

DIRECTOR EXPENSE CLAIM FORM

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-	MARKET	-	-	-

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

ADVANCE CLAIM

	KILOMETRE	ALLOWANCE FOR AU	TOMOBILE DISTANCE TRAVELLE	ED .	
DATE	FROM	то	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
4/30	GOLD RIVIER	C.R.	MRETING MRETING	183	
			TOTAL DISTANCE TRAVELED	3 66 KM	
SUANT TO S	SRD REMUNERATION BYLAW #16		RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
vernight travel	Accommodation per clem (24 hour period)	Actual Cost @ Gov't rates \$35/night \$125/24 hrs	TOTAL DISTANCE EXPENSE TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A) \$ 25	56.20
* less meals provided Meal Charges (not overnight) Breakfast - \$20		CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$		
		Lunch - \$25 Dinner - \$35	TOTAL EXPENSES (A + B)	\$	
ther allowable e	expenses (with receipts)	Actual Cost	LESS ADVANCE ACCOUNT No. 01-3-000-649	S	
			NET CLAIM	: 25	6,20
				Verified by:	

ACCOUNT NO. 012 - FOR FINANCE USE ONLY

CC1

CC2



002336 DIRECTOR EXPENSE CLAIM FORM

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ADVANCE CLAIM	
CLAIM	

NAME:	MICHAEL LOTT	
ADDRESS:		
PURPOSE OF TRAVEL:	MEETING	
DATES OF TRAVEL:	2012 33 3082	

DATE	FROM	то	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
201793	GOLD RIVIER	CAMPBELL RIVER	BUNDAMENTING	183	
			A SA CONTRACTOR OF THE PROPERTY OF THE PROPERT		
				HARA.	
			TOTAL DISTANCE TRAVELED	183 KM	КМ
PURSUANT TO	SRD REMUNERATION BYLAV	V #167	RATE PER KM (2024 CRA rate/BL167)	\$0.70 KM	\$0.82 / KM
. Commercial Ac	commodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$ 172	
	al Accommodation	\$35/night	TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A)\$ 12	8110
 Overnight trave fess meals pro 	il per diem (24 hour period) ovided	\$125/24 hrs		T-	125,48.
Meal Charges (ingt overnighti	Breakfast - \$20	CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$	J. 11
		Lunch - \$25 Dinner - \$35	TOTAL EXPENSES (A + B)	s love	a st
. Other altowable	expenses (with receipts)	Actual Cost	LESS ADVANCE ACCOUNT No. 01-3-000-649	8	
			NET CLAIM	s 12	8110
				Verified by:	hand &

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.

ACCOUNT NO. 012 - 012-100-84cc1 0012 cc2 320 FOR FINANCE USE ONLY

DIRECTOR SIGNATURE

SCALL 1