

STAFF TRAVEL FORM

301 - 990 Cedar Street Campbell River B.C. V9W 7Z8

ADVANCE CLAIM

NAME: Elaine Popove **DATE:** Feb 13/20
Address: SRD Corporate Office
Purpose of Travel: Professional Development - PADM 200
Dates of Travel: Jan 9 - 11/20 & Feb 6 - 8/20

DATE	LOCATION AND DESCRIPTION OF FUNCTION	EXPENSE DETAIL (Hotel, Ferry, Airfare, Meals)	AMOUNT
09-Jan	Dinner Per Diem	Meals	\$25.00
10-Jan	Full Day Per Diem	Meals	\$75.00
11-Jan	Full Day Per Diem	Meals	\$75.00
06-Feb	Dinner Per Diem	Meal	\$25.00
07-Feb	Full Day Per Diem	Meals	\$75.00
08-Feb	Full Day Per Diem	Meals	\$75.00

TOTAL **\$350.00**

REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS	
1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$35/night
3. Per Diem and Meal Allowance	\$75/day
Rate breakdown	
Breakfast - \$15	
Lunch - \$20	
Dinner - \$25	
Incidentals - \$15 (for trips in excess of 24 hours only)	
4. All other expenses	Actual Cost

CARRY FORWARD OF AUTOMOBILE DISTANCE EXPENSES (B)	\$250.75
TOTAL EXPENSES (A + B)	\$600.75
LESS ADVANCE ACCOUNT No. 01-3-000-649	\$0.00
NET CLAIM	\$600.75

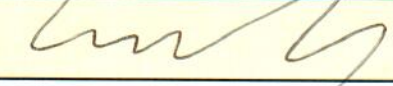
"I hereby request reimbursement of these expenses and certify that they were incurred as a result of travel on Strathcona Regional District business and that I will not be reimbursed for them by any other party."



 SIGNATURE OF PERSON MAKING CLAIM

Feb. 13/20

 DATE

APPROVED FOR PAYMENT 	ACCOUNT No. <u>01-2-118-320 A#66</u>	VENDOR No.
--	--------------------------------------	------------

STAFF TRAVEL FORM

301 - 990 Cedar Street Campbell River B.C. V9W 7Z8

ADVANCE

CLAIM

NAME: Elaine Popove **DATE:** Mar 5/20

Address: SRD Corporate Office - Comms Department

Purpose of Travel: Professional Development / Public Hearing Support


Dates of Travel: Feb 23 - 25 and Feb 26

DATE	LOCATION AND DESCRIPTION OF FUNCTION	EXPENSE DETAIL (Hotel, Ferry, Airfare, Meals)	AMOUNT
Feb 23 - 25	Vancouver - BC Communications Forum (Professional Development)		
	Sun Feb 23	Dinner Per Diem	\$35.00 ✓
	Mon Feb 23	Dinner & Incidentals Per Diem	\$80.00 ✓
	Tues Feb 24	Dinner & Incidentals Per Diem	\$80.00 ✓
		01-2-118-320-A066	
26-Feb	Area D Public Hearing Support	Dinner Per Diem	\$35.00 ✓
		01-2-500- 284 320	
		-N290	
TOTAL			\$230.00

REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS	
1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$35/night
3. Per Diem and Meal Allowance	\$125/day
Rate breakdown	
Breakfast - \$20	
Lunch - \$25	
Dinner - \$35	
Incidentals - \$45 (for trips in excess of 24 hours only)	
4. All other expenses	Actual Cost

CARRY FORWARD OF AUTOMOBILE DISTANCE EXPENSES (B)	\$0.00
TOTAL EXPENSES (A + B)	\$230.00
LESS ADVANCE ACCOUNT No. 01-3-000-649	\$0.00
NET CLAIM	\$230.00


"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

Mar 5/20

 DATE

APPROVED FOR PAYMENT 	ACCOUNT No. <u>see above.</u>	VENDOR No.
--	-------------------------------	------------