Strathcona
REGIONAL DISTRICT

301-990 Cedar Street, Campbell River, BC, V9W 7Z8

STAFF EXPENSE CLAIM FORM

NAME: Louis Short DATE: 2026-10-19

ADDRESS: [redacted]

PURPOSE OF CLAIM: Reimbursement for expenses Frank and Pat retirement party

EXPENSES

Date	Description of Expense	Subtotal	GST	Total
	Photo Album	$ 27.99		$ 27.99
	Cake	$ 75.00		$ 75.00
	PST	$ 1.96		$ 1.96
			$ 1.40	$ 1.40
				$ 0.00
				$ 0.00
				$ 0.00
FORMULAS - PLEASE LEAVE AS IS	SUB-TOTAL	$ 104.95	$ 1.40	$ 106.35

MILEAGE

Date	Details of Travel (attach Google Map Printout; or equivalent)		Kilometers Traveled Unpaved	Paved
FORMULAS - PLEASE LEAVE AS IS		TOTAL KM	0.0	0.0
		RATE/KM	$ 0.85	$ 0.73
		SUBTOTAL	$ -	$ -
		GST	$ -	$ -
		SUBTOTAL	$ 0.00	$ 0.00

REFER TO PURCHASING POLICY FOR CLAIM EXPECTATIONS

1. **Commercial Accommodation => Actual Cost @ Gov't Rates**
2. **Non-Commercial Accommodations => $35/night**
3. **Per Diem & Meal Allowance => $115/day**
   Maximum Rate Breakdown:
   - Breakfast -> $20
   - Lunch -> $25
   - Dinner -> $35
   - Incidentals -> $35 (for trips in excess of 24 hrs only)
4. **All other expenses => Actual Cost**

SUBTOTAL	$ 104.95
GST	$ 1.40
TOTAL	$ 106.35

Entered by Mevi

"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."

SIGNATURE OF PERSON MAKING CLAIM

Oct 19/26
DATE

Approved for Payment	Account No. 01-2-245-281	Vendor No.