2019 REQUEST FOR TAX RECEIPT

Submit to:
Vintage Wings of Canada
c/o Lucie Lacroix (llacroix@vintagewings.ca)
1699 rue Arthur Fecteau Street
Gatineau, QC J8R 2Z9

Name _____

Address _____

_____

Date: YY/MM/DD	Activity	Location	Total Hours	Driving Distance km	Mileage Value @ $0.500	Other *(Misc)	Total Claim
Totals							

Minimum claim: 500 km total or $500 within the calendar year.

Note : Have you?
1 Noted your hours
2 Enclosed receipts for "Other" items
3 Signed the report

* All expenses will be revewed upon receipt of this form.

Final submission date for 2019 hours is December 31, 2019

PLEASE FILL THIS OUT AND SIGN TO GET A RECEIPT

I, _____
direct that the funds to which I am entitled by way of reimbursement for the expenses listed above, and would othewise be forwarded to me by cash or cheque, be transferred to Vintage Wings of Canada as my gift.

Signed: _____

Date: _____

Verified & Approved by: _____

Date: _____

Receipt # _____