Strathcona REGIONAL DISTRICT

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

ELECTION OFFICIAL EXPENSE CLAIM FORM

NAME: Lorelei Danko / Johnson.

Address: [redacted]

DATE: SEPT 26/2026

Purpose of Claim: MILAGE.

CR Sportsplex

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
SEPT 26/26	[redacted]	42	x	x	x
	OR - CR and back				
	01-2 131-320 40%		11.68		
	01-2-111-320 A155 10%		2.92		
	01-2-640-290 A001 40%		11.68		
	01-2-158-290 A001 10%		2.92		
	SUB-TOTAL			$	$
	42 RATE/KM	$ 0.73	$ 0.85	n/a	n/a
	TOTAL CLAIM	$ 30.66	$	$	$
		(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

N/A

TOTAL (a+b+c+d)	$ 30.66

GST 1.46
29.20

NET CLAIM	$ 30.66

"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

Entered by Mevi

09/26/26

DATE

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

Strathcona REGIONAL DISTRICT

ELECTION OFFICIAL EXPENSE CLAIM FORM

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

NAME: LORELEI DANKO-JOHNSON DATE: OCT 7/2026

Address: [redacted]

Purpose of Claim: MILAGE / MEAL ALLOWANCE

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
OCT 7/2026	OYSTER RIVER - CAMPBELL RIVER & RETURN	42		YES	—
	BREAKFAST			$20	
	LUNCH			$25	
	DINNER			$35	
	01-2-158-290A001 10%		10.54		
	01-2-131-320 40%		42.16		
	01-2-111-320 A155 10%		10.53		
	01-2-640-290 A001 40%		42.16		
	SUB-TOTAL	42		$	$
	RATE/KM	$ 0.73	$ 0.85	n/a	n/a
	TOTAL CLAIM	$ 30.66 (a)	$ X (b)	$ 80.00 (c)	$ X (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)	$110.66
GST 5.27	
105.39	
NET CLAIM	$110.66

"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."

Lorelei danko-johnson
SIGNATURE OF PERSON MAKING CLAIM

OCT 7/2026
DATE

Reviewed & Approved for Payment	Presiding Election Official	Chief Election Officer	Account No.	Vendor No.
	Lorelei danko-johnson	d watson		

Entered by Mevi

Strathcona REGIONAL DISTRICT

ELECTION OFFICIAL EXPENSE CLAIM FORM

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

NAME: LORELEI DANKO-JOHNSON DATE: Oct 14TH 2026

Address: [redacted]

Purpose of Claim: EXPENSES.

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
Oct 14th '26	16 EACH WAY. = 32	32 ✓		[redacted]	
	BREAKFAST			20 ✓	
	LUNCH			25 ✓	
	DINNER			35 ✓	
Meal Allowance & Travel	= 01-2-131-320 -40%	39.38			
	01-2-111-320 A155 -10%	9.84			
	01-2-640-290 A001 -40%	39.38			
	01-2-158-290 A001 -10%	9.84			
	SUB-TOTAL	32		$ 80	$
	RATE/KM	$ 0.73	$ 0.85	n/a	n/a
	TOTAL CLAIM	$ 23.36	$	$ 80	$
		(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)	$ 103.36
GST 4.92	
98.44	
NET CLAIM	$ 103.36

"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."

Lorelei Danko-Johnson

SIGNATURE OF PERSON MAKING CLAIM

Oct 14th 2026

DATE

Reviewed & Approved for Payment	Presiding Election Official	Chief Election Officer	Account No.	Vendor No.
	Kay Lyzell	L Watson		

Strathcona REGIONAL DISTRICT

ELECTION OFFICIAL EXPENSE CLAIM FORM

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

NAME: LORELEI DANKO JOHNSON **DATE:** Oct 17 2026

Address: [redacted]

Purpose of Claim: EXPENSES

Sportsplex

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
Oct 17	16 KM EACH WAY / 32 KM	✓			
	BREAKFAST			20	
	LUNCH			25	
	DINNER			35	
	23.36 SUB-TOTAL	[redacted]		$ 80	$
	RATE/KM	$ 0.73	$ 0.85	n/a	n/a
	TOTAL CLAIM	$ 23.36	$	$ 80	$
		(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)	$ 103.36
NET CLAIM	$ 103.36

"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."

Lorelei Danko Johnson — Oct 17 2026

SIGNATURE OF PERSON MAKING CLAIM — DATE

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