

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

Constituency Expenses

 ADVANCE
 CLAIM

 NAME: Gerald Whalley

 Address: [REDACTED]

Purpose of Travel: _____

Dates of Travel: _____

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
TOTAL DISTANCE TRAVELED (KM)				0	0
RATE PER KM (2016 CRA rate/BL167)				\$0.65 / KM	\$0.67 / KM
TOTAL DISTANCE EXPENSE				\$0.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED) (A)				\$0.00	


PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$36/night
3. Overnight travel per diem (24 hour period) (less meals provided)	\$75/24 hrs
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)	\$116.49
TOTAL EXPENSES (A + B)	\$ 116.49
LESS ADVANCE ACCOUNT No. 013000549	\$
NET CLAIM	\$ 116.49
Verified by:	<i>W</i>

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.

Gerald Whalley
 SIGNATURE OF PERSON MAKING CLAIM

September 19, 2018

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____

DIRECTOR EXPENSE CLAIM FORM

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

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

Regional Expenses

ADVANCE

CLAIM

 NAME: Gerald Whalley

 Address: [REDACTED]

 Purpose of Travel: Regional District Board and Committee meetings.

 Dates of Travel: September 05 to 19, 2018
KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	(Return)	
				Distance on Paved	Distance on Unpaved
5-Sep-2018	Sayward	Campbell River	Cortez Is. Public Hearing	150	
19-Sep-2018	Sayward	Campbell River	EASC and SRD Board meetings	150	
TOTAL DISTANCE TRAVELED (KM)				300	0
RATE PER KM (2018 CRA rate/BL167)				\$0.55 / KM	\$0.57 / KM
TOTAL DISTANCE EXPENSE				\$165.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED) (A)				\$165.00	


PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$35/night
3. Overnight travel per diem (24 hour period) (less meals provided)	\$75/24 hrs
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)	\$0.00
TOTAL EXPENSES (A + B)	\$ 165.00
LESS ADVANCE	\$
ACCOUNT No. 013000649	
NET CLAIM	\$ 165.00
Verified by:	<i>W</i>

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

September 19, 2018

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____

DIRECTOR EXPENSE CLAIM FORM

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

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


Regional Expenses
DIRECTOR EXPENSE CLAIM FORM

 ADVANCE
CLAIM

 NAME: Gerald Whalley

 Address: [REDACTED]

 Purpose of Travel: Regional District Board and Committee meetings.

 Dates of Travel: October 10 to 25, 2018
KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	(Return)	
				Distance on Paved	Distance on Unpaved
10-Oct-2018	Sayward	Campbell River	EASC & SRD Board meetings	150	
25-Oct-2018	Sayward	Campbell River	SRD Board & Litigation Com.	150	
TOTAL DISTANCE TRAVELED (KM)				300	0
RATE PER KM (2018 CRA rate/BL167)				\$0.55 / KM	\$0.57 / KM
TOTAL DISTANCE EXPENSE				\$165.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED) (A)				\$165.00	

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$35/night
3. Overnight travel per diem (24 hour period) (less meals provided)	\$75/24 hrs
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)	\$0.00
TOTAL EXPENSES (A + B)	\$ \$165.00
LESS ADVANCE	\$
ACCOUNT No. 013000649	
NET CLAIM	\$ \$165.00
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.

SIGNATURE OF PERSON MAKING CLAIM

October 25, 2018

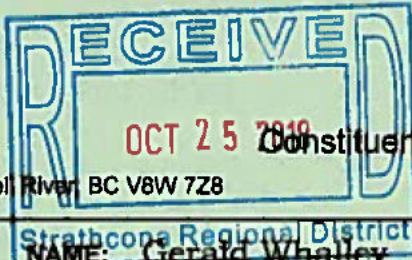
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____

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



DIRECTOR EXPENSE CLAIM FORM

Constituency Expenses

ADVANCE
CLAIM

Strathcona Regional District

NAME: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
TOTAL DISTANCE TRAVELED (KM)				0	0
RATE PER KM (2016 CRA rate/BL167)				\$0.55 / KM	\$0.67 / KM
TOTAL DISTANCE EXPENSE				\$0.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED) (A)				\$0.00	

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$38/night
3. Overnight travel per diem (24 hour period) (less meals provided)	\$75/24 hrs
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)	\$83.42
TOTAL EXPENSES (A + B)	\$ \$83.42
LESS ADVANCE	\$
ACCOUNT No. 013000640	\$
NET CLAIM	\$ \$83.42
Verified by:	W

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.

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

October 25, 2018

DATE

ACCOUNT NO. 012 - - CC1

DIRECTOR EXPENSE CLAIM FORM

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

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