



# Battle River School Division EXPENSE CLAIM FORM

**Name:** Marler, Rita (10849)

**Location:** Division Office

**Month:** February

**IMPORTANT:** Expense claim must be submitted **WITHIN TWO MONTHS** from the end of the month the claim is for. Expenses submitted after this date will **NOT** be reimbursed.

Please ensure **ALL** receipts are attached to your claim.

**Bus Drivers:** Do **NOT** claim field trip expenses (claim on the applicable "Trip Report" form).

**Other Expenses:**  
(Please Attach Receipts)

Date	Department	Vendor	Particulars	Books	Enter GST on Invoice	Total Invoice Amount
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<b>Subtotals</b>					0.00	0.00

**REGULAR BUSINESS EXPENSES**

**Mileage and Meal Information:** \*Check this box if your mileage claim for the calendar year exceeds 5,000 KMS

Date (YYYYMMDD)	Purpose	From/To Destination	Km's Round Trip	One Way Only	Total KMs	Total Mileage Expense	Breakfast	Lunch	Dinner
28-Feb-2023	School Visit	Forestburg	180	<input type="checkbox"/>	180.00	109.80	<input type="checkbox"/> 11.00	<input type="checkbox"/> 15.00	<input type="checkbox"/> 23.50
02-Mar-2023	School visits	Viking, Holden Colony	186	<input type="checkbox"/>	186.00	113.46	<input type="checkbox"/> 11.00	<input type="checkbox"/> 15.00	<input type="checkbox"/> 23.50
				<input type="checkbox"/>	0.00	0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	0.00	0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	0.00	0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	0.00	0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



FINAL AP SECTION


Task ID: 0000070900 - Created: 02-Mar-2023 12:18.17 PM - By: Rita Marler - Processed: 03-Mar-2023 11:22.15 AM - By: Michelle Girvan

Action Taken: Approve Expense

Fiscal Period:202307

Vendor Number: EM10849 - Marler, Rita

Invoice Description:  
EXP CLAIM - MILEAGE

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
13044000148000001		223.26	G	10.63
<b>Total Without Taxes:</b>				<b>212.63</b>
<b>Tax Total:</b>				<b><u>10.63</u></b>
<b>Total With Taxes:</b>				<b>223.26</b>