Strathcona
REGIONAL DISTRICT

990 Cedar Street, Campbell River, BC, V9W 7Z8

STAFF EXPENSE CLAIM FORM
EXEMPT STAFF

NAME: John Neill **DATE:** 12/15/2023

ADDRESS: C/O 301 - 990 Cedar Street, Campbell River BC V9W 7Z8

PURPOSE OF CLAIM: Area D OCP Bylaw 276 Public Hearing

Date	Description of Expense (include "from" & "to" for km's traveled)	Expenses $ Amount	Kilometers Traveled Paved	Unpaved
12/06/2023	Dinner	35		
12/11/2023	Lunch	25		
FORMULAS - PLEASE LEAVE AS IS	SUB-TOTAL	$ 60	0	0
	RATE/KM	n/a	$ 0.68	$ 0.80
	TOTAL CLAIM	$ 60.00 (a)	$ 0.00 (b)	$ 0.00 (c)

TOTAL EXPENSES (a+b+c)	$ 60.00
Less Advance Acct 01-3-000-649	$
NET CLAIM	$ 60.00

REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS

1. Commercial Accommodation => Actual Cost @ Gov't Rates

2. Non-Commercial Accommodations => $35/night

3. Per Diem & Meal Allowance => $125/day

Rate Breakdown:

- Breakfast -> $20
- Lunch -> $25
- Dinner -> $35
- Incidentals -> $45 (for trips in excess of 24 hrs only)

4. All other expenses => Actual Cost

"I hereby request reimbursement of these expenses and certify that they were incurred as a result of travel on Strathcona Regional District business and that I will not be reimbursed for them by any other party."

John Neill — 12/15/2023

SIGNATURE OF PERSON MAKING CLAIM — DATE

Approved for Payment: A Nelson	01-2-500-320 N290 Account No.	Vendor No.