



**EXPENSE REPORT / ACCOUNTABLE ADVANCE SETTLEMENT** Financial Services Dept. (revised May 1, 2018)

**TO BE COMPLETED BY CLAIMANT**

**Accounting Information - TO BE COMPLETED BY BUSINESS OFFICER**

**Indicate reimbursement currency:**  
 For expense reimbursements in a currency other than CAD, **DO NOT** convert expenses to CAD value.  
 CAD  
 USD  
 Other \_\_\_\_\_  
**NOTE: Original receipts are required.**

**Claim Type:** Select claim type. Enter code, below, to complete G/L account. If G/L account is not listed, enter appropriate G/L account on "OTHER" line.

0	EMPLOYEE FIELD TRIP
1	EMPLOYEE CONFERENCE
2	STUDENT FIELD TRIP
3	STUDENT CONFERENCE
4	VISITOR

Business Area:  
 Company Code: **UofT**  
 Document Number:

**TO BE COMPLETED BY CLAIMANT**

Personnel Number		Period of Travel		EXPENSE CATEGORIES	AMOUNT	G/L ACCOUNT NUMBER		TAX CODE	COST CENTER		INTERNAL ORDER	FUNDS CENTER	FUND	COMMITMENT ITEM
Last Name		Initial				AIRFARE: Attach proof of payment & proof of air travel (*)		8	4	0	1	0	ER	
Address				All other Airfare		8	4	0	1	0	E0			
Purpose and Relevance to University Business				ACCOMMODATION: ON (13%HST)		8	4	0	2	0	ER			
Department Contact				PEI, NS, NF, NB (15%HST)		8	4	0	2	0	EN			
Department				All other provinces / territories		8	4	0	2	0	EE			
Telephone		Fax		USA / International		8	4	0	2	0	E0			
Date Prepared				ALLOWANCE: Per Diem: Canada		8	4	0	3	0	EA			
Signature of Claimant				Per Diem: USA / International		8	4	0	3	0	E0			
Print Name		Title		KMS X 54 cents/km		8	4	0	4	0	EA			
Authorized Approver Declaration: I certify the expenses claimed were reasonable & required for University business & (if applicable) are relevant to the research being funded.				RAIL/BUS: Travel within Canada		8	4	0	5	0	ER			
Signature of Authorized Approver				Travel outside Canada		8	4	0	5	0	E0			
Print Name		Title		PUBLIC TRANSIT: Travel within or outside Canada		8	4	0	5	5	E0			
Other: (multiple rows)				CAR RENTAL: Attach detailed receipt & contract (*)		8	4	0	6	0	ER			
				ON (13%HST)		8	4	0	6	0	EN			
				PEI, NS, NF, NB (15%HST)		8	4	0	6	0	EN			
				All other provinces / territories		8	4	0	6	0	EE			
				USA / International		8	4	0	6	0	E0			
				MEALS: Attach detailed itemized receipts (*)		8	4	0	7	0	ER			
				ON (13%HST)		8	4	0	7	0	EN			
				PEI, NS, NF, NB (15%HST)		8	4	0	7	0	EN			
				All other provinces / territories		8	4	0	7	0	EE			
				USA / International		8	4	0	7	0	E0			
				TAXI: ON (13%HST)		8	4	5	0	0	ER			
				PEI, NS, NF, NB (15%HST)		8	4	5	0	0	EN			
				All other provinces / territories		8	4	5	0	0	EE			
				USA / International		8	4	5	0	0	E0			
				OTHER: (multiple rows)										
				TOTAL EXPENSES		NOTES:								
				LESS: ACCOUNTABLE ADVANCE										
				REIMBURSEMENT REQUIRED										
				OR REPAYMENT										
				<b>For AA Settlements: Financial Services (original copy) Originating department (photocopy)</b>										

(\*) Refer to expense reimbursement checklist @ [Expense Reimbursement Checklist - Template - Financial Services](#) and the Guide to Financial Management @ [Travel and Other Reimbursable Expenses - Policies and Guidelines - Financial Services](#)