Canadian Young Farmers' Forum
La Table pancanadienne de la relève agricole

For Office Use Only

Box 24, Middle Lake, Sask. S0K 2X0 PH: **888-416-2965** or **306-367-4628** FAX: **306-367-2403** EMAIL: **info@cyff.ca**

EXPENSE CLAIM

NAME: _____ **ADDRESS:** _____ **DATES** From _____

LOCATION: _____ _____ To _____

EVENT: _____ _____

Please number each receipt provided and make a separate entry for each expense claim submitted. ENTER GST SEPERATELY.

Date	Receipt #	Description	Hotel	Mileage	Air Fare	Meals	Parking	Other/Misc.	GST/HST	Total
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
										$ -
			$ -	$ -	$ -	$ -	$ -	$ -	$ -	
									Subtotal	$ -
									Advances & Deductions	
									Total	$ -

CLAIMANT SIGNATURE: _____ **DATE:** _____

APPROVED BY: _____