

Battle River School Division EXPENSE CLAIM

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

Month/Year: January

School/Location: Division Office Student Name: _____
for Transportation claims (PUF / International Students)

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).

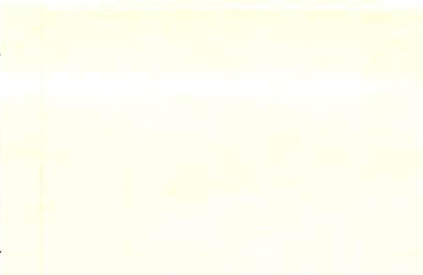
INTERNATIONAL STUDENT PROGRAM -- claim mileage/parking only; reimbursement requires original parkade receipt.

Date (YYYY Mon DD)	Description	Kms	.58 x Kms	Meals	Other medical renewal, PUF set rate, parking, etc	Total	Account Code
2020 01 10	Red Deer Aspiring Leaders	294	170.52			170.52	1-404-400-00-00-01
2020 01 21	ATA MTG - Daysland	84	48.72			48.72	1-404-400-00-00-01
2020 01 27	Camrose to EDM	100	58.00			58.00	1-384-300-00-11-50
	EDM - Calgary	300	174.00			174.00	1-384-300-00-11-50
2020 01 28	Calgary to Camrose	288	167.04			167.04	1-384-300-00-11-50
2020 01 29	Camrose to Pigeon Lake	100	58.00			58.00	1-404-400-00-00-01
2020 01 31	Pigeon Lake to Camrose	100	58.00			58.00	1-404-400-00-00-01
2020 01 21	Airfare to Brazil	<u>1266</u>		<u>1.50</u>	4338.06	4,338.06	1-304-700-00-00-51

Attach original receipts for expenses claimed

TOTAL **5,072.34**

Signature: _____
Authorized By (Name): _____
Authorized By (Signature): _____



OFFICE USE ONLY
Total GST: **36.47**

MEAL ALLOWANCE
Breakfast: \$11.00
Lunch: \$15.00
Dinner: \$23.50