EXPENSE CLAIM FORM - WITH GL CODING

**Task ID: 0000067843 - Created: 20-Dec-2022 08:50.34 AM - By: Imogene Walsh - Processed: 21-Dec-2022 02:16.16 PM - By: Imogene Walsh**

# Battle River School Division
## EXPENSE CLAIM FORM

**Name:** Walsh, Imogene I (11076) **Location:** Division Office **Month:** December

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

Please ensure **ALL** receipts are attached to your claim.

**Bus Drivers:** Do **NOT** claim field trip expenses (claim on the applicable "Trip Report" form).

## Other Expenses:
### (Please Attach Receipts)

| Date | Department | Vendor | Particulars | Books | Enter GST on Invoice | Total Invoice Amount |
|---|---|---|---|---|---|---|
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| | | | | **Subtotals** | 0.00 | 0.00 |

## REGULAR BUSINESS EXPENSES

**Mileage and Meal Information:** *Check this box if your mileage claim for the calendar year **exceeds 5,000 KMS** ☐

| Date (YYYYMMDD) | Purpose | From/To Destination | Km's Round Trip | One Way Only | Total KMs | Total Mileage Expense | Breakfast | Lunch | Dinner |
|---|---|---|---|---|---|---|---|---|---|
| 15-Dec-2022 | Admin Mtg CWS/Hardisty | Camrose/Hardisty/Tofield/Camrose | 303 | ☐ | 303.00 | 175.74 | ☐ 11.00 | ☐ 15.00 | ☐ 23.50 |
| 19-Dec-2022 | Admin Mtg Killam/Bawlf | Camrose/Killam | 146 | ☐ | 146.00 | 84.68 | ☐ 11.00 | ☐ 15.00 | ☐ 23.50 |
| | | | | ☐ | 0.00 | 0.00 | ☐ | ☐ | ☐ |
| | | | | ☐ | 0.00 | 0.00 | ☐ | ☐ | ☐ |
| | | | | ☐ | 0.00 | 0.00 | ☐ | ☐ | ☐ |

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| | | 0.00 | 0.00 | | | |
| | | 0.00 | 0.00 | | | |
| | **Subtotals** | **449.00** | **260.42** | **0.00** | **0.00** | **0.00** |

## Totals

For Office Use Only:

| | |
|---|---|
| Total Subsistence GST Auto Calculation | **12.40** |
| Total Other Expense GST Entered | **0.00** |
| Grand Total GST | **12.40** |

| | |
|---|---|
| **Total Mileage** | **260.42** |
| **Total Subsistence** | **0.00** |
| **Total Other Expenses** | **0.00** |
| **Total Claim** | **260.42** |

| GL Account Number | Taxes Included | Amount | Tax Code | Tax Amount |
|---|---|---|---|---|
| 13044000161000001 | ✓ | 260.42 | G | 12.40 |

| | |
|---|---|
| **Total Without Taxes:** | **248.02** |
| **Tax Total:** | **12.40** |
| **Total With Taxes:** | **260.42** |

**Comments:**

**Submitting this expense claim certifies that the foregoing expenses were incurred for Battle River School Division business and are in compliance with School Division Administrative Procedure 115. Click here to view Administrative Procedure.**

**PLEASE MAKE SURE ALL OF YOUR RECEIPTS ARE ATTACHED AS A PDF. IF RECEIPTS ARE MISSING YOUR CLAIM WILL BE DELAYED.**

## GL DISTRIBUTION AND APPROVAL

**Task ID: 0000067843 - Created: 21-Dec-2022 02:16.16 PM - By: Imogene Walsh - Processed: 21-Dec-2022 03:04.45 PM - By: Rita Marler**

Action Taken: No Objection

| GL Account Number | Taxes Included | Amount | Tax Code | Tax Amount |
|---|---|---|---|---|
| 13044000161000001 | ✓ | 260.42 | G | 12.40 |

| | |
|---|---|
| **Total Without Taxes:** | **248.02** |
| **Tax Total:** | **12.40** |
| **Total With Taxes:** | **260.42** |

**Authorizer Comment:**

FINAL AP SECTION

**Task ID: 0000067843 - Created: 21-Dec-2022 03:04.45 PM - By: Rita Marler - Processed: 05-Jan-2023 02:57.08 PM - By: Michelle Girvan**

Action Taken: Approve Expense

**Fiscal Period:** **202304**

**Vendor Number:** **EM11076 - Walsh, Imogene I**

**Invoice Description:**
**EXP CLAIM - MILEAGE**

| GL Account Number | Taxes Included | Amount | Tax Code | Tax Amount |
|---|---|---|---|---|
| 13044000161000001 | ✓ | 260.42 | G | 12.40 |
| | | | **Total Without Taxes:** | **248.02** |
| | | | **Tax Total:** | **12.40** |
| | | | **Total With Taxes:** | **260.42** |