

ELECTION OFFICIAL EXPENSE CLAIM FORM

990 Cedar Street Campbell River B.C. V9W 7Z8

NAME: AMANDA ARRUDA (ASHEIDA)

DATE: Sept 22, 2026

Address:

Purpose of Claim: Mileage from home to training

area D

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
Sept 22, '26	Home address (above) to 990 Cedar St. for training and return.	11			
	01-2-131-320 50%		3.83		
	01-2-640-290 A100 37.5%		2.87		
	01-2-111-320 A155 12.5%		.95		
	SUB-TOTAL	11		\$	\$
	RATE/KM	\$ 0.73	\$ 0.85	n/a	n/a
	TOTAL CLAIM	\$ 8.03	\$	\$	\$

(a) (b) (c) (d)

REFER TO EMPLOYMENT OFFER LETTER FOR TRAVEL CLAIM EXPECTATIONS

- | | |
|-----------------------|-------------------------------|
| 1. Accommodation | Provided |
| 2. Meal Allowance | |
| Rate Breakdown | |
| Breakfast | \$20 |
| Lunch | \$25 |
| Dinner | \$35 |
| 3. All other expenses | Actual cost, provide receipts |

TOTAL (a+b+c+d)	\$ 8.03
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$$\begin{array}{r} 657.38 \\ \hline 7.69 \end{array}$$

NET CLAIM \$ 8.03

"I hereby request payment for expenses incurred as an election worker for the Strathcona Regional District and that I will not be reimbursed for them by any other party."

SIGNATURE OF PERSON MAKING CLAIM

DATE _____

Reviewed & Approved for
Payment

Presiding Election Official

Chief Election Officer

Account No.

Vendor No.

Entered by Mevi



ELECTION OFFICIAL EXPENSE CLAIM FORM

990 Cedar Street Campbell River B.C. V9W 7Z8

NAME: (ASHEIDA) AMANDA ARRUDA

DATE: Oct 7, 2026

Address: [REDACTED]

Purpose of Claim: Mileage, meal allowance

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
Oct 7, 2026	[REDACTED] to Community Center 401 11th Ave. C.R.	9.3	mileage over 10 km only		mileage
	Breakfast allowance			20.	
	lunch allowance			25.	
	dinner allowance			35.	
	01-2-158-290 A001 1020		7.62		
	01-2-131-320 4020		30.47		
	01-2-111-320 A155 1070		7.62		
	01-2-640-290 A001 4020		30.47		
	SUB-TOTAL	9.3		\$ 80	\$
	RATE/KM	\$ 0.73	\$ 0.85	n/a	n/a
	TOTAL CLAIM	\$ 6.79	\$	\$ 80	\$ 86.79
		(a)	(b)	(c)	(d)

REFER TO EMPLOYMENT OFFER LETTER FOR TRAVEL CLAIM EXPECTATIONS

- Accommodation Provided
- Meal Allowance
Rate Breakdown
Breakfast \$20
Lunch \$25
Dinner \$35
- All other expenses Actual cost, provide receipts

TOTAL (a+b+c+d) \$ 86.79 80.00
GST 3.81
76.19

NET CLAIM \$ 86.79 80.00

"I hereby request payment for expenses incurred as an election worker for the Strathcona Regional District and that I will not be reimbursed for them by any other party."

SIGNATURE OF PERSON MAKING CLAIM

DATE

Reviewed & Approved for Payment			Account No.	Vendor No.
	Presiding Election Official	Chief Election Officer		

Entered by Mevi



ELECTION OFFICIAL EXPENSE CLAIM FORM

990 Cedar Street Campbell River B.C. V9W 7Z8

NAME: (ASHEIDA) AMANDA ARRUDA

DATE: Oct 17, 2026

Address: [REDACTED]

Purpose of Claim: Election work

Area D

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
Oct 16	home to ^{from} Oyster River Element.	36.5	✓		
Oct 17	home to ^{from} Oyster River Elementary	36.5	✓		
	Meal allowance			80	
	01-2-131-320 63.47				
	01-2-111-320 A155 15.86				
	01-2-640-290 A001 47.61				
		73			
	SUB-TOTAL	73.92	/	\$ 80	\$ /
	RATE/KM	\$ 0.73	\$ 0.85	n/a	n/a
	TOTAL CLAIM	\$ 53.29	\$ /	\$ 80	\$ /

(a) (b) (c) (d)

REFER TO EMPLOYMENT OFFER LETTER FOR TRAVEL CLAIM EXPECTATIONS

1. Accommodation Provided
2. Meal Allowance
Rate Breakdown
Breakfast \$20
Lunch \$25
Dinner \$35
3. All other expenses Actual cost, provide receipts

TOTAL (a+b+c+d) \$ 133.29

GST 6.35
126.94

NET CLAIM \$ 133.29

"I hereby request payment for expenses incurred as an election worker for the Strathcona Regional District and that I will not be reimbursed for them by any other party."



SIGNATURE OF PERSON MAKING CLAIM

OCT 17, 2026

DATE

Reviewed & Approved for Payment	 Presiding Election Officer	Chief Election Officer	Account No.	Vendor No.
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