Strathcona REGIONAL DISTRICT

ELECTION OFFICIAL EXPENSE CLAIM FORM

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

NAME: Earl Galavan **DATE:** Oct 17/26

Address: [redacted]

Purpose of Claim: Area D

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
Oct 16	Home to Oyster River School RTN	30			
Oct 17	Home to Oyster River School RTN (Beyond 10 Km)	30			
Oct 17	Meal Allowance (3 meals)			80.00	
	SUB-TOTAL	60		$ 80.00	$
	RATE/KM	$ 0.73	$ 0.85	n/a	n/a
	TOTAL CLAIM	$ 43.80	$	$ 80.00	$
		(a)	(b)	(c)	(d)

REFER TO EMPLOYMENT OFFER LETTER FOR TRAVEL CLAIM EXPECTATIONS	
1. Accomodation	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)	$ 123.80

NET CLAIM	$ 123.80

"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 17/26
DATE

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