**Form 115-1** 17120

**Battle River School Division**

## EXPENSE CLAIM

**Name:** Zsuzsanna Hemperger **Mailing Address:**

*n/a if direct deposit established; attach bank info to set-up*

**Month/Year:** November 2017

**School/Location:** **PUF Student Name:**

*required for PUF Transportation claims*

**IMPORTANT:**

Expense Claim must be submitted to Division Office **WITHIN TWO MONTHS** from the end of the month the claim is for. Expenses submitted after this date will **NOT** be reimbursed.

**ORIGINAL EXPENSE CLAIMS** are required for payment. Copies, including forms sent via fax/email, will not be processed.

**BUS DRIVERS** -- Do **NOT** claim field trip expenses (**claim on the applicable "Trip Report" form**).

| Date (YYYY Month DD) | Description | Kms | .54 x Kms | ~~Meals~~ | Other medical renewal, PUF set rate, etc | Total | Account Code |
|---|---|---|---|---|---|---|---|
| 2017 Nov. 14 | Engagement Session Calgary | 337 x 2 = 654,2 | 353,27 | 16.82 | | ~~353,27~~ 353,27 | 1.404.400.09.260 |
| 2017 Nov. 14. | Engagement Session Calgary | 40 | 64,80 | 6.39 | Motel 139,22 | 139,22 | |
| 2017 Nov. 19 | A.S.B.A mileage | 60 x 2 120 | 64,80 | 3.09 | | 64,80 | |
| 2017 Nov 19-27 | A.S.B.A Hotel | | | 29.58 | 676.53 | 676,53 | |
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PAID DEC 18 2017

POSTED DEC 11 2017

*Attach original receipts for expenses claimed*

**TOTAL** 1233.82

OFFICE USE ONLY

**Total GST:** 55.88

MEAL ALLOWANCE

Breakfast: $9.00

Lunch: $11.50

Dinner: $18.00