

STAFF TRAVEL FORM

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

ADVANCE

CLAIM

NAME: Debra Wilson DATE: May 13' 2019
 Address: on file
 Purpose of Travel: BCRPA Symposium
 Dates of Travel: April 30 - May 3rd 2019

DATE	LOCATION AND DESCRIPTION OF FUNCTION	EXPENSE DETAIL (Hotel, Ferry, Airfare, Meals)	AMOUNT
April 30	Travel Day	Lunch/Dinner	\$45.00
May 1	BCRPA Symposium	Breakfast/Dinner/Incidentals	\$55.00
May 2	" "	Incidentals	\$15.00
May 3	" " 1/2 travel home	Lunch/Incidentals	\$35.00

TOTAL \$150.00 \$0.00

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)	\$0.00
TOTAL EXPENSES (A + B)	\$0.00
LESS ADVANCE	
ACCOUNT No. 01-3-000-849	\$0.00
NET CLAIM	\$150.00 \$0.00

"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]
SIGNATURE OF PERSON MAKING CLAIM

May 13' 2019
DATE

APPROVED FOR PAYMENT	<u>[Signature]</u>	ACCOUNT No. <u>01-2-640-319</u>	VENDOR No. <u>320</u>
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STAFF TRAVEL FORM

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

ADVANCE

CLAIM

NAME: Debra Wilson **DATE:** _____
Address: _____
Purpose of Travel: ATRI recertification - Seattle (Aquatic Therapy & Research Institute)
Dates of Travel: Friday Oct. 18 - Monday Oct. 21 2019

DATE	LOCATION AND DESCRIPTION OF FUNCTION	EXPENSE DETAIL (Hotel, Ferry, Airfare, Meals)	AMOUNT
Fri Oct. 18 '19	Travel from Victoria to Pt. Angeles	Ferry	on VISA
" " "	Travel from Kingston - Edmonds USA	Ferry	\$21.23
" " "	Per Diem		\$75.00
" " "	Seattle Parking	@ hotel	\$6.73
" " "	Seattle Parking	@ hotel	\$6.73
Sat. Oct. 19 '19	Seattle Parking	@ hotel	\$32.34
" " "	Per Diem		\$75.00
Sun. Oct. 20 '19	Seattle hotel @ Virginia Mason Hospital	The Baroness Hotel	\$446.14
Sun. Oct. 20 '19	Moved north - less expensive for last night	Best Western Lynnwood	\$131.58
" " "	Per Diem		\$75.00
Mon. Oct. 21 '19	Travel Edmonds - Kingston USA	Ferry	\$21.23
" " "	Pt. Angeles - Victoria	Ferry	\$89.46
TOTAL			\$905.44

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)		\$0.00
TOTAL EXPENSES (A + B)	\$522 ⁵⁵	\$87.00
LESS ADVANCE		
ACCOUNT No. 01-3-000-849		\$0.00
NET CLAIM	\$1427 ⁴⁴	\$992.44

"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]
SIGNATURE OF PERSON MAKING CLAIM

Nov 4 2019
DATE

APPROVED FOR PAYMENT	01-2-640-320	
<u>[Signature]</u>	ACCOUNT No.	VENDOR No.

X. Spuak Nov 29/2019

SCANNED

45T on \$312.00 14.86
YES

