B.C. GOVERNMENT RETIRED EMPLOYEES' ASSOCIATION - EXPENSE FORM

Name _____ **Phone #** _____

Address _____ **P. Code** _____

Position In BCGREA _____ **Branch #** _____

Reason For Claim _____

Date	Description	Amount
	Total	

Travel Expenses	
Mileage	$0.61 /km
Breakfast	$25
Lunch	$25
Dinner	$35
Home stay	$50
Others	By receipt

Revised April 21, 2023

Signature _____

Dated Submitted _____

Date Received _____

Approved _____

Cheque/E-tsfr Issued _____

Cheque/E-tsfr # _____

For payment by cheque (include receipts):

E-mail to: treasurer@bcgrea.ca

Mail to: BCGREA Treasurer, 881 Tutor Way, Mill Bay, BC, V0R 2P1

For payment by interact e-transfer enter your e-mail address in the box below and e-mail or post as above (include receipts):