<b>Independent Living Cent</b> 127 Victoria Street South, S	Sheet of		
Kitchener, Ontario N2G 2B		TRAVEL EXPENSE FORM	
Name		Pay Period	
Fmp #	(See nay stub fo	or employee number)	

- 1. In the FROM and TO column please use the four letter code (first two letters of the consumer's first name and the first two leters of the consumer's last name) or HOME.
- 2. KM should be rounded to .50 km
- 3. The first trip to a shift in the day and the last trip home are not eligible for paid mileage.
- 4. If a bus was the means of transportation, please indicate by putting an X.

DATE	FROM	ТО	KM	BUS

DATE	FROM	то	<u>KM</u>	BUS
		l		
Total km		X 35 cents/km		
Total bus trips		X \$1.00/trip		
rotal bus trips		Λ \$1.00/αιμ		
I agree that I have above.	incurred expenses for	r travel in the course	of my employn	nent as listed
Employee			Date	