

Neuroscience Expense Reimbursement Form for Students

Name:

Student Number:

Date of expense period:

Expense (Parking Pass or Parking Receipt)	Date of Receipt	Paid By (Cash, Cheque, Credit)	Total Receipt Amount	HST
			Total amount to be reimbursed:	Total HST:

Please sign and submit the following Claimant Declaration Form each time you submit a set of receipts for reimbursement:

<http://carleton.ca/studentaffairs/wp-content/uploads/Claimant-Declaration-Form1.pdf>