

#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8

ADVANCE
CLAIM

NAME: JULIE COLBORNE

ADDRESS

PURPOSE OF TRAVEL: FNRC

DATES OF TRAVEL: 1/10/24

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
1/10/24	ZUBALLOS	CR	FNRC	154	42
				154	42
TOTAL DISTANCE TRAVELED				308 0.00 KM	84 0.00 KM

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period)
* less meals provided \$125/24 hrs
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

RATE PER KM (2023 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 215.00	\$ 0.00
TOTAL EXPENSES	(A) \$ 284.48	0.00
(\$ PAVED + \$ UNPAVED)		

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$ 0.00
TOTAL EXPENSES (A + B)	\$ 0.00
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	\$
NET CLAIM	\$ 284.48 0.00

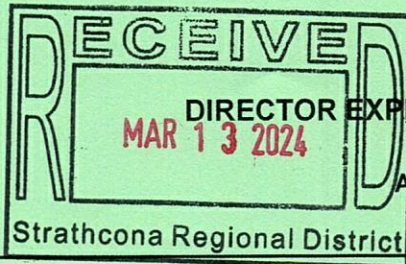
Verified by: meu

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

DIRECTOR SIGNATURE

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: JULIE COUBORNE

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: FNRC

DATES OF TRAVEL: 3/13/24

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
3/13/24	ZOBAUOS	CR	FNRC	154	42
3/13/24	CR	ZOBAUOS	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 215.60	\$ 68.88
TOTAL EXPENSES	(A) \$ 284.48	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period) \$125/24 hrs
* less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 284.48
Verified by:	<u>Mei</u>

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

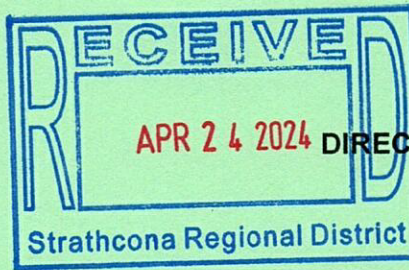
DIRECTOR SIGNATURE

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY

Page 2 of 2

CARRY FORWARD TO THE FRONT **TOTAL (B) \$**



ADVANCE	
CLAIM	

NAME:	<u>JULIE COBORN</u>
ADDRESS:	<u>[REDACTED]</u>
PURPOSE OF TRAVEL:	<u>TRAINING + BOARD.</u>
DATES OF TRAVEL:	<u>MARCH 22 + FEB 24, 2024.</u>

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
3/22/24	ZCB	CR	EN CA TRAINING	154	42
3/22/24	CR	ZCB	"	154	42
4/24/24	ZCB	CR	BOARD.	154	42
4/24/24	CR	ZCB	"	154	42

TOTAL DISTANCE TRAVELED	616 KM	168 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 / KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 431.20	\$ 137.76
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A) \$ 568.96	

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates
2. Non-Commercial Accommodation	\$35/night
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35
4. Other allowable expenses (with receipts)	Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$ 55
TOTAL EXPENSES (A + B)	\$ 623.96
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 623.96
Verified by:	<u>mei</u>

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

[Signature]
DIRECTOR SIGNATURE

April 24, 2024
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY

Page 2 of 2

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#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8

ADVANCE

CLAIM

NAME: JULIE COLBORNE

ADDRESS: BOX 103 CAMPBELL RIVER BC V8W 7Z8

PURPOSE OF TRAVEL: FNRC + MSC

DATES OF TRAVEL: MAY 8, 2024

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
5/8/24	ZEBALLOS	CR	FNRC + MSC	154	42
5/8/24	CR	ZOB	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$21560	\$6888
TOTAL EXPENSES	(A) \$	28448
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per dlem (24 hour period) \$125/24 hrs
* less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 28448

Verified by:

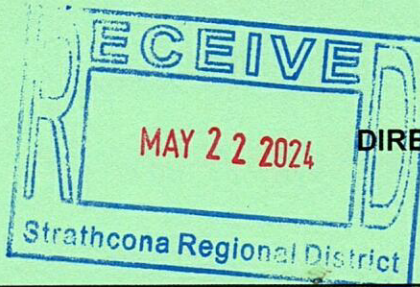
I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

DIRECTOR SIGNATURE

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
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DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: Julie Colborne

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: BOARD

DATES OF TRAVEL: May 22, 2024

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
5/22/24	ZEBALDOS	CR.	BOARD	154	42
"	CR	ZEBALDOS	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 21560	\$ 6888
TOTAL EXPENSES	(A) \$ 28448	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- | | |
|--|---|
| 1. Commercial Accommodation | Actual Cost @ Gov't rates |
| 2. Non-Commercial Accommodation | \$35/night |
| 3. Overnight travel per diem (24 hour period)
* less meals provided | \$125/24 hrs |
| Meal Charges (not overnight) | Breakfast - \$20
Lunch - \$25
Dinner - \$35 |
| 4. Other allowable expenses (with receipts) | Actual Cost |

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 28448
Verified by:	Mari

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

[Signature]
DIRECTOR SIGNATURE

5/22/24
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE

CLAIM

NAME: Julie Colborne

ADDRESS

PURPOSE OF TRAVEL: BOARD MTG

DATES OF TRAVEL: June 26, 2024

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
6/26/24	ZOBALLO	CR	BOARD	154	42
"	CR	ZOB	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 215.60	\$ 68.88
TOTAL EXPENSES	(A) \$ 284.48	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period) \$125/24 hrs
* less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 284.48
Verified by:	<u>mei</u>

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

DIRECTOR SIGNATURE

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY



#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE	
CLAIM	

NAME: JUNE CORBORNE

ADDRESS

PURPOSE OF TRAVEL: FNRC MSC

DATES OF TRAVEL: June 12, 2024

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
6/12/24	ZOBANOS	CR	FNRC MSC	154	42
"	CR	ZOB		154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 21540	\$ 6888
TOTAL EXPENSES	(A) \$ 28448	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- | | |
|--|---|
| 1. Commercial Accommodation | Actual Cost @ Gov't rates |
| 2. Non-Commercial Accommodation | \$35/night |
| 3. Overnight travel per diem (24 hour period)
* less meals provided | \$125/24 hrs |
| Meal Charges (not overnight) | Breakfast - \$20
Lunch - \$25
Dinner - \$35 |
| 4. Other allowable expenses (with receipts) | Actual Cost |

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 28448
Verified by:	meu

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

[Signature]
DIRECTOR SIGNATURE

6/12/24
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY



#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: Julie Carbone

ADDRESS

PURPOSE OF TRAVEL:

DATES OF TRAVEL:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
7/24/24	ZOBALLOS	CR.	BOARD	154	42.
7/24/24	CR	ZOB	BOARD	154	42.

TOTAL DISTANCE TRAVELED

308 KM

84 KM

RATE PER KM (2024 CRA rate/BL167)

\$0.70 KM

\$0.82 / KM

TOTAL DISTANCE EXPENSE

\$ 21560

\$ 68 88

TOTAL EXPENSES

(\$ PAVED + \$ UNPAVED)

(A) \$

284 48

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation

Actual Cost @
Gov't rates

2. Non-Commercial Accommodation

\$35/night

3. Overnight travel per diem (24 hour period)

\$125/24 hrs

* less meals provided

Meal Charges (not overnight)

Breakfast - \$20
Lunch - \$25
Dinner - \$35

4. Other allowable expenses (with receipts)

Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE

(B) \$

TOTAL EXPENSES (A + B)

\$

LESS ADVANCE

\$

ACCOUNT No. 01-3-000-649

NET CLAIM

\$ 284 48

Verified by:

Maria

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

DIRECTOR SIGNATURE

DATE

7/24/24

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY



#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8

DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: JULIE CORBONE

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: BOARD

DATES OF TRAVEL: 8/21/24

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
8/21/24	BOBALUS	CR	BOARD	154	42
"	CR	ZOB	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 215.60	\$ 68.88
TOTAL EXPENSES	(A) \$ 284.48	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period) \$125/24 hrs
* less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 284.48
Verified by:	

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

[Signature]
DIRECTOR SIGNATURE

8/21/24
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY

#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: Julie Colborne

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: MSC

DATES OF TRAVEL: 10/9/24

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
10/9/24	ZAB	CR	MSC	154	42
"	CL	ZAB	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 215.60	\$ 68.88
TOTAL EXPENSES	(A) \$ 284.48	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period)
* less meals provided \$125/24 hrs
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 284.48
Verified by:	

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

[Signature]
DIRECTOR SIGNATURE

10/9/24
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: JULIE COUBORNE

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: BOARD

DATES OF TRAVEL: 10/30/24

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
10/30/24	ZCB	CR	BOARD	154	42
10/30/24	CR	ZCB	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 215.60	\$ 68.88
TOTAL EXPENSES	(A) \$ 284.48	
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period) \$125/24 hrs
* less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 284.48
Verified by:	mei

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

[Signature]
DIRECTOR SIGNATURE

10/30/24
DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY

#301 - 990 Cedar Street, Campbell River, BC V8W 7Z8



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: JULIE

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: BOARD

DATES OF TRAVEL: 11/27/24 11/27/24

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
11/27/24	ZCBANOS	CR	BOARD	154	42
	CR	ZCB	"	154	42

TOTAL DISTANCE TRAVELED	308 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$ 215.60	\$ 68.88
TOTAL EXPENSES	(A) \$	284.48
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period) \$125/24 hrs
* less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 284.48
Verified by:	

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

DIRECTOR SIGNATURE

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY



DIRECTOR EXPENSE CLAIM FORM

Page 1 of 2

ADVANCE
CLAIM

NAME: Julie CR BORNE

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: BOARD MTE

DATES OF TRAVEL: 12/11/24

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELLED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
12/11/24	ZOBALLOS	CR	BOARD	154	42
"	CR	ZOB	"	154	42

TOTAL DISTANCE TRAVELED	308 154 KM	84 KM
RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
TOTAL DISTANCE EXPENSE	\$215.40	\$68.88
TOTAL EXPENSES	(A) \$	284.48
(\$ PAVED + \$ UNPAVED)		

PURSUANT TO SRD REMUNERATION BYLAW #167

- Commercial Accommodation Actual Cost @ Gov't rates
- Non-Commercial Accommodation \$35/night
- Overnight travel per diem (24 hour period) \$125/24 hrs
* less meals provided
- Meal Charges (not overnight) Breakfast - \$20
Lunch - \$25
Dinner - \$35
- Other allowable expenses (with receipts) Actual Cost

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$
TOTAL EXPENSES (A + B)	\$
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 284.48
Verified by:	

I hereby certify the expenses detailed on this claim form were incurred by me as a result of Strathcona Regional District business and qualify for reimbursement as detailed in SRD Bylaw #167 and that I will not be reimbursed for them by any other party.

DIRECTOR SIGNATURE

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____
FOR FINANCE USE ONLY