



**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 -&gt;)</i>  |     |       |      |     |                   |     |      |  |
| Breakfast \$20.35 per day<br><i>(Travel before 7:30 a.m.)</i>               |     |       |      |     |                   |     |      |  |
| Lunch \$20.60 per day<br><i>(Include only if not provided on plane)</i>     |     |       |      |     |                   |     |      |  |
| Supper \$50.55 per day<br><i>(Travel after 7:00 p.m.)</i>                   |     |       |      |     |                   |     |      |  |
| Incidentals \$17.30 per night   |     |       |      |     |                   |     |      |  |
| Taxis   |     |       |      |     |                   |     |      |  |
| Parking   |     |       |      |     |                   |     |      |  |
| Childcare \$35.00 for 1 <sup>st</sup> child<br>\$15.00 per child thereafter |     |       |      |     |                   |     |      |  |
| Mileage \$0.57 per km   |     |       |      |     |                   |     |      |  |
| Private Accommodations<br>\$50.00 per night                                 |     |       |      |     |                   |     |      |  |
| Other (Specify)   |     |       |      |     |                   |     |      |  |
| <b>TOTAL REQUESTED</b>  |     |       |      |     |                   |     |      |  |

Employee's Signature \_\_\_\_\_

Date \_\_\_\_\_

Approved by Manager \_\_\_\_\_

Date \_\_\_\_\_

**FINANCE USE ONLY:**

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