



NISHNAWBE-ASKI LEGAL SERVICES CORPORATION

TRAVEL ADVANCE REQUEST

1. Submit one form per trip, must be approved prior to payment
2. Manager is responsible in forwarding to Finance Department for processing by Tuesday at noon.

Dept/Budget Code: _____ Date: _____

Name: _____ Position: _____

DETAILS OF TRAVEL								
DEPART DATE:		TIME:			NUMBER OF DAYS:			
RETURN DATE:		TIME:			NUMBER OF NIGHTS:			
DESTINATION:								
FELLOW TRAVELLERS:								
PURPOSE OF TRAVEL:								
DETAILS OF ADVANCE REQUEST:	Sun	Mon	Tues	Wed	Thurs	Fri	Sat.	
<i>(enter dates ->)</i>								
Breakfast \$20.35 per day <i>(Travel before 7:30 a.m.)</i>								
Lunch \$20.60 per day <i>(Include only if not provided on plane)</i>								
Supper \$50.55 per day <i>(Travel after 7:00 p.m.)</i>								
Incidentals \$17.30 per night								
Taxis								
Parking								
Childcare \$35.00 for 1 st child \$15.00 per child thereafter								
Mileage \$0.57 per km								
Private Accommodations \$50.00 per night								
Other (Specify)								
TOTAL REQUESTED								

Employee's Signature _____

Date _____

Approved by Manager _____

Date _____

FINANCE USE ONLY:

BATCH #:		ENTERED BY:	
EFT BATCH#:		PAYMENT SUBMITTED BY:	