

Report Description: CCSL Project Name and Project Number

Claimant : Person to be reimbursed

email : jane.smith@gmail.com

Phone : 555-555-5555

Address : 55 Concordia Lane

Montreal Quebec H1H-1H1 Canada

Itinerary : Concordia Employee ID (if applicable)

Method of reimbursement Cheque

Date	Description	Fund/Org Code	Account Code	Other Currency	Type	Exchange Rate	Canadian Currency	Tax Code
08-Feb-2021	Concordia print store - printing expenses	DEAN12	77240				\$50.00	

Claimant's Signature: _____

Approval Name: Lauren Broad

Approval Signature: _____

Department Name: Dean of Students Office

Total: \$50.0

Less Advances

Less Prepaid Air/Train Fare

Amount due to Claimant \$50.0

Proceed to final print

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