

NAME: Madison Stewart

DATE: 04/15/2025

ADDRESS: [REDACTED]

PURPOSE OF CLAIM: AVICC

Date	Description of Expense (include from & to" for km's traveled)	Expenses \$ Amount	Kilometers Traveled	
			Paved	Unpaved
04/10/2025	Mileage to Nanaimo		159	
04/10/2025	Dinner	35.00		
04/12/2025	Mileage from Nanaimo		159	
04/12/2025	Incidentals	45.00		
			0	
FORMULAS - PLEASE LEAVE AS IS	<b>SUB-TOTAL</b>	\$ 80	318	0
	<b>RATE/KM</b>	n/a	\$ 0.72	\$ 0.84
	<b>TOTAL CLAIM</b>	\$ 80.00	\$ 228.96	\$ 0.00

(a) (b) (c)  
(a+b+c)

**REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS**

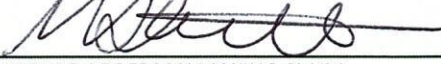
- Commercial Accommodation => Actual Cost @ Gov't Rates
- Non-Commercial Accommodations => \$35/night
- Per Diem & Meal Allowance => \$125/day  
Rate Breakdown:  
Breakfast -> \$20  
Lunch -> \$25  
Dinner -> \$35  
Incidentals -> \$45 (for trips in excess of 24 hrs only)
- All other expenses => Actual Cost

**TOTAL EXPENSES \$ 308.96**

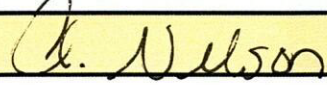
Less Advance  
Acct 01-3-000-649 \$

**NET CLAIM \$ 308.96**

"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."

  
SIGNATURE OF PERSON MAKING CLAIM

04/15/2025  
DATE

Approved for Payment 	Account No.	Vendor No.
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NAME: **Madison Stewart**

DATE: **06/18/2025**

ADDRESS: [REDACTED]

PURPOSE OF CLAIM: **Tahsis Workshop & PIBC (Vancouver)**

Date	Description of Expense (include from & to" for km's traveled)	Expenses \$ Amount	Kilometers Traveled	
			Paved	Unpaved
05/28/2025	Dinner	35.00		
05/29/2025	Breakfast, Incidentals	65.00		
06/09/2025	Lunch, Dinner, non Commercial Accomodation	95.00		
06/10/2025	Breakfast, Lunch, Dinner, non- Commercial Accomodation	115.00		
06/11/2025	Breakfast, Dinner, non Commerical Accomodation	90.00		
06/12/2025	Breakfast, non Commercial Accomodation	55.00		
06/13/2025	Breakfast, Lunch, Incidentals,	95.00		
06/13/2025	Mileage Return Vancouver to Campbell River		145	
06/10/2025	Mileage to/from CR Airport		11.4	
			0	
FORMULAS - PLEASE LEAVE AS IS	<b>SUB-TOTAL</b>	\$ 550	156.4	0
	<b>RATE/KM</b>	n/a	\$ 0.72	\$ 0.84
	<b>TOTAL CLAIM</b>	\$ 550.00	\$ 112.61	\$ 0.00

(a) (b) (c)

(a+b+c)

**TOTAL EXPENSES \$ 662.61**

Less Advance  
Acct 01-3-000-649 \$

**NET CLAIM \$ 662.61**

**REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS**

- Commercial Accommodation => Actual Cost @ Gov't Rates
- Non-Commercial Accommodations => \$35/night
- Per Diem & Meal Allowance => \$125/day  
Rate Breakdown:  
Breakfast -> \$20  
Lunch -> \$25  
Dinner -> \$35  
Incidentals -> \$45 (for trips in excess of 24 hrs only)
- 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."

*Madison Stewart*  
SIGNATURE OF PERSON MAKING CLAIM

*June 18/2025*  
DATE

Approved for Payment <i>Q. Nelson</i>	Account No. <i>01-2-500-320</i>	Vendor No.
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002470



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

**STAFF EXPENSE CLAIM FORM  
EXEMPT STAFF**

NAME: Madison Stewart

DATE: 11/24/2025

ADDRESS: [REDACTED]

PURPOSE OF CLAIM: BCNPHA Housing Central Conference in Vancouver

Date	Description of Expense (include from & to" for km's traveled)	Expenses \$ Amount	Kilometers Traveled	
			Paved	Unpaved
11/16/2025	From CR to Hullo Parking		152	
11/16/2025	Dinner	35.00		
11/18/2025	Dinner, incidentals	80.00		
11/19/2025	From Hullo Parking to CR		152	
			0	
	<b>SUB-TOTAL</b>	\$ 115	304	0
FORMULAS - PLEASE LEAVE AS IS	<b>RATE/KM</b>	n/a	\$ 0.72	\$ 0.84
	<b>TOTAL CLAIM</b>	\$ 115.00	\$ 218.88	\$ 0.00

(a) (b) (c)  
(a+b+c)

**TOTAL EXPENSES \$ 333.88**

Less Advance  
Acct 01-3-000-649 \$

**NET CLAIM \$ 333.88**

**REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS**

- Commercial Accommodation => Actual Cost @ Gov't Rates
- Non-Commercial Accommodations => \$35/night
- Per Diem & Meal Allowance => \$125/day  
Rate Breakdown:  
Breakfast -> \$20  
Lunch -> \$25  
Dinner -> \$35  
Incidentals -> \$45 (for trips in excess of 24 hrs only)
- 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."

Madison Stewart  
SIGNATURE OF PERSON MAKING CLAIM

Nov. 24, 2025  
DATE

Approved for Payment A Nelson Account No. Vendor No.

01-2-401-320