ONTARIO RINGETTE ASSOCIATION

3 Concorde Gate, Suite 207, Toronto, Ontario M3C 3N7 Tel:(416) 426-7204 Fax:(416) 426-7359

EXPENSE CLAIM		
NAME:		
ADDRESS:	TEL	<u>;</u>
CITY:	POSTAL CODE:	
REASON FOR CLAIM: (i.e. Mee	eting, Clinic, AA PRC, Challenge Cup)	
DATE OF CLAIM:	TRAVELLED TO:	FROM:
EXPENSES:		
	eturn) at \$0.40/km or other	\$
*TRAVEL: (air, rail, bus, taxi, airport limo, parking etc.) Circle one		\$
*ACCOMMODATIONS:	(See Reverse Side)	
MEALS: Breakfast		
Lunch at		0.
Dinner at	\$25.00 TOTAL MEAL	-5: \$
*MICOCI I ANICOLIO	TAOF	•
*MISCELLANEOUS: POST	IAGE	\$
TELEPHONE		\$
OTHER		\$
HONORARIUM:		\$
TAL EXPENSE CLAIM		\$
tal Amount of Advance Payment(s): \$(Source:		
nount Owing to Person named on expense claim		\$
	- -	ogram Approval:
"Note: Must nave receipts in o	raer to ciaim these expenses, pleas	e attach receipts to expense claim.
	FOR OFFICE USE ONLY	•
Account	Class	Amount
, woodill	Ciass	Amount
		-

GENERAL FINANCIAL INFORMATION

Submission of Expenses

Expense Forms are to be completed separately for all meetings, clinics, or administrative costs. Expense Forms are to be either collected by the Ad Hoc or Standing Committee Chair and sent to the office or given to the staff present at the meeting.

All expenses must be submitted within thirty (30) days of incurring them, or they will not be eligible for reimbursement. (Exception: telephone bills may be submitted within sixty (60) days of the actual billing date).

Payment of Expenses

Payment of expenses is done fifteen (15) days after O.R.A. approval of the expense. Where a receipt is necessary and not attached, this amount will be deducted from the claim. Outstanding accounts receivable with O.R.A. will be deducted from claims received by the delinquent person.

Policies Re: Meals

Breakfast - on approved O.R.A. business prior to 8:30 a.m.

Lunch - on approved O.R.A. business between 11:00 a.m. to 2:00 pm.

Dinner - on approved O.R.A. business after 5:30 p.m.

Policies Re: Accommodations

- 1. Accommodations shall be paid by the O.R.A.
- 2. The office must be contacted at least one (1) month before scheduling meeting.
- 3. All rooms will be paid for by O.R.A. PLEASE DO NOT PAY FOR YOUR OWN ROOMS.
- **4.** All rooms will be double occupancy two to a room, unless number and/or gender attending dictates a single room. Those people specifically requesting a single room shall be responsible for half the room cost.
- **5.** Requests for single occupancy based on medical reasons will be considered on an individual basis. If granted these requests are not responsible for half room costs.
- **6.** Any items such as telephone calls, room service, etc. should be paid for by the individual before checking out of the hotel. If not, these expenses will be deducted from the individual's Expense Claim.
- 7. If you find it necessary to cancel, please let the office know by the specified time given when you are informed of the meeting. If cancellation is made in the required time your room will be cancelled no charge. Your region or you, personally, will be charged for last minute cancellations.
- **8.** To be eligible for accommodations for a day or evening meeting, an individual must travel a minimum of 100km one way. (Exception: two day meetings). **Please note: Common sense prevails regarding weather conditions.**

Policies Re: Airfare

- 1. The O.R.A. has a working relationship with a sponsor and uses them exclusively.
- 2. Contact the O.R.A. office for the contact information, minimum of one (1) month in advance. The individual requesting the flights will make all arrangements once approved.
- 3. Late bookings that result in higher costs may not be approved.
- 4. Any adjustments made to booked flights resulting in additional fees are not the responsibility of the ORA.