



ELECTION OFFICIAL EXPENSE CLAIM FORM

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

NAME:

Lynette Elder

DATE:

Oct 17/26

Address:

[Redacted]

Purpose of Claim:

Election SRD

Quadra

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
Oct 15/26	home to SRD office	10			
Oct 16/26	home to hotel to SRD to hotel	15		35 ✓	
Oct 17/26	hotel to site to hotel	9		20 ✓	
Oct 18/26	hotel to SRD to home	10		35	
Oct 15/26	ferry				23.35
	SUB-TOTAL	44		\$ 115.00	\$ 23.35
	RATE/KM	\$ 0.73	\$ 0.85	n/a	n/a
	TOTAL CLAIM	\$ 32.12	\$	\$ 115.00	\$ 23.35

(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)

\$ 170.47

NET CLAIM

\$

"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]

SIGNATURE OF PERSON MAKING CLAIM

17 Oct 26

DATE

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