

▼ SUPINT EXPENSE CLAIM FORM - WITH GL CODING

Task ID: 0000076435 - Created: 22-Jun-2023 02:33.43 PM - By: Rita Marler - Processed: 22-Jun-2023 02:33.43 PM - By: Rita Marler



Battle River School Division EXPENSE CLAIM FORM

Name: Marler, Rita (10849)

Location: Division Office

Month: March

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"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
				<input type="checkbox"/>		
Subtotals					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
14-Mar-2023	Recruitment	Lunch	☺	<input type="checkbox"/>	0.00	0.00	<input type="checkbox"/> 9.20	<input checked="" type="checkbox"/> 11.60	<input type="checkbox"/> 20.75
15-Mar-2023	Recruitment	Lunch	☺	<input type="checkbox"/>	0.00	0.00	<input type="checkbox"/> 9.20	<input checked="" type="checkbox"/> 11.60	<input type="checkbox"/> 20.75

Action Taken: No Objection

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
13047000000000051		34.80	G	1.66
Total Without Taxes:				33.14
Tax Total:				<u>1.66</u>
Total With Taxes:				34.80

Authorizer Comment:

▼ FINAL AP SECTION

Task ID: 0000076435 - Created: 22-Jun-2023 02:34.09 PM - By: Rita Marler - Processed: 26-Jun-2023 10:22.39 AM - By: Charlene Fedyk


Action Taken: Approve Expense

Fiscal Period:202310

Vendor Number: EM10849 - Marler, Rita

Invoice Description:

EXP claim-meals

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
13047000000000051		34.80	G	1.66
Total Without Taxes:				33.14
Tax Total:				<u>1.66</u>
Total With Taxes:				34.80