

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: Jan. 22, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	150	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$108.00	\$0.00
TOTAL EXPENSES	\$108.00	
(\$ PAVED + \$ UNPAVED)	(A)	

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
TOTAL EXPENSES (A + B)	\$108.00
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$108.00

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

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

January 22, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



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DIRECTOR EXPENSE CLAIM FORM

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: Jan. 8, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	150	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$108.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A)	\$108.00

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
TOTAL EXPENSES (A + B)	\$108.00
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$108.00

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

January 8, 2025

SIGNATURE OF PERSON MAKING CLAIM

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

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

CONSTITUENCY EXPENSES

ADVANCE CLAIM

Name: Gerald Whalley

Address _____

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$0.00	
3. Overnight travel per diem (24 hour period)	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	
* less meals provided				
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$111.59	
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$111.59	
		LESS ADVANCE ACCOUNT No. 013-000-649		
		NET CLAIM	\$111.59	
			Verified by:	

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

Gerald Whalley
URE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

January 22, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

Page 2 of 2

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

11.06



DIRECTOR EXPENSE CLAIM FORM

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address: _____

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$0.00	
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs	(S PAVED + \$ UNPAVED)	(A)	
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$405.57	
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$405.57	
		LESS ADVANCE ACCOUNT No. 01-3-000-649		
		NET CLAIM	\$405.57	

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

Gerald Whalley
TURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

February 19, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

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

11.06



DIRECTOR EXPENSE CLAIM FORM

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: Jan. 8, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES		\$216.00
3. Overnight travel per diem (24 hour period)	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	

Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$216.00
		LESS ADVANCE	
		ACCOUNT No. 013-000-649	
		NET CLAIM	\$216.00

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

Gerald Whalley
URE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

February 19, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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



DIRECTOR EXPENSE CLAIM FORM

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	0	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A)	\$0.00
CARRY FORWARD OF EXPENSES FROM REVERSE (B)		\$116.04
TOTAL EXPENSES (A + B)	\$116.04	
LESS ADVANCE		
ACCOUNT No. 01-3-000-649		
NET CLAIM	\$116.04	
	Verified by:	

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

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

March 26, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: March 11 & 26, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	300	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
TOTAL EXPENSES		\$216.00
(\$ PAVED + \$ UNPAVED)	(A)	

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
TOTAL EXPENSES (A + B)	\$216.00
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$216.00
	Verified by: _____

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

Gerald Whalley
RE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

March 26, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address: _____

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: April 9 & 23, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES		\$216.00
3. Overnight travel per diem (24 hour period)	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	

Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$216.00
		LESS ADVANCE	
		ACCOUNT No. 01-3-000-649	
		NET CLAIM	\$216.00

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

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

April 23, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	0	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A)	\$0.00
CARRY FORWARD OF EXPENSES FROM REVERSE (B)		\$114.89
TOTAL EXPENSES (A + B)		\$114.89
LESS ADVANCE		
ACCOUNT No. 01-3-000-649		
NET CLAIM		\$114.89
	Verified by:	

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

Gerald What
SIGNATURE OF PERSON MAKING CLAIM

April 23, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

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

11.06



DIRECTOR EXPENSE CLAIM FORM

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	0	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
TOTAL EXPENSES		\$0.00
(\$ PAVED + \$ UNPAVED)	(A)	

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$167.62
TOTAL EXPENSES (A + B)	\$167.62
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$167.62

Verified by:

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

Gerald Whalley
TURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

May 21, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: April 30 to May 21, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$324.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$324.00	
3. Overnight travel per diem (24 hour period)	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	

Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$324.00
		LESS ADVANCE	
		ACCOUNT No. 013-000-649	
		NET CLAIM	\$324.00

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

Sherald Whalley
SIGNATURE OF PERSON MAKING CLAIM

May 21, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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

CONSTITUENCY EXPENSES

ADVANCE

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	0	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM

TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	(A)	\$0.00

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$198.16
TOTAL EXPENSES (A + B)	\$198.16
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$198.16

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

Gerald Whaler
SIGNATURE OF PERSON MAKING CLAIM

June 25, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: June 4 to June 25, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	450	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$324.00	\$0.00
TOTAL EXPENSES		\$324.00
(\$ PAVED + \$ UNPAVED)	(A)	

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
TOTAL EXPENSES (A + B)	\$324.00
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$324.00

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

Gerald Whalley
ATURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

June 25, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$0.00	
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$180.17	
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$180.17	
		LESS ADVANCE ACCOUNT No. 01-3-000-649		
		NET CLAIM	\$180.17	
			Verified by:	

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

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

July 23, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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



DIRECTOR EXPENSE CLAIM FORM

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: July 9 to July 23, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$216.00	
3. Overnight travel per diem (24 hour period)	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	

Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$216.00
		LESS ADVANCE	
		ACCOUNT No. 01-3-000-649	
		NET CLAIM	\$216.00

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

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

July 23, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	0	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
TOTAL EXPENSES	\$0.00	
(\$ PAVED + \$ UNPAVED)	(A)	

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$111.59
TOTAL EXPENSES (A + B)	\$111.59
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$111.59

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

Gerald Whalley
ATURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

August 20, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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

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

REGIONAL EXPENSES

ADVANCE

Name: Gerald Whalley

Address: _____

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: August 6 to August 20, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$216.00	
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00	
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$216.00	
		LESS ADVANCE ACCOUNT No. 01-3-000-649		
		NET CLAIM	\$216.00	
			Verified by:	

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

Gerald Whalley
ATURE OF PERSON MAKING CLAIM ✓

August 20, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$0.00	
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$119.27 113.87	
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	GST \$119.27	-\$5.40
		LESS ADVANCE		
		ACCOUNT No. 013-000-649		
		NET CLAIM	\$119.27	

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

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

September 17, 2025

DATE

ACCOUNT NO. 012 - 130 - 243 CC1 D001 CC2

Yes.

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

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

REGIONAL EXPENSES

ADVANCE CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: August 6 to August 20, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$216.00	
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs	(\$ PAVED + \$ UNPAVED) (A)		
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00	205.7
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$216.00	-10.29
		LESS ADVANCE ACCOUNT No. 01-3-000-649		
		NET CLAIM	\$216.00	

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

Gerald Whalley
SIGNATURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

September 17, 2025

DATE

ACCOUNT NO. 012 - 130 - 320 CC1 D001 CC2 _____

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

REGIONAL EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: October 8 to October 22, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES		\$216.00
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs	(\\$ PAVED + \\$ UNPAVED)	(A)	
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)		\$0.00
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)		\$216.00
		LESS ADVANCE ACCOUNT No. 01-3-000-649		
		NET CLAIM		\$216.00

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

Gerald Whalley
TURE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

October 22, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

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

CONSTITUENCY EXPENSES

ADVANCE
CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	\$0.00	
3. Overnight travel per diem (24 hour period) * less meals provided	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)	(A)	
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$112.86	
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$112.86	
		LESS ADVANCE ACCOUNT No. 01-3-000-649		
		NET CLAIM	\$112.86	

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

Gerald Whalley
F PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

October 22, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



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DIRECTOR EXPENSE CLAIM FORM

Strathcona Regional District

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

CONSTITUENCY EXPENSES

ADVANCE CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel:

Dates of Travel:

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	0	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$0.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	\$0.00	
	(A)	

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$205.04
TOTAL EXPENSES (A + B)	\$205.04
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$205.04

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

Gerald Whalley
IRE OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

November 19, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____

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



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NOV 19 2025

DIRECTOR EXPENSE CLAIM FORM

Strathcona Regional District

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

REGIONAL EXPENSES

ADVANCE

CLAIM

Name: Gerald Whalley

Address:

Purpose of Travel: Regional District Board and Committee meetings.

Dates of Travel: November 8 to November 19, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

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

TOTAL DISTANCE TRAVELED	300	0
RATE PER KM (2022 CRA rate/BL167)	\$0.72 / KM	\$0.84 / KM
TOTAL DISTANCE EXPENSE	\$216.00	\$0.00
TOTAL EXPENSES (\$ PAVED + \$ UNPAVED)	\$216.00	
	(A)	

CARRY FORWARD OF EXPENSES FROM REVERSE (B)	\$0.00
TOTAL EXPENSES (A + B)	\$216.00
LESS ADVANCE	
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$216.00

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

Gerald Whalley
E OF PERSON MAKING CLAIM

SIGNATURE OF PERSON MAKING CLAIM

November 19, 2025

DATE

ACCOUNT NO. 012 - _____ - _____ CC1 _____ CC2 _____



DIRECTOR EXPENSE CLAIM FORM

Page 2 of 2

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