

UNIVERSITY OF WINNIPEG
CLAIM FOR REIMBURSEMENT OF TRAVEL AND PROFESSIONAL DEVELOPMENT ACCOUNT
Pursuant to Clause 32.04
2024-2025

REGULATIONS CONCERNING PROFESSIONAL DEVELOPMENT EXPENSES FOR UWFA-RAS MEMBERS

1. A Member may draw on these funds at any time that the Member has accumulated receipts totaling \$250 or more between April 1 and March 31 to defray their legitimate expenses pursuant to Clause 32.04.
2. Expenditures must relate to the Member's particular current professional and teaching duties and be in the general nature of:
 - a) Computers, iPads/tablets, books, periodicals, materials, supplies or equipment: materials with a continuing value remain the property of the University. No claim should be submitted for materials the Member wishes to keep as their personal property. For computers, we strongly encourage all acquisitions be requested through TSC to ensure support. Please see support guidelines and available computers at [Computers Supported by the Technology Solutions Centre | Tech Sector | The University of Winnipeg \(uwinnipeg.ca\)](https://www.uwinnipeg.ca/financial-services/docs/tpda-eligible-expenses.pdf)
 - b) **TRAVEL EXPENSES: ALL TRAVEL MUST HAVE RECEIVED PRIOR WRITTEN APPROVAL BY THE DEAN/DIRECTOR/UNIVERSITY LIBRARIAN.** IF TRAVEL COSTS ARE BEING CLAIMED, PLEASE COMPLETE AND ATTACH THE **TRAVEL EXPENSE CLAIM FORM** AND SUPPORTING RECEIPTS. You must have the form signed by your Chair or Dean.
 - c) **Please refer to the TPDA Eligible Expenses:**
<https://www.uwinnipeg.ca/financial-services/docs/tpda-eligible-expenses.pdf>

***** ORIGINAL RECEIPTS MUST ACCOMPANY THE CLAIM AND BEAR DATING OF CURRENT FISCAL YEAR
April 1, 2024 – March 31, 2025*** CLAIMS SHOULD BE SUBMITTED TO THE OFFICE OF YOUR FACULTY DEAN.**

Financial Services:

Please reimburse for the total shown to:

Name Department Telephone

covering the following expenses incurred and paid in accordance with the regulations as set out above.

PLEASE PROVIDE AN ITEMIZED LIST OF EXPENSES AND ORIGINAL RECEIPTS.

If the space below is not sufficient, attach an additional page.

RECEIPT ITEMS	REASON/PURPOSE	REIMBURSEMENT AMOUNT (tax incl)	ACCOUNT (5 Digits)	TPDA AWARD (5 digits)
TOTAL				

I hereby certify that the above is a correct statement of expenses and has not been or will not be reimbursed from any other source. This claim pertains to the year ending March 31, 2025.

Date _____

Signature of Claimant

Date _____

Budget Approval
Dean's Office

Cheque # _____ issued _____ for \$ _____

Financial Services