

## SECTION ONE: Claimant Information

		Payment takes 4-6 weeks.	
Name		Date Prepared	
		MO	DY
Address			YR
City/Province	Postal Code		

It is the policy of NanoMedicines Innovation Network (NMIN) to reimburse reasonable and necessary expenses incurred by individual in the course of carrying out their NMIN-related responsibilities. Claimants are responsible for ensuring that claims for reimbursement are accurate, and that they conform to NMIN's Policy and, where applicable, federal funding agency rules (*i.e.*, CIHR, Tri-Council Agency rules). Reimbursement requests submitted for approval will be reviewed against NMIN's Policy by the NMIN Accountant and approved by the Executive Director of NMIN, or rejected if the expenses are not eligible or exceed eligible limits for reimbursement.

## SECTION TWO: Expense Details

Dates:	From:	To:
Location(s):		
Purpose:		

## SECTION THREE: Declaration and Authorizations

**Declaration by Claimant:** I have read NMIN's Policy on reimbursement of expenses and confirm that I am in compliance with the policy. Expenses must be directly related to NMIN business.

Re: Institution reimbursement only		
Institution	Institution Contact	Email
Signature of Claimant	Printed Name	Email
NMIN Signature of Approval	Printed Name	Title

# EXPENSE REPORT

Please send form to: divyarao@nanomedicines.ca

EXPENSES DETAILS				
Expense Type	Receipt Requirements Please provide receipts for all expenses.	Foreign Amount	Cdn Amount \$	Details
Airfare	Invoice and boarding passes			
Baggage Fees	Proof of payment/receipt			
Bus/Railway	Passenger Ticket Stub			
Car Mileage	kms x .57 /km Mileage validated e.g. Google Map			
Taxi	Taxi Receipt(s)			Specify To / from for each cab claim here
Parking/Highway Tolls	Parking Receipt(s)			
Car Rental	Customer's copy of the rental charges and gas receipts			
Accommodation	Provide detailed statement			
Meals with receipt	Daily Maximum \$115.00 (Breakfast \$25, Lunch \$30, Dinner \$60)			Specify dates and meal-type (e.g., lunch) here
Meals without receipt	Without receipts, the following claims can be made per eligible meal (Details with dates must be attached to claim.) Breakfast \$15      Lunch \$15      Dinner \$20			Specify dates and meal-type (e.g., lunch) here
Conference registration fees	Registration form, plus original receipt/proof of payment. Registration fees for NMIN conferences can not be claimed.			
Other Expenses	Please provide details below			

CAD \$

Total Expenses

<b>Missing Receipts?</b>	Please provide details.
Reason:	
Type of Expense:	
Paid to:	
Date of Expense:	Amount:
Type of Expense:	
Paid to:	
Date of Expense:	Amount: