



LANGLEY TEACHERS' ASSOCIATION
of the British Columbia Teachers' Federation

LTA Remedy Claim Form

Name:	School:
--------------	----------------

Classroom Resources:

Date of Purchase	Brief Description	Amount
TOTAL		\$

Professional Development

Conference Name:		
Date(s):	Location:	
<i>Expenses being applied for:</i>		
Registration fee(s)	\$	
Other (specify):	\$	
TOTAL		\$

Please attach all receipts for above expenses to this claim. You may email (mail@langleyteachers.com), fax (604-533-1400) or drop off receipts to the LTA office.

FOR OFFICE USE ONLY

Date claim received	
Recorded in Remedy Account Ledger	