within the fiscal year incurred. If received outside of this period the claim will be void. (3) Technical Officials Claim Forms submitted after a meet, must be remitted to the AO Office Attn: AOO Treasurer