

Vancouver Hack Space
45 West Hastings Street
Vancouver, BC V6B 1G4
778-330-1234 <http://hackspace.ca>

Expense Claim Form

Please attach original receipts. Your expense claim will be rejected if receipts are not provided, or if any sections of this form are incomplete.

Your name:	Today's date:
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Invoice Date (YYYY-MM-DD):	Amount (in Canadian \$):
Vendor Name:	
Invoice Number:	
Purpose:	
Invoice Date (YYYY-MM-DD):	Amount (in Canadian \$):
Vendor Name:	
Invoice Number:	
Purpose:	
Invoice Date (YYYY-MM-DD):	Amount (in Canadian \$):
Vendor Name:	
Invoice Number:	
Purpose:	
Invoice Date (YYYY-MM-DD):	Amount (in Canadian \$):
Vendor Name:	
Invoice Number:	
Purpose:	

(Please attach an extra page if you need more room)

Vancouver Hack Space Expense Policy

Purpose:

The Vancouver Hack Space Society's expense policy provides reimbursement guidelines and procedures for members incurring expenses while conducting business on behalf of the society. In the course of incurring expenses, it is expected that members exercise good judgment and act fiscally responsibly.

Scope:

This policy applies to all regular members, key-holder members, and directors of the Vancouver Hack Space.

Expense Policy:

Members who incur expenses on approved society business shall complete and submit the expense form to the Board of Directors (email directors@hackspace.ca) for approval prior to submitting to the society treasurer for processing.

The treasurer reserves the right to deny reimbursement of expense claims that are questionable, demonstrate poor judgment or were not pre-approved by the Board of Directors.

To ensure timely reimbursement, expenses shall be submitted within 30 days of being incurred. For purposes of financial reporting and auditing, all claims must be supported with proper receipts. Expenses over \$50 will be paid only by cheque.

By signing this form, I hereby accept the terms of the expense policy and guarantee that all expenses being claimed were incurred by me on Vancouver Hack Space Society business and are not reimbursed from other sources.

Please sign here:

Please print your name legibly:

Date signed (YYYY-MM-DD):

Total Amount:

Director signature here:

Name of director approving expense

Date signed (YYYY-MM-DD):

Cheque # issued (or cash):