Strathcona REGIONAL DISTRICT

990 Cedar Street, Campbell River, BC, V9W 7Z8

STAFF EXPENSE CLAIM FORM
EXEMPT STAFF

NAME: Annie Girdler **DATE:** 07/19/2025

ADDRESS: [redacted]

PURPOSE OF CLAIM: Cortes Active Transportation Network Plan Community Engagement

Date	Description of Expense (include from & to" for km's traveled)	Expenses $ Amount	Kilometers Traveled Paved	Unpaved
07/18/2025	Personal vehicle use from SRD to Mansons Landing		40	
07/18/2025	Meal Allowance	125		
07/19/2025	Meal Allowance	125		
07/19/2025	Personal vehicle use from Mansons Landing to Gorge Harbour		12.5	
07/19/2025	Personal vehicle use from Gorge Harbour to SRD		28	
			0	
FORMULAS - PLEASE LEAVE AS IS	SUB-TOTAL	$ 250	80.5	0
	RATE/KM	n/a	$ 0.72	$ 0.84
	TOTAL CLAIM	$ 250.00 (a)	$ 57.96 (b)	$ 0.00 (c)

REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS

1. **Commercial Accommodation => Actual Cost @ Gov't Rates**
2. **Non-Commercial Accommodations => $35/night**
3. **Per Diem & Meal Allowance => $125/day**
   Rate Breakdown:
   - Breakfast -> $20
   - Lunch -> $25
   - Dinner -> $35
   - Incidentals -> $45 (for trips in excess of 24 hrs only)
4. **All other expenses => Actual Cost**

TOTAL EXPENSES (a+b+c)	$ 307.96
Less Advance Acct 01-3-000-649	$
NET CLAIM	$ 307.96

01-2-617-320
A193

"I hereby request reimbursement of these expenses and certify that they were incurred as a result of travel on Strathcona Regional District business and that I will not be reimbursed for them by any other party."

Annie Girdler
SIGNATURE OF PERSON MAKING CLAIM

07/15/2025
DATE

Approved for Payment	Account No.	Vendor No.

Yes.