

Medical Services Travel Fund Claim Form

INFORMATION ABOUT YOU	
First Name	Last Name
Street Address	Apartment or Suite #
City, Province	Postal Code
Phone Number	Email Address

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Complete this form in its entirety. Under "Summary of expenses" group together like expenses such as: 1) Travel 2) Accommodations, 3) Meal Per Diem... Submit form with a <u>Dr's referral note</u> and copies of your receipts and/or documents by mail to the address listed below or electronically to the email address listed below.

Summary of expenses	Amount
Total Amount Claimed	

Expenses received after the deadline will not be considered and cannot be carried forward

I certify that all expenses being claimed have been incurred by myself in the year <u>2023</u> and in accordance with the UNBC-FA's policy on the Medical Services Travel Fund. I certify that the information in this form is true and complete and does not contain a claim for any expense previously paid for by this or any other plan.

I understand that it is my responsibility to file my taxes accordingly. Should any tax consequences arise from reimbursement of these expenses, I am responsible for payment of such taxes.

Member's Signature	Date (yyyy-mm-dd)

Email: wendee.copeland@unbc.ca (keep a copy of your claim form and receipts for your records)

Mailing Address: #3085 Admin Building, 3333 University Way, Prince George, BC V2N 4Z9

PURPOSE:

On occasion Members of the Association may be required to travel outside of their Prince George or regional campus communities (as applicable) to seek medical treatment. The Parties agreed through collective bargaining to create a Medical Services Travel Fund (herein called the "Fund") administered by the Association to assist Members of the Association in offsetting costs associated with required medical travel.

FUND VALUE:

Subject to the Fund remaining in the Collective Agreement, and subject to negotiated changes to the Fund through collective bargaining, the Employer will contribute twenty thousand dollars (\$20,000) on July 1, 2023, and twenty five thousand dollars (\$25,000) annually to the Fund in each subsequent year of the Agreement.

SCOPE:

Only the Member's personal expenses are eligible for reimbursement provided the Member is also the patient, or the Member is required to travel where the Member is the attendant of a patient. If the Member is travelling as the attendant, the patient must be an immediate family member. If the Member is required to be the attendant, there is no age limit for a patient requiring an attendant but the reason for the attendant must be of a medical and not a personal nature.

This benefit is not available for expenses incurred for dependents or other family members.

ELIGIBILITY:

Subject to the available Fund amounts and criteria, all employees eligible for membership in the Association shall be eligible to access the Fund. The maximum yearly benefit for a Full-time Member is \$5,000 and for a Part-time Member is \$1,000, pro-rated based on months employed during the claim period.

ELIGIBLE EXPENSES:

Expenses eligible for consideration under the Fund include:

- Reasonable transportation costs incurred by private vehicle, bus, rail, ferry or scheduled air for the Member;
- If a private automobile is used instead of commercial transportation, reimbursement will be at the current UNBC-FA rate in effect at the time to a maximum of return economy airfare;
- Airport Improvement fees may be included as reimbursable expenses;
- Airport limousine service and taxi fees may be included as reimbursable expenses to a maximum of sixty-five dollars (\$65) per claim;
- If a Member chooses to rent a car at the destination, a maximum of sixty-five dollars (\$65) per claim will be reimbursed;
- Accommodation and meals in a commercial establishment for the Member (whether the Member is the patient or attendant) before and after medical treatment is reimbursable up to a maximum of one hundred twenty-five dollars (\$125) per night for accommodation and as per the current UNBC-FA per diem rates for meals. The length of pre and post treatment accommodation stays shall be consistent with direction from the attending physician; and
- The most economical mode of transportation must be used in keeping with the attending physician's medical advice and patient's comfort.
- Transportation within the provinces of British Columbia or Alberta.
- Transportation outside of the provinces of British Columbia or Alberta where pre-approval of the Faculty Association (see "Appeals") is obtained before travel commences.

INELIGIBLE EXPENSES:

Expenses that would be ineligible for reimbursement under the Fund include:

- Dental treatments or services except for dental surgery performed by a member of the College of Dental surgeons;
- Procedures considered not medically necessary by the Medical Services Plan of BC;
- Cosmetic treatments;
- Transportation to a destination outside British Columbia or Alberta where pre-approval has not been obtained before travel commences;
- Expenses without receipts except for automobile mileage reimbursement and meal per diems;
- Expenses that are reimbursed from any other source; and
- Expenses which are not specifically listed as being covered.

DEADLIN TO SUBMIT EXPENSES: The third Friday in January 2024

For further information please review the policy on the UNBC-FA website: https://www.unbcfa.ca/resources

2023 Personal Tax Credits Return

TD1

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions.

Fill out this form based on the best estimate of your circumstances.

If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number
Address	Postal code	For non-residents only	Casial inquirance number
Address	Postal code	Country of permanent resider	Social insurance number
Basic personal amount – Every resident of Canad from all sources will be greater than \$165,430 and you return at the end of the tax year. If your income from a partial claim. To do so, fill in the appropriate section of the calculated amount here. Canada caregiver amount for infirm children und	enter \$15,000, you may ha Il sources will be greater tha Form TD1-WS, Worksheet	ave an amount owing on your inc an \$165,430, you have the option of the 2023 Personal Tax Cred	come tax and benefit n to calculate a its Return, and enter
2006 or later who lives with both parents throughout th parent who has the right to claim the "Amount for an el the child.	e year. If the child does no ligible dependant" on line 8	t live with both parents throughou may also claim the Canada care	ut the year, the egiver amount for
3. Age amount – If you will be 65 or older on Decemb or less, enter \$8,396. You may enter a partial amount calculate a partial amount, fill out the line 3 section of I	if your net income for the year	ear will be between \$42,335 and	\$98,309. To
 Pension income amount – If you will receive regul Pension Plan, Quebec Pension Plan, old age security, \$2,000 or your estimated annual pension income. 	or guaranteed income sup	plement payments), enter which	ever is less:
5. Tuition (full-time and part-time) – Fill in this section certified by Employment and Social Development Cantotal tuition fees that you will pay if you are a full-time of	ada, and you will pay more		
6. Disability amount – If you will claim the disability a Tax Credit Certificate, enter \$9,428.	mount on your income tax a	and benefit return by using Form	T2201, Disability
 7. Spouse or common-law partner amount – Enter to common-law partner is infirm) and your spouse's of following conditions apply: You are supporting your spouse or common-law p 	r common-law partner's est		
Your spouse or common-law partner's net income spouse or common-law partner is infirm)	•	an the amount on line 1 (line 1 plu	us \$2,499 if your
In all cases, go to line 9 if your spouse or common-law	nartner is infirm and has a	a net income for the year of \$26	782 or less
8. Amount for an eligible dependant – Enter the diffe dependant is infirm) and your eligible dependant's est	erence between the amoun	t on line 1 (line 1 plus \$2,499 if y	our eligible
 You do not have a spouse or common-law partne who you are not supporting or being supported by 		common-law partner who does r	not live with you and
 You are supporting the dependant who is related t 	o you and lives with you		
 The dependant's net income for the year will be le you cannot claim the Canada caregiver amount 			
In all cases, go to line 9 if your dependant is 18 years	or older, infirm, and has	a net income for the year of \$26,	782 or less.
9. Canada caregiver amount for eligible dependant year, you support an infirm eligible dependant (aged 1 the year will be \$26,782 or less. To calculate the amount	18 or older) or an infirm sp	ouse or common-law partner wh	ose net income for
10. Canada caregiver amount for dependant(s) age 18 or older (other than the spouse or common-law pa claimed an amount for if their net income were under \$\text{You may enter a partial amount if their net income for out the line 10 section of Form TD1-WS. This workshe with another caregiver who supports the same dependent of older.	rtner or eligible dependant 617,499) whose net income the year will be between \$1 et may also be used to cald	you claimed an amount for on lin for the year will be \$18,783 or le 8,783 and \$26,782. To calculate culate your part of the amount if y	e 9 or could have ess, enter \$7,999. a partial amount, fill ou are sharing it
11. Amounts transferred from your spouse or com their age amount, pension income amount, tuition amounused amount.			
12. Amounts transferred from a dependant – If your benefit return, enter the unused amount. If your or you all of their tuition amount on their income tax and bene	r spouse's or common-law	partner's dependent child or gran	
13. TOTAL CLAIM AMOUNT – Add lines 1 to 12. Your employer or payer will use this amount to determ	ine the amount of your tax	deductions.	



TD1 E (23)

Pro	otected B when complete
Filling out Form TD1	
Fill out this form only if any of the following apply:	
 you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefit or any other remuneration 	ts,
 you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed) you want to claim the deduction for living in a prescribed zone you want to increase the amount of tax deducted at source Sign and date it, and give it to your employer or payer. 	
More than one employer or payer at the same time	
If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on a you cannot claim them again. If your total income from all sources will be more than the personal tax credits you claimed on an this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.	
Total income is less than the total claim amount	
Tick this box if your total income for the year from all employers and payers will be less than your total claim amount on line 13 will not deduct tax from your earnings.	. Your employer or payer
For non-resident only (Tick the box that applies to you.)	
As a non-resident, will 90% or more of your world income be included in determining your taxable income earned in Canada in 2023 Yes (Fill out the previous page.)	3?
No (Enter "0" on line 13, and do not fill in lines 2 to 12 as you are not entitled to the personal tax credits.)	
Call the international tax and non-resident enquiries line at 1-800-959-8281 if you are unsure of your residency status.	
Provincial or territorial personal tax credits return	
You also have to fill out a provincial or territorial TD1 form if your claim amount on line 13 is more than \$15,000. Use the Form TD1 territory of employment if you are an employee. Use the Form TD1 for your province or territory of residence if you are a pensione will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your tax deduction	r. Your employer or payer
Your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal amount if yo personal amount only .	u are claiming the basic
Note: You may be able to claim the child amount on Form TD1SK, 2023 Saskatchewan Personal Tax Credits Return if you are supporting children under 18 at any time during 2023. Therefore, you may want to fill out Form TD1SK even if you are only clai amount on this form.	
Deduction for living in a prescribed zone	
You may claim any of the following amounts if you live in the Northwest Territories, Nunavut, Yukon, or another prescribed norther months in a row beginning or ending in 2023: • \$11.00 for each day that you live in the prescribed northern zone • \$22.00 for each day that you live in the prescribed northern zone if, during that time, you live in a dwelling	n zone for more than six
that you maintain, and you are the only person living in that dwelling who is claiming this deduction Employees living in a prescribed intermediate zone may claim 50% of the total of the above amounts. For more information, go to canada.ca/taxes-northern-residents.	\$
Additional tax to be deducted You may want to have more tax deducted from each payment if you receive other income such as non-employment income from	
CPP or QPP benefits, or old age security pension. You may have less tax to pay when you file your income tax and benefit return by doing this. Enter the additional tax amount you want deducted from each payment to choose this option. You may fill out a new Form TD1 to change this deduction later.	\$
Reduction in tax deductions	
You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed o periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, an amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if y RRSP contributions from your salary.	d tuition and education Source, to get a letter of
Forms and publications	
To get our forms and publications, go to canada ca/cra-forms-publications or call 1-800-959-5525	

Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other federal acts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties, or other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at canada.ca/cra-information-about-programs.

Certification	on	
I certify that	the information given on this form is correct and complete.	
Signature		Date
	It is a serious offence to make a false return.	

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2023 British Columbia Personal Tax Credits Return

TD1BC

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of provincial tax deductions.

Fill out this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee numb	er
Address	Postal code	For non-residents only Country of permanent resider		Social insurance number
1. Basic personal amount – Every person employed this amount. If you will have more than one employer came time" on page 2.				
2. Age amount – If you will be 65 or older on Decembenter a partial amount if your net income for the year volume 2 section of Form TD1BC-WS, Worksheet for the 2	vill be between \$39,994 and 2023 British Columbia Pers	d \$75,814. To calculate a partial sonal Tax Credits Return.	amount, fill out the	
 Pension income amount – If you will receive regul Pension Plan, Quebec Pension Plan, old age security, \$1,000 or your estimated annual pension. 	ar pension payments from or guaranteed income sup	a pension plan or fund (not include plement payments), enter which	ding Canada never is less:	
4. Tuition (full-time and part-time) – Fill out this sect certified by Employment and Social Development Can total tuition fees that you will pay less your Canada Tra	ada, and you will pay more	than \$100 per institution in tuitio		
Disability amount – If you will claim the disability a Tax Credit Certificate, enter \$8,986.	mount on your income tax	and benefit return by using Form	T2201, Disability	
6. Spouse or common-law partner amount – Enter the following conditions apply: • Your spouse or common-law partner lives with your	J		partner and both o	of
Your spouse or common-law partner has a net inc		•	Ф4.000 I	
You may enter a partial amount if your spouse's or cor \$11,285. To calculate a partial amount, fill out the line			\$1,026 and	
 7. Amount for an eligible dependant – Enter \$10,25 conditions apply. You do not have a spouse or common-law partne who you are not supporting or being supported by 	r, or you have a spouse or		-	nd
 The dependant is related to you and lives with you 	ı			
 The dependant has a net income of \$1,026 or less 	s for the year			
You may enter a partial amount if the eligible dependa partial amount, fill out the line 7 section of Form TD1B		r will be between \$1,026 and \$11	,285. To calculate	e a
8. British Columbia caregiver amount – You may clapartner, or an infirm eligible dependant (age 18 or old			common-law	
child or grandchild				
parent, grandparent, brother, sister, uncle, aunt, n	•	•		
The infirm person's net income for the year must be lead TD1BC-WS.	ss than \$22,985. To calcula	ate this amount, fill out the line 8	section of Form	
Amounts transferred from your spouse or comm age amount, pension income amount, tuition amount, amount.				eir
10. Amounts transferred from a dependant – If your benefit return, enter the unused amount. If your or you all of their tuition amount on their income tax and bene	r spouse's or common-law	partner's dependent child or grain		e
11. TOTAL CLAIM AMOUNT – Add lines 1 to 10. Your employer or payer will use this amount to determ	ine the amount of your pro	vincial tax deductions.		

Protected B when completed Filling out Form TD1BC Fill out this form if you have income in British Columbia and any of the following apply: you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other vou want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed) you want to increase the amount of tax deducted at source Sign and date it, and give it to your employer or payer. If you do not fill out Form TD1BC, your employer or payer will deduct taxes after allowing the basic personal amount only. More than one employer or payer at the same time If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1BC for 2023, you cannot claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1BC, check this box, enter "0" on line 11 and do not fill in lines 2 to 10 Total income is less than the total claim amount Tick this box if your total income for the year from all employers and payers will be less than your total claim amount on line 11. Your employer or payer will not deduct tax from your earnings. Additional tax to be deducted If you want to have more tax deducted at source, fill out section "Additional tax to be deducted" on the federal Form TD1. Reduction in tax deductions You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary. Forms and publications

Personal information (including the SIN) is collected for the purposes of the administration or enforcement of the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be used or disclosed for purposes of other federal acts that provide for the imposition and collection of a tax or duty. It may also be disclosed to other federal, provincial, territorial, or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties, or other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada

To get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.

regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Info Source at canada ca/cra-information-about-programs

Date

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