



#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8

DIRECTOR EXPENSE CLAIM FORM

 ADVANCE
 CLAIM

 NAME: Claire Moglove

 Address: [REDACTED]

 Purpose of Travel: Attend NI 911 meetings

 Dates of Travel: Jan 31/20; Mar 13/20; Nov 6/20
KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
31/1/20	CR	Courtney	NI 911	90	
13/3/20	CR	Courtney	NI 911	90	
6/11/20	CR	Courtney	NI 911	90	

TOTAL DISTANCE TRAVELED	270 KM	KM
RATE PER KM (2020 CRA rate/BL167)	\$0.59 / KM	\$0.71 / KM
TOTAL DISTANCE EXPENSE	\$ 159.30	\$
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A) \$ 159.30	

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period) \$125/24 hrs
 * less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$ 159.30
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	\$
NET CLAIM	\$ 159.30
Verified by:	iw

I hereby certify that the expenses and expenditures detailed on this claim qualify for reimbursement and were incurred by me as a result of Strathcona Regional District business as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

SIGNATURE OF PERSON MAKING CLAIM

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

[illegible]