

PAYMENT REQUEST FORM

CLAIMANT NAME:

CLAIMANT ID No:

CLAIMANT E-MAIL:

CLAIMANT SUPERVISOR:

CLAIMANT SIGNATURE (IF YOU DO NOT HAVE A MACID):

BY APPROVING THIS CLAIM EITHER ELECTRONICALLY IN MOSAIC OR BY MY SIGNATURE ABOVE, I CERTIFY THAT I HAVE READ THE UNIVERSITY'S PUBLISHED REGULATIONS ON THE REIMBURSEMENT OF EXPENSES AND CONFIRM THAT I AM IN COMPLIANCE.

CLAIMANT AFFILIATION TO THE RESEARCH PROJECT:

PI	UNDERGRADUATE STUDENT	GUEST SPEAKER
PROJECT MANAGER	MASTERS STUDENT	VISITING RESEARCHER
RESEARCH ASSISTANT/ASSOCIATE	PHD STUDENT	OTHER (SPECIFY)
COLLABORATOR	POST DOCTORAL FELLOW	

EXPENSE INFORMATION

FUND	DEPT	ACCT	PROJECT/ PROGRAM
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GRANT/PROJECT TITLE:

WERE THERE PREVIOUSLY PAID EXPENSES FOR THIS TRIP: NO YES AMOUNT

TRAVEL DATES

DEPARTURE DATE:

RETURN DATE:

LOCATION:

PURPOSE OF TRAVEL CLEARLY EXPLAINING HOW THE TRAVEL IS DIRECTLY RELATED TO THE GRANTHOLDER'S RESEARCH:

(WHAT, WHY, HOW, INCLUDE NAME OF PERSON VISITED IF TRAVEL IS FOR RESEARCH COLLABORATION OR FOR AN INVITED RESEARCH MEETING)

Examples:

- Conference
 - Attended name of conference to present material related to what
 - Attended name of conference as the material covered directly relates to what
- Fieldwork
 - Fieldwork at where to what to be used in my research project, project title, where I am analyzing what
- Collaboration
 - Collaboration at University name with name of collaborator; comparison of research findings related to what.

RECEIPTS INCLUDED

(IF CURRENCY IS NOT CANADIAN, MOSAIC WILL CONVERT THE AMOUNT TO CANADIAN USING THE McMASTER RATE OR YOU MAY SUPPLY DOCUMENTATION SHOWING THE CONVERSION RATE YOU WERE CHARGED I.E. VISA STATEMENT SHOWING CHARGE)

AIRFARE: NO YES TOTAL AMOUNT
(ATTACH BOARDING PASSES)

AIRPORT TAXI/LIMO: NO YES TOTAL AMOUNT

BAGGAGE FEES: NO YES TOTAL AMOUNT

COACH BUS: NO YES TOTAL AMOUNT

CONFERENCE REGISTRATION: NO YES TOTAL AMOUNT
(ATTACH PROOF OF ATTENDANCE AND ITINERARY FOR CONFERENCE)

GO TRANSIT: NO YES TOTAL AMOUNT

GAS: NO YES TOTAL AMOUNT

HOTEL/LODGING: NO YES TOTAL AMOUNT
(HOTEL RECEIPT MUST BE ITEMIZED)

LOCAL BUS: NO YES TOTAL AMOUNT

MEALS: NO YES TOTAL AMOUNT
(PROVIDE ITEMIZED RECEIPTS OR PER DIEM INFORMATION. LIST NAMES OF ATTENDEES AND PURPOSE OF MEAL IF RECEIPTS ARE FOR MORE THAN YOURSELF.
NOTE: PER DIEM NOT ELIGIBLE ON PROVINCIALLY FUNDED GRANTS)

MISCELLANEOUS: NO YES TOTAL AMOUNT

MISCELLANEOUS DESCRIPTION:

PARKING: NO YES TOTAL AMOUNT

PERSONAL CAR MILEAGE: NO YES DISTANCE
(PROVIDE EITHER A GOOGLE OR MAPQUEST MAP WITH DIRECTIONS TO VERIFY MILEAGE)

TAXI: NO YES TOTAL AMOUNT

TOLLS: NO YES TOTAL AMOUNT

TRAIN: NO YES TOTAL AMOUNT

VEHICLE RENTAL: NO YES TOTAL AMOUNT