



ELECTION OFFICIAL EXPENSE CLAIM FORM

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

NAME: HARLEY WIEBE

DATE: OCT 17, 2026

Address:

Purpose of Claim: VOTING DAY

Community Hall

Date	Description (include from & to for km's travelled)	Kilometers Traveled		Meal Allowance	Other expense
		Paved	Unpaved		
OCT 17/26	Home to CRCC RETURN	15.4			
OCT 17/26	BREAKFAST			\$ 20.00	
OCT 17/26	LUNCH			\$ 25.00	
OCT 17/26	DINNER			\$ 35.00	
	SUB-TOTAL	15.4		\$ 80.00	\$
	RATE/KM	\$ 0.73	\$ 0.85	n/a	n/a
	TOTAL CLAIM	\$ 11.24	\$	\$ 80.00	\$

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)	\$ 91.24
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NET CLAIM	\$ 91.24
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"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

DATE _____

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