Carmacks Recreation Board

Travel Claim

Date:_____

Name of Applicant(s): _____

Contact Person(s): _____

Phone Number: Home _____ Work _____

Travel Dates and Description of Travel:

Date	Travel To (Location)	Is this a return trip? YES ___ NO ___	Total Kms (To be filled out by Rec Board)

Please submit receipts as proof of travel on days claimed for.

The Rec Board is supported by the Lotteries Yukon and the Village of Carmacks