



990 Cedar Street, Campbell River, BC V8W 7Z8

DIRECTOR EXPENSE CLAIM FORM

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ADVANCE
CLAIM

NAME: Mark Vonesch

ADDRESS:

PURPOSE OF TRAVEL: SRD Board & Committee meetings

DATES OF TRAVEL: Jan 22 - April 23, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
01/22/25	<input type="text"/>	SRD office	SRD Board meeting	28.30	
01/22/25	SRD office	<input type="text"/>	SRD Board meeting	28.30	
02/05/25	368 South Pt Rd	SRD office	EASC meeting	28.30	
02/05/25	SRD office	<input type="text"/>	EASC meeting	28.30	
03/26/25	<input type="text"/>	Whaletown ferry terminal	SRD Board meeting	20.30	
03/26/25	Whaletown ferry terminal	<input type="text"/>	SRD Board meeting	20.30	
04/23/25	<input type="text"/>	Whaletown ferry terminal	SRD Board meeting	20.30	
04/23/25	Whaletown ferry terminal	<input type="text"/>	SRD Board meeting	20.30	

TOTAL DISTANCE TRAVELED **194.40 KM** 0.00 KM

RATE PER KM (2025 CRA rate/BL167) **\$0.72 / KM** **\$0.84 / KM**

TOTAL DISTANCE EXPENSE **\$ 139.97** **\$ 0.00**

TOTAL EXPENSES **(A) \$ 139.97**
(\$ 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) \$ 315.35
TOTAL EXPENSES (A + B)	\$ 455.32
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 455.32

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

November 28, 2025

DATE

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



DIRECTOR EXPENSE CLAIM FORM

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DIRECTOR EXPENSE CLAIM FORM

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ADVANCE

CLAIM

NAME: Mark Vonesch

ADDRESS: [REDACTED]

PURPOSE OF TRAVEL: SRD Board & Committee meetings

DATES OF TRAVEL: April 30 - June 25, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
04/30/25	[REDACTED]	SRD office	SRD COW meeting	28.30	
04/30/25	SRD office	[REDACTED]	SRD COW meeting	28.30	
05/21/25	[REDACTED]	Whaletown ferry terminal	SRD Board meeting	20.30	
05/21/25	Whaletown ferry terminal	[REDACTED]	SRD Board meeting	20.30	
06/18/21	[REDACTED]	SRD office	SRD COW meeting	28.30	
06/18/25	SRD office	[REDACTED]	SRD COW meeting	28.30	
06/25/25	[REDACTED]	SRD office	SRD Board meting	28.30	
06/25/25	SRD office	[REDACTED]	SRD Board meeting	28.30	

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
4. Other allowable expenses (with receipts)	Actual Cost
Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35

TOTAL DISTANCE TRAVELED **210.40 KM** 0.00 KM

RATE PER KM (2025 CRA rate/BL167) **\$0.72 / KM** **\$0.84 / KM**

TOTAL DISTANCE EXPENSE **\$ 151.49** **\$ 0.00**

TOTAL EXPENSES
(\$ PAVED + \$ UNPAVED) **(A) \$ 151.49**

CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$ 124.30
TOTAL EXPENSES (A + B)	\$ 275.79
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 275.79

Verified by: **MVB**

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.

Mark Vonesch

DIRECTOR SIGNATURE

11/28/25

DATE

ACCOUNT NO. 012 - **130** - **320** CC1 **D004** CC2 _____
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DIRECTOR EXPENSE CLAIM FORM

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DIRECTOR EXPENSE CLAIM FORM

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ADVANCE
CLAIM

NAME: Mark Vonesch

ADDRESS:

PURPOSE OF TRAVEL: SRD Board & Committee meetings

DATES OF TRAVEL: Aug 20 - Nov 11, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
08/20/25	<input type="text"/>	Whaletown ferry terminal	SRD Board meeting	20.30	
08/20/25	Whaletown ferry terminal	<input type="text"/>	SRD Board meeting	20.30	
09/17/25	<input type="text"/>	Whaletown ferry terminal	SRD Board meeting	20.30	
09/17/25	Whaletown ferry terminal	<input type="text"/>	SRD Board meeting	20.30	
10/22/25	<input type="text"/>	Whaletown ferry terminal	SRD Board meeting	20.30	
10/22/25	Whaletown ferry terminal	<input type="text"/>	SRD Board meeting	20.30	
11/06/25	<input type="text"/>	Whaletown ferry terminal	SRD COW meeting	20.30	
11/06/25	Whaletown ferry terminal	<input type="text"/>	SRD COW meeting	20.30	

TOTAL DISTANCE TRAVELED **162.40 KM** 0.00 KM

RATE PER KM (2025 CRA rate/BL167) **\$0.72 / KM** **\$0.84 / KM**

TOTAL DISTANCE EXPENSE **\$ 116.93** **\$ 0.00**

TOTAL EXPENSES **(A) \$ 116.93**
(\$ 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)

\$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) \$ 63.05
TOTAL EXPENSES (A + B)	\$ 179.98
LESS ADVANCE	\$
ACCOUNT No. 01-3-000-649	
NET CLAIM	\$ 179.98

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

11/28/25

DATE

ACCOUNT NO. 012 - 130 - 320 CC1 D001 CC2 _____
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990 Cedar Street, Campbell River, BC V8W 7Z8

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990 Cedar Street, Campbell River, BC V8W 7Z8

ADVANCE CLAIM

NAME: Mark Vonesch

ADDRESS: _____

PURPOSE OF TRAVEL: SRD Board & Committee meetings

DATES OF TRAVEL: Aug 20 - Nov 11, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

DATE	FROM	TO	PURPOSE OF TRAVEL	Distance on Paved	Distance on Unpaved
11/19/22	[REDACTED]	Whaletown ferry terminal	SRD Board meeting	20.30	
11/19/25	Whaletown ferry terminal	[REDACTED]	SRD Board meeting	20.30	
09/20/25	[REDACTED]	721 Government St, Victoria	UBCM	295.30	
09/27/25	721 Government St, Victoria	[REDACTED]	UBCM	295.30	

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$ 454.46	\$ 0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	(A) \$	454.46
3. Overnight travel per diem (24 hour period)	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)		

Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$ 854.19
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$ 1,308.65
		LESS ADVANCE	\$
		ACCOUNT No. 01-3-000-649	
		NET CLAIM	\$ 1,308.65

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.

Mark Vorech

DIRECTOR SIGNATURE

12/01/25

DATE

ACCOUNT NO. 012 - 130.320 CC1 0004 CC2
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DIRECTOR EXPENSE CLAIM FORM

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DIRECTOR EXPENSE CLAIM FORM

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990 Cedar Street, Campbell River, BC V8W 7Z8

ADVANCE
CLAIM

NAME: Mark Vonesch

ADDRESS: _____

PURPOSE OF TRAVEL: SRD Board & Committee meetings

DATES OF TRAVEL: Dec 9 - 11, 2025

KILOMETRE ALLOWANCE FOR AUTOMOBILE DISTANCE TRAVELED

PURSUANT TO SRD REMUNERATION BYLAW #167

1. Commercial Accommodation	Actual Cost @ Gov't rates	TOTAL DISTANCE EXPENSE	\$ 40.75	\$ 0.00
2. Non-Commercial Accommodation	\$35/night	TOTAL EXPENSES	(A) \$	40.75
3. Overnight travel per diem (24 hour period)	\$125/24 hrs	(\$ PAVED + \$ UNPAVED)		

Meal Charges (not overnight)	Breakfast - \$20 Lunch - \$25 Dinner - \$35	CARRY FORWARD OF EXPENSES FROM REVERSE	(B) \$ 113.50
4. Other allowable expenses (with receipts)	Actual Cost	TOTAL EXPENSES (A + B)	\$ 154.25
		LESS ADVANCE ACCOUNT No. 01-3-000-649	\$
		NET CLAIM	\$ 154.25
		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.

Mark Vorech

12/11/25

DIRECTOR SIGNATURE

DATE

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