



# Expense Claim

Mar 2017

Campaign Official \_\_\_\_\_

(A receipt, cancelled cheque or other acknowledgment of payment must be affixed when making claim for reimbursement of a particular expense.)

Date of Purchase	Business Supplier or Vendor	Description of Item(s)	Amount Paid
<b>Total \$</b>			

\_\_\_\_\_  
Signature of Claimant