COMMUNITY FOUNDATIONS OF CANADA
CONFERENCE 2006 – REIMBURSEMENT REQUEST
FOR
C.S. MOTT, THOMAS SILL & WINNIPEG FOUNDATION SCHOLARSHIPS

Note: For all youth and youth adult advisors, please use separate form available on CFC and Youth websites or via email from CFC.

Name of Community Foundation_____

Contact Person or Conference Participant(s): _____

_____

Telephone:(___)_____ fax:(____)_____email: _____

Receipts are required for all expenses except for the conference registration fees and mileage costs.

Total Scholarship Amount Approved by CFC **$**_____

Expenses incurred: (*Only include expenses up to the amount of scholarship awarded.)*

Registration Fees: _____ name(s) of participants $_____

Travel (air, train, taxis, bus, etc) $_____

Mileage (_____km @ .42/km) $_____

Accommodation $_____

Total Expenses **$**_____

Cheque to be made payable to: _____

Address:_____

City**:**_____ Prov**:**_____Postal Code_____

Signature_____ Date: _____

Please return this reimbursement request form with receipts by no later than **June 30th** to:

Inez Hoey, Manager of Finance, Community Foundations of Canada
301 - 75 Albert Street, Ottawa, Ontario K1P 5E7

Tel: 613-236-2664 ext 303 Fax: 613-236-1621 email: *ihoey@cfc-fcc.ca*

For office use only: Date paid: _____cheque #: _____