

Expense Reimbursement Form

Section 1 of 2 — Claimant & Trip Information & Signatures

Complete all sections and attach original receipts. Submit to your department approver.

Form Type: Student Expense Visitor Reimbursement

Traveler Affiliation to PI:

Payee Information

Student ID / Employee ID

Last Name

First Name

Street Address

City

Province / State

Postal / Zip Code

Country

Travel Location (complete if travel costs are being claimed)

Destination

Start Date (MM/DD/YYYY)

End Date (MM/DD/YYYY)

Nature and Purpose of Expense

If hospitality expenses are included, provide: business purpose, date, location, names of attendees.

2026 Canadian Cancer Trials Group Annual Spring Meeting of Participants, April 23-26, Chelsea Hotel, Toronto, ON

Signatures & Approval

Claimant	
Full Name:	
<input type="text"/>	
Signature:	Date:
<input type="text"/>	<input type="text"/>

Preparer (if different from claimant)	
Full Name:	
<input type="text"/>	
Signature:	Date:
<input type="text"/>	<input type="text"/>

Manager / Supervisor Approval	
Full Name:	
<input type="text"/>	
Signature:	Date:
<input type="text"/>	<input type="text"/>

Expense Reimbursement Form — Policy & Instructions

Annual Spring Meeting of Participants | April 24–26, 2026 | Chelsea Hotel, Toronto

Submit your expense claim within 15 days AFTER the meeting — Deadline: 22 MAY 2026 — Incomplete or improperly completed forms will be returned.

Mail completed form + receipts to: CCTG Travel, 10 Stuart Street, Kingston, ON K7L 3N6

Processing & Submission

- Claims reviewed up to three weeks of receipt by Financial Services.
- Reimbursement will be made by cheque or EFT (requires completion of the EFT form)
- Questions: cctgtravel@ctg.queensu.ca

Filling Out the Form

- Do not combine multiple expenses.
- Your signature is required to complete the form (do not type your name in the signature box).
- Keep a copy of your form and all supporting documents.

Taxes (HST/GST)

- Per diems and mileage: HST/GST is auto-calculated on the digital form.
- All other Canadian expenses: enter HST/GST manually from your receipts.
- Claims paid in Canadian Funds unless otherwise noted.

Receipts

- Itemized receipts must show date, payment method, amount paid, and taxes.
- Lost receipts: provide an explanation and alternative evidence.
- Expenses without receipts cannot be reimbursed.

Meal Per Diems

- Per diems ONLY — no meal receipts required.
- Do NOT claim meals provided at the meeting.
- Taxi/Uber to and from restaurants is NOT reimbursable.

Non-Reimbursable Expenses

- Please refer to the travel policy, or reach out to cctgtravel@ctg.queensu.ca for more information.
- Personal travel days are not covered — business travel days only.
- Combining personal & business travel: only direct business travel expenses are reimbursable.
- Unexplained miscellaneous expenses will not be reimbursed.

Mileage & Meal Per Diems — Expense Types

- Breakfast Per Diem - \$28 CDN (inclusive of tax)
- Lunch Per Diem - \$28 CDN (Inclusive of Tax)
- Dinner Per Diem - \$58 CDN (Inclusive of Tax)
- FULL Day Meal Per Diem - \$114 CDN (Inclusive of Tax)
- Mileage - \$0.63 per km

Receipted Expenses — Expense Types

- Accommodations
- Airfare
- Other Travel (bus, tolls, Uber)
- Parking
- Rail
- Taxi

Expense Reimbursement Form — Attach all original receipts

Mileage and Meal Per Diems

★ Please ensure a Province is selected in each line

Date (YYYY/MM/DD)	Expense Type	Province ▼ select	# of Days	Description of Expense	km (Mileage)	Amount (Including Tax)	HST / GST ★ calc	Total (Excl. Tax) ★ calc

Received Expenses

★ Please enter taxes manually

Date (YYYY/MM/DD)	Expense Type	Province ▼ select	Description of Expense	Amount (Including Tax)	HST / GST	Total (Excl. Tax) ★ calc

Total Expenses (CAD) Pre Tax:	<input type="text"/>	<input type="text"/>
Total Taxes (CAD):	<input type="text"/>	<input type="text"/>
Less Travel Advance Received (CAD):	<input type="text"/>	<input type="text"/>
Total for Reimbursement (CAD):	<input type="text"/>	<input type="text"/>

Internal Use Only: Account Information — Account amounts must equal total above

Fund	Department	Account	Program	Class	Project	Amount

Direct Deposit Information Form

Queen's University at Kingston Financial
Services, General Accounting
355 King Street West, 3rd Floor
Kingston, ON
K7L 3N6



Please fill in the following fields and return by email to banking@queensu.ca

Payee Name:	<input type="text"/>	Supplier Number: (if applicable)	<input type="text"/>
Payee Address:	<input type="text"/>	Contingent Number: (if applicable)	<input type="text"/>
Payee Phone Number:	<input type="text"/>	Payee Email Address:	<input type="text"/>

Please pay the above noted person via direct deposit to the following bank account

Affix copy of void cheque, bank letter, or deposit slip from online banking below

Note: Please ensure the void cheque or bank letter has your name pre-printed by your bank for our verification.

Note: Payments in Canadian funds can only be deposited to a Canadian bank account.
Payments in US funds can only be deposited to a US bank account.

I understand that notification of payment will be transmitted via email.

Payment notification will be received from:

payments@queensu.ca

Signature:	<input type="text"/>
Name:	<input type="text"/>
Date	<input type="text"/>