Strathcona
REGIONAL DISTRICT

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

STAFF EXPENSE CLAIM FORM
EXEMPT STAFF

NAME: Haven Ullstrom

DATE: 04/22/2026

ADDRESS:

PURPOSE OF CLAIM: FireSmart Conference Expenses - Victoria

Date	Description of Expense (include from & to" for km's traveled)	Expenses $ Amount	Kilometers Traveled Paved	Unpaved
04/07/2026	Dinner - Pita Pit	14.58		
04/08/2026	Dinner - MAiiZ Nixtamal Eatery & Tortilleria	60.83		
04/09/2026	Dinner - Noodlebox	23.29		
	PST 0.64			
	GST 4.57			
FORMULAS - PLEASE LEAVE AS IS	SUB-TOTAL	$ 98.7	0	0
	RATE/KM	n/a	$ 0.73	$ 0.85
	TOTAL CLAIM	$ 98.70	$ 0.00	$ 0.00
		(a)	(b)	(c)

(a+b+c)

TOTAL EXPENSES	$ 98.70
Less Advance Acct 01-3-000-649	$
NET CLAIM	$ 98.70

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."

B Logan on behalf of H. Ullstrom 4/22/26
SIGNATURE OF PERSON MAKING CLAIM — no access to printer/scanner — DATE

Approved for Payment Steven		01-2-273-326 M361 Account No.	Vendor No.

M361