## **Battle River School Division**

## **EXPENSE CLAIM**

EXPENSE CLAIM							
Name:	Doug Algar		Mailing Address:		n/a if direct done		
Month/Year:	June 2022					пла п апест аеро	sit established; attach bank info to set-up
School/Location:	BRSD			Student	11	f T	The state of the s
(A)	must be submitted to Division			OM OW			on claims (PUF / International Students)  ne month the claim is for.
ORIGINAL EXP	PENSE CLAIMS are required	d for payr	ment. Cop	oies, inclu	ding forms s	sent via fax/	email, will not be processed.
BUS DRIVERS	Do NOT claim field trip ex	penses (	claim on	the appli	cable "Trip	Report" fo	rm).
INTERNATION	AL STUDENT PROGRAM	- claim m	ileage/par	king only;	reimbursen	nent require	s <b>original</b> parkade receipt.
Date (YYYY Mon DD)	Description	Kms	.58 x Kms	Meals	Other medical renewal, PUF set rate, parking, etc	Total	Account Code
2022 Jun 5-7	SGM milege (2x134)	268				155,44	16.22
	Hotel				35356	353.56	•
2022 Jun 5	Rural Caucus with Penheld						
	(from hotel)	23				13.34	
2022 Jun 15	School tours	164				95.12	
2022 Jun 23	School tours	209				121.22	
	664 kme	0.5	8= 3	85-1	2 =	18.34	
Attach original receipts for expenses claimed					TOTAL	738,68	
	Signature:						OFFICE USE ONLY Total GST: 34.56
	Authorized By (Name): Authorized By (Signature):						MEAL ALLOWANCE Breakfast: \$11.00 Lunch: \$15.00 Dinner: \$23.50
	Additionized by (Signature):						Diffici. \$23.00