

# NON-EMPLOYEE TRAVEL AUTHORIZATION LETTER

The collection, use and disclosure of personal information requested on this form is subject to the provisions of the Freedom of Information and Protection of Privacy Act.

\_\_\_\_\_ of \_\_\_\_\_  
(Name of individual and company if applicable) (Address to which cheque is to be mailed)

\_\_\_\_\_ is required by \_\_\_\_\_  
(Name of ministry contact)

Telephone number: \_\_\_\_\_ to travel to \_\_\_\_\_ for the purpose of \_\_\_\_\_  
(Location)

on \_\_\_\_\_ and will return on \_\_\_\_\_  
Date (YYYY / MMM / DD) Date (YYYY / MMM / DD)

Travel expenses may be claimed on the Ministry form SD2151 (Travel Expenses Reimbursement) for the following:

### TRANSPORTATION

AIR	\$	CAR-RENTAL	\$
FERRY	\$	mileage charge/km...cents	\$
BUS	\$	OTHER	\$

### MEALS (no receipts required)

BREAKFAST	\$	DINNER	\$
LUNCH	\$	OR Up to:	\$ per day

### ACCOMMODATION (please request government rate)

Up to:	\$	per day
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### SUNDRY (Specify)

	\$

Please keep all receipts (meals excluded) for attachment to your claim for reimbursement which should be submitted to your Ministry contact at the address above within five working days of the completion of the travel. Be prepared to show this letter to the management of your hotel/accommodation when requesting the government rate.

SPENDING AUTHORITY	DATE (YYYY / MMM / DD)	RESP. CODE	TELEPHONE #
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