

Huron University College  
**Research Grants - Expenses and Payments**

Name: \_\_\_\_\_

Total Granted: \_\_\_\_\_

Advances (needs Dean's signature) \_\_\_\_\_

Expenses:

Transportation: \_\_\_\_\_

Incidentals: \_\_\_\_\_

Equipment: \_\_\_\_\_

Lodging Costs: \_\_\_\_\_

Other Expenses: (describe) \_\_\_\_\_

Salaries for Assistants: \_\_\_\_\_

Total Per Diem: \_\_\_\_\_

Total Claimed: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Balance Payable:	_____
Conditions:	_____
Signature of Secretary of Research Committee:	_____
Cheque #:	_____
Receipt #:	_____ Account #:

**Notes:**

- 1. Per diem rates must be calculated according to the "Huron Travel Expenses Policy" found at [www.huronuc.ca/Academics/Research](http://www.huronuc.ca/Academics/Research)**
- 2. Grant recipients must submit a written report via email on their research at the time they submit an expense claim specifying how the disbursed funds were spent and attaching relevant receipts.**