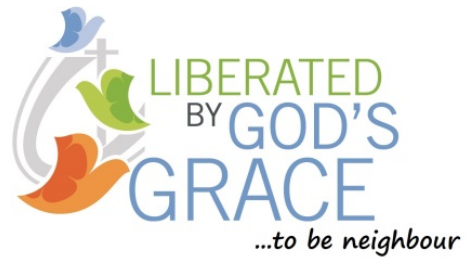


# Eastern Synod Assembly 2018

## DELEGATE EXPENSE FORM



PLEASE PRINT

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City

Province Postal Code

Telephone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Congregation Name & Location \_\_\_\_\_

Air Travel (please attach receipts) \$ \_\_\_\_\_

Rail or Bus (please attach receipts) \$ \_\_\_\_\_

Automobile & Driver \_\_\_\_\_ km @ 20 cents/km (round trip) \$ \_\_\_\_\_

**Additional Passengers** \_\_\_\_\_ km @ 5 cents/km (round trip) \$ \_\_\_\_\_

\_\_\_\_\_ km @ 5 cents/km (round trip) \$ \_\_\_\_\_

\_\_\_\_\_ km @ 5 cents/km (round trip) \$ \_\_\_\_\_

**Names of Additional Passengers** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**TOTAL CLAIMED** \$ \_\_\_\_\_

Certified correct and in keeping with the **Assembly Travel Policy**: \_\_\_\_\_

Signature

### Notes:

1. In order to reduce administrative expenses associated with issuing cheques for small amounts, delegates are encouraged not to submit expense claims totaling \$15.00 or less. (Synod Assembly Travel Policy # 5)
2. If the delegate wishes to donate the expenses to the synod and receive a receipt, an expense form must be completed. A cheque will be mailed, at which time the delegate may send a cheque for the same amount back to the synod. (Synod Assembly Travel Policy # 7)

Please return completed form to:

The Treasurer  
Eastern Synod – ELCIC  
74 Weber St. W.  
Kitchener, ON N2H 3Z3



Eastern Synod  
of the Evangelical Lutheran Church in Canada

Approved for Payment \_\_\_\_\_