Form 115-1 180501

Battle River School Division

EXPENSE CLAIM

Name: Brett Huculak

Mailing Address: n/a if direct deposit established; attach bank info to set-up

Month/Year: April /2018

School/Location: Division Office

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
2018/04/11-12	Human Resources	576	311.04			311.04	1.404.400.00.00.01
	Conference Calgary						
2018/04/13	TEBA Meeting	146	78.84			78.84	
	Nisku						
		722km					
					TOTAL	389.88 (c)	

PAID MAY 14 2018

Attach original receipts for expenses claimed

OFFICE USE ONLY

Total GST:

MEAL ALLOWANCE

Breakfast: $9.00

Lunch: $11.50

Dinner: $18.00