

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

ADVANCE

CLAIM

 NAME: Claire Moglove

Address:

 Purpose of Travel: North Island 911 meeting

 Dates of Travel: Feb 1/2019 and March 15/2019
KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
Feb 1/2019	CR	Courtenay	NI 911 meeting	102	
Mar 15/2019	CR	Courtenay	NI 911 Meeting	102	

TOTAL DISTANCE TRAVELED	204 KM	KM
RATE PER KM (2019 CRA rate/BL167)	\$0.58 / KM	\$0.70 / KM
TOTAL DISTANCE EXPENSE	\$ 118.32	\$
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A) \$ 118.32	

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates
Non-Commercial Accommodation	\$35/night
2. Overnight travel per diem (24 hour period) (less meals provided)	\$75/24 hrs
3. Meal Charges (not overnight)	Breakfast - \$18 Lunch - \$20 Dinner - \$25
4. Other allowable expenses (with receipts)	Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$ 118.32
LESS ADVANCE	\$
ACCOUNT No. 013000649	
NET CLAIM	\$ 118.32
Verified by:	<u>W</u>

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.

Claire Moglove
 SIGNATURE OF PERSON MAKING CLAIM

March 17/2019
 DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____

DIRECTOR EXPENSE CLAIM FORM

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

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[illegible]

#301 - 980 Cedar Street, Campbell River, BC V8W 7Z8

DIRECTOR EXPENSE CLAIM FORM



NAME: Clair Maglow
Address: [REDACTED]
Purpose of Travel: NI 911 meeting
Dates of Travel: May 10/2019

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
May 19 2019	CR	Courtenay	NI 911	53 x 2 106	

TOTAL DISTANCE TRAVELED	KM	KM
RATE PER KM (2019 CRA rate/BL167)	\$0.58 / KM	\$0.70 / KM
TOTAL DISTANCE EXPENSE	\$ 86.48	\$
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A) \$ 61.48	

PURSUANT TO SRD REMUNERATION BYLAW #167 & BYLAW #359

1. Commercial Accommodation Actual Cost @ Gov't rates

2. Non-Commercial Accommodation \$35/night

3. Municipal Director - Overnight travel per diem (24 hour period) \$75/24 hrs
Electoral Area Director - Overnight travel per diem (24 hour period) \$125/24 hrs (less meals provided)

3. Meal Charges (not overnight) Breakfast - \$15
Lunch - \$20
Dinner - \$25

4. Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$ 61.48
LESS ADVANCE	\$
ACCOUNT No. 013000649	
NET CLAIM	\$
Verified by:	

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 Bylaw #359 and that I will not be reimbursed for them by any other party.

Clair Maglow
SIGNATURE OF PERSON MAKING CLAIM

Sept 11/2019
DATE

ACCOUNT NO. 012 - 100 - 321 CC1
130-321
XT080 - 29.28
XT080 - 29.27

DIRECTOR EXPENSE CLAIM FORM

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[illegible]

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

RECEIVED
DIRECTOR EXPENSE CLAIM FORM
DEC 5 2019
ADVANCE CLAIM
Strathcona Regional District

NAME: Claire Merglove
Address: [REDACTED]
Purpose of Travel: NI 911 CORA Meeting
Dates of Travel: OCT 4/2019

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
Oct 4/2019	Campbell River	Comox	NI 911 meeting	51	

TOTAL DISTANCE TRAVELED	KM	KM
RATE PER KM (2019 CRA rate/BL167)	\$0.58 / KM	\$0.70 / KM
TOTAL DISTANCE EXPENSE	\$ 29.58	\$
TOTAL EXPENSES	(A) \$ 29.58	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167 & BYLAW #359

1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$35/night
3. Municipal Director - Overnight travel per diem (24 hour period)	\$75/24 hrs
Electoral Area Director - Overnight travel per diem (24 hour period)	\$125/24 hrs
(less meals provided)	
3. Meal Charges (not overnight)	Breakfast - \$15 Lunch - \$20 Dinner - \$25
4. Other allowable expenses (with receipts)	Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01300049	
NET CLAIM	\$ 29.58
Verified by:	<u>W</u>

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 Bylaw #359 and that I will not be reimbursed for them by any other party.

Claire Merglove
SIGNATURE OF PERSON MAKING CLAIM

Dec 4/2019
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____

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G:\Templates\Directors\Director Expense Claim Jan 28 2019