2710

Strathcona
REGIONAL DISTRICT

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

STAFF EXPENSE CLAIM FORM
EXEMPT STAFF

NAME: MJ Tholl

DATE: May 10, 2026

ADDRESS: [redacted]

PURPOSE OF CLAIM: Emergency prep week FA Milage

Date	Description of Expense (include from & to" for km's traveled)	Expenses $ Amount	Kilometers Traveled Paved	Unpaved
May 1st, 2026	Ferry from CR to Quadra, gas to dock	$35.30	31Km	8Km
May 3rd, 2026	Hoskin dock to Camp Homewood		15Km	8Km
May 4th, 2026	Camp Homewood to Campbell River		17Km	
May 5th, 2026	Campbell River to Zeballos		162Km	40Km
May 7th, 2026	Zeballos to Campbell River		162Km	40Km
May 7th, 2026	Campbell River to Sayward and back		192Km	
FORMULAS - PLEASE LEAVE AS IS	SUB-TOTAL	$ 35.30	579km 0	96km 0
	RATE/KM	n/a	$ 0.73	$ 0.85
	TOTAL CLAIM	$ 35.30 0	$ 422.67 0	$ 81.60 0
		(a)	(b)	(c)

(a+b+c)

TOTAL EXPENSES	$ 539.57 0
Less Advance Acct 01-3-000-649	$
NET CLAIM	$ 539.57 0

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

"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

May 10, 2026
DATE

Approved for Payment

Account No. 01-2-272-3200 Vendor No.