

**TRUSTEE EXPENSE  
CLAIM FORM**

<b>Name</b>	
<b>Date</b>	

Please submit claims for a complete month.

Activity	Date	Nature of Expense	Amount		<b>For Office Use</b>
<b>Total &gt;&gt;&gt;</b>					

<b>Submitted by</b>	<b>Date</b>

<b>Approved by Secretary-Treasurer</b>	<b>Date</b>

**The Secretary-Treasurer's Department processes cheques twice monthly - mid-month and end of month.**