

Child Care Receipt Form



The Alberta Union of Provincial Employees
 10025 - 182 ST NW, Edmonton, AB T5S 0P7
 780-930-3300 or 1-800-232-7284

Member Information - Required

| | | | |
|-------------|------------------|-------|---------|
| Member Name | Member ID Number | Local | Chapter |
|-------------|------------------|-------|---------|

Child Care Provider Information - Required

| | | | |
|-----------|-------------|---------|--|
| Name | | Address | |
| City/Town | Postal Code | Phone | |

Childrens' Information

| | |
|-------------|------|
| Child Name: | Age: |
| Child Name: | Age: |
| Child Name: | Age: |
| Child Name: | Age: |

Date & Hours Care Provided

| | Date 1 | Date 2 | Date 3 | Date 4 |
|--------------|--------|--------|--------|--------|
| Date: | | | | |
| Time Starts: | | | | |
| Time Ends: | | | | |
| Total hours: | | | | |
| Total Paid: | | | | |

By our signatures we certify that this is a true detailed account of expenses incurred on Union business.

We understand that incomplete, incorrect, unsigned or unauthorized claim forms will result in a delay or repayment of ineligible expense claims.

 Member Signature

 Child Care Provider Signature

 Date

 Date

***Note: If you have union Time Off on the date which you claim child care, please fill out the back of this form.**



Date & Hours of member's Work Schedule

| | Date 1 | Date 2 | Date 3 | Date 4 |
|--------------|--------|--------|--------|--------|
| Date: | | | | |
| Time Starts: | | | | |
| Time Ends: | | | | |
| Total hours: | | | | |

Reimbursement for Child Care Expenses (Policy 5-20)

AUPE members when attending any union function are to be reimbursed for child care expenses:

For licensed child care centres or babysitters: at the rate of up to \$15 per hour to a maximum of \$195 per day for the first child and up to \$3 per hour for each additional child to a maximum of \$39 per day, per child.

For unlicensed care givers: at the rate of up to \$10 per hour to a maximum of \$100 per day for all children.

1. All claims for reimbursement under this policy must be accompanied by a signed AUPE Child Care receipt form.
2. Reimbursement will not be made for:
 - a) Child care expenses that would have been incurred had that member been performing his/her normal work that day;
 - b) Child care that would normally not have been paid, e.g. Spouse;
 - c) For an in-town delegate after the meeting and/or associated function has concluded.
 - d) Child care expenses for children above age 12.
3. Where extenuating circumstances exist, exceptions may be made with the prior approval of the Executive Secretary-Treasurer, when expenses are paid by Headquarters or when expenses are paid by the Local, the Local Treasurer or Local Executive.
4. AUPE accepts no legal responsibility as to the arrangements made or unintended consequences by the parents or guardians.

The Union reserves the right to examine any and all claims with respect to this policy.

This policy will affect all Locals.

PLEASE NOTE:

Claim forms that are incomplete, incorrect, unsigned or unauthorized will be returned for completion. Properly completed claim forms, accepted by Finance, will be processed for payment within 7-10 business days.