



# Battle River School Division

## EXPENSE CLAIM FORM

**Name:** Wilm, Natasha L  
(11584)

**Location:** Division Office

**Month:** May

**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
				<input type="checkbox"/>		
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				<input type="checkbox"/>		
				<input type="checkbox"/>		
<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
23-May-2023	Interviews	Camrose to Bashaw	120	<input type="checkbox"/>	120.00	81.60	<input type="checkbox"/> 11.00	<input type="checkbox"/> 15.00	<input type="checkbox"/> 23.50
29-May-2023	Interviews	Camrose to Bawlf	58	<input type="checkbox"/>	58.00	39.44	<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"/>
				<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"/>
				<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"/>
				<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"/>
				<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"/>
			<b>Subtotals</b>		<b>178.00</b>	<b>121.04</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

<b>Totals</b>		
For Office Use Only:		<b>Total Mileage 121.04</b>
Total Subsistence	<b>5.76</b>	<b>Total Subsistence 0.00</b>
GST Auto Calculation		
Total Other Expense GST Entered	<b>0.00</b>	<b>Total Other Expenses 0.00</b>
Grand Total GST	<b>5.76</b>	<b>Total Claim 121.04</b>

<b>GL Account Number</b>	<b>Taxes Included</b>	<b>Amount</b>	<b>Tax Code</b>	<b>Tax Amount</b>
130440000000000001		121.04	G	5.76
			<b>Total Without Taxes:</b>	<b>115.28</b>
			<b>Tax Total:</b>	<b><u>5.76</u></b>
			<b>Total With Taxes:</b>	<b>121.04</b>

Comments:


Submitting this expense claim certifies that the foregoing expenses were incurred for Battle River School Division business and are in compliance with School Division Administrative Procedure 115. Click here to view Administrative Procedure.

**PLEASE MAKE SURE ALL OF YOUR RECEIPTS ARE ATTACHED AS A PDF. IF RECEIPTS ARE MISSING YOUR CLAIM WILL BE DELAYED.**

GL DISTRIBUTION AND APPROVAL

Task ID: 0000075347 - Created: 30-May-2023 08:06.08 AM - By: Natasha Wilm - Processed: 30-May-2023 08:13.15 AM - By: Rita Marler

Action Taken: No Objection

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
130440000000000001		121.04	G	5.76
Total Without Taxes:				115.28
Tax Total:				<u>5.76</u>
Total With Taxes:				121.04

Authorizer Comment:

FINAL AP SECTION

Task ID: 0000075347 - Created: 30-May-2023 08:13.15 AM - By: Rita Marler - Processed: 06-Jun-2023 01:59.41 PM - By: Charlene Fedyk


Action Taken: Approve Expense

Fiscal Period:202309

Vendor Number: EM11584 - Wilm, Natasha L

Invoice Description:

EXP claim-mileage

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
130440000000000001		121.04	G	5.76
Total Without Taxes:				115.28
Tax Total:				<u>5.76</u>
Total With Taxes:				121.04