## MEDIATOR TRAVEL EXPENSES AN ADDENDUM TO SERVICES INVOICE

of Claimant/Medi	ator:								
r No.:									
e Payable To:									
Mailing Address				Mail Cheque To (If Different)					
formed:	MED	IATION TR	AVEL E	XPENS	ES				
e(s):									
Location	Mileage		Meals		Air Fare	Taxi	Lodging	Parking	
From and to eg	(.505/km)	Breakfast (\$9.20)	Lunch (\$11.60)	Dinner (\$20.75)	(receipt required)	(receipt	(receipt required)	(receipt required)	
	x.505 =	(***==)	(******)	(()					
	x.505 =								
	x.505 =								
	x.505 =								
	r No.: e Payable To: J Address formed: e(s): Location	e Payable To: Address formed: <u>MED</u> e(s): <u></u> Location Mileage From and to eg (.505/km) x.505 = x.505 = x.505 =	r No.: e Payable To: Address formed: <u>MEDIATION TR</u> e(s): Location Mileage From and to eg (.505/km) Breakfast (\$9.20) X.505 = X.505 = X.505 = X.505 =	r No.: e Payable To: Address Ma formed: e(s): Location Mileage Meals From and to eg (505/km) Breakfast Lunch (\$9.20) K.505 = K	r No.: e Payable To: Address Mail Chequ formed: MEDIATION TRAVEL EXPENS e(s): Location Mileage Meals From and to eg (.505/km) Breakfast Lunch (\$11.60) From and to eg (.505/km) Breakfast Lunch (\$11.60) X.505 = 1 X.505 = 1	r No.: e Payable To: Address Mail Cheque To (If Diff Median Cheque To (If Diff formed: MEDIATION TRAVEL EXPENSES e(s): Location Mileage Meals Air Fare From and to eg (505/km) Breakfast (s9.20) K.505 =	r No.: e Payable To: Address Mail Cheque To (If Different) formed: MEDIATION TRAVEL EXPENSES e(s): Location Mileage Meals Air Fare Taxi From and to eg (505/km) Breakfast Lunch Dinner (receipt required) From and to eg (505/km) Breakfast Lunch Dinner (receipt required) x.505 = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	r No.: e Payable To: Address Mail Cheque To (If Different)  formed: e(s): Location Mileage Meals Air Fare Taxi Lodging From and to eg (505/km) Breakfast (s9.20) (s11.60) Dinner (receipt (required) required) (s20.75) required (s20.75) (s10.60) (s20.75) (s10.60) (s20.75) (s20.75) (required) (s20.75) (	

Total Travel Claim \$

I, \_\_\_\_\_\_ HEREBY ACKNOWLEDGE AND AGREE THAT ALTHOUGH I AM CLAIMING REMUNERATION FOR SERVICES, I AM NOT AN EMPLOYEE OF THE CLIENT, BUT HAVE PROVIDED THE SERVICES AS AN INDEPENDENT CONTRACTOR.

Signature of Mediator

Date

Additional Notes:

APCMR FORM 004 Generic Invoice for Travel /Expense Reimbursement (March 2015)