



Expense Claim 2011

Alberta Target Archers Association

Box 897

Lac La Biche, Alberta T0A 2C0

Email: treasurer@ataa-org.ca

Name: _____ Period Of Claim _____
 Address _____ Judge, Archer, _____
 Address _____ Exec _____
 City _____

Date	Description (Coaching clinic, Indoor Provincials etc.)	Sub-total	Total
			-

Travel Claim

Date	Reason for Claim (From/To)	KMS	Rate	Total
				-
				-
				-
				-
			Total	-

Rates	ATAA EXEC	JUDGES	ATAA members
Hotels	Reasonable	Reasonable	
Mileage	\$0.40/KM	\$0.40/KM	\$0.40/km
Per Diem		\$30/day meals	

Prepared By _____
Print Name Signature

Cheque# _____ Issued By _____ Date _____