

## On-call PARKING FORM

**INSTRUCTIONS:**

1. This form is to be completed for parking at Hospitals for Residents on-call who are called back to work
2. Provide original receipts
3. Scan a copy of your On-Call Parking Form and all documentation then email to Karen Chow ( [Karen.Chow13@vch.ca](mailto:Karen.Chow13@vch.ca) )
4. Forward signed form to Payroll, 1795 Willingdon Ave, Burnaby, BC V5C 6E3, within 30 days of the completion of travel or the incurrence of the expense, along with all original receipts. Must be sent to payroll to receive reimbursement.

<b>Employee First &amp; Last Name (please print legibly)</b>	<b>Employee ID #</b>	<b>Month</b>	<b>Year</b>

**Employee Address including postal code**

<b>Date</b> <i>MM/DD/YY</i>	<b>Parking</b>	<b>Notes (section for Financial Services only)</b>
	\$ -	<i>Sub-total</i>

*Total Parking*

\$ -

\_\_\_\_\_

**Employee signature**

\_\_\_\_\_

**Manager signature**

\_\_\_\_\_

**Manager Name (please print)**

**This section to be completed by Financial Services**

**Date**