

# Faculty of Education

## Finance Office

### Miscellaneous Expense Claim (non travel)

SHADED area MUST be completed

<b>Name:</b>	<b>Employee/Student Number:</b>
<b>Payment Method (check one <input checked="" type="checkbox"/>)</b>	
<input type="checkbox"/> Mail cheque to the following address:	<input type="checkbox"/> Direct Deposit <small>(for UBC employees only with direct deposit already set up with Payroll)</small>

ITEMIZED EXPENSES	Other \$\$	<a href="#">exch@</a>	\$\$ CDN
<b>TOTAL</b>	<b>\$</b>		<b>\$</b> -

**TOTAL CLAIMED (CDN)**

#### THE FINE PRINT

I hereby certify that the above listed expenses comply with UBC Policy #83 (Travel Policy [www.policy.ubc.ca/policy83.htm](http://www.policy.ubc.ca/policy83.htm)) and are business-related expenses and granting agency requirements. **(Attach all original receipts. Photocopied or scanned copies are not acceptable.)**

<b>Date</b>	<b>Claimant's Signature (Print)</b> <small>Required by UBC Policy</small>	<b>Claimant Signature (Sign)</b>
<b>AUTHORIZATION (To be completed by Grant Holder)</b>		
<b>CHARGE TO PROJECT GRANT #</b> _____		
<b>Date</b>	<b>Authorizing Signature (Print)</b>	<b>Authorizing Signature (Sign)</b>

Approval from one administrative level higher

Receipts & Proof of payment must be included otherwise the claim cannot be processed.  
**NO PHOTOCOPIES**