



## EXPENSE FORM

### INSTRUCTIONS:

This form must be typed, except for signatures which may be written digitally. Once completed, send it to [elections@seuo-uosu.com](mailto:elections@seuo-uosu.com).

### SECTION 1: Personal Information

First Name	Last Name
Student Number	uOttawa Email Address
Faculty	Position Being Sought

### SECTION 2: Expense Summary

\$

#### Total Campaign Expenses (CAD)

If you entered an amount greater than \$0 above, do you request reimbursement of that amount?

☐ Yes ☐ No

### SECTION 3: Financial Information

Fill out one row.

Transit #	Institution #	Account #
E-Transfer — Phone Number or Email		

**SECTION 4: Compliance Declaration**

By signing below, you confirm that the information contained within this form is complete and accurate, and that the amount above reflects the total amount of money you have spent on your campaign.

Signature	Date
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*For use by the Elections Office only.*

Reimbursement:	\$
Approved by:	
Signature	Date

Please send this completed form to: [elections@seuo-uosu.com](mailto:elections@seuo-uosu.com)



### ITEMIZED EXPENSES

List all expenses in the table below. The total should equal the amount entered in section 2. Expenses should be reported with any applicable taxes included in the cost. Each item must be accompanied by a receipt for reimbursement. Please attach a scanned copy, clear photo, or screenshot of all receipts with this form, labelled according to the corresponding item number listed on the left side column.

	Date	Expense Type	Vendor	Amount
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				