



TRAVEL & REPRESENTATION EXPENSES CLAIM FORM - ***FOR COMMISSIONERS ONLY***

NAME	<i>nazario facchino</i>		JOB TITLE	<i>Commissioner</i>		MONTH	<i>Aug-Sept-Oct</i>													
EMPLOYEE NO.			GENERAL EXPENSES			PROFESSIONAL IMPROVEMENT														
DATE (Day/Mo/Yr) (DD/MM/YY)	LOCATION		DESCRIPTION/ NATURE OF BUSINESS	302 TRAVEL Standing Committee		302 MEALS		302 OTHER		302 TRAVEL PIC		812 CONFERENCES		302 LODGING		302 MEALS		302 OTHER		
	FROM	TO		KM	AMOUNT	#	COST	COST			KM	AMOUNT	COST	DAYS	AMOUNT	#	COST	COST		
25/08/14	Vimont Lav		SWLSB Soft Ball Game	18	8.64															
28-08-14	Vimont Lav	RosemarHigh	Conference	37	17.76															
09/03/14	Vimont Lav	Board Office	Meeting	37	17.76															
09/04/14	Vimont Lav	Board Office	Parents Committee M	37	17.76															
09/05/14	Vimont Lav		Interviews	28	13.44															
09/08/14	Vimont Lav		Interviews	28	13.44															
09/08/14	Vimont Lav	Board Office	Executive Meet.	37	17.76															
09/10/14	Vimont Lav	Board Office	Corporate Meeting	37	17.76															
13-09-14	Vimont Lav			28	13.44															
15-09-14	Vimont Lav	Dorval	Council Meeting	62	29.76															
16-09-14	Vimont Lav	Board Office	Video Conf. Meet	37	17.76															
16-09-14	Vimont Lav	Board Office	Interviews	37	17.76															
17-09-14	Vimont Lav	Board Office	Council Meeting	37	17.76															
22-09-14	Vimont Lav	ST. Vincent GB	Governing B Meeting	22	10.56															
28-09-14	Vimont Lav		Lavay Liberty Grad	24	11.52															
10/02/14	Vimont Lav	Board Office	Parents Committee M	37	17.76															
10/05/14	Vimont Lav		Laurier S Graduation	22	10.56															
10/08/14	Vimont Lav	Board Office	Meeting	37	17.76															
10/07/14	Vimont Lav	Board Office	SEAC Meeting	37	17.76															
10/08/14	Vimont Lav	Mother Teresa	Phoenix Graduation	24	11.52															
GRAND TOTAL				\$	318.24	663	\$	318.24	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-

Amount Paid 318.24

ENTERED OCT 29 2014

BUDGET CODES			IMPORTANT	REQUESTED BY:
TRAVEL	\$ 318.24	203-1-51110-302	1- Attach original receipts to this form 2- The form must be signed by claimant and duly approved. 3- Kilometres are calculated at 0.48/km for first 5 000 km and \$0.45 for each additional kilometer as of March 1st, 2008	P
MEALS	\$ -	203-1-51110-302		
OTHER	\$ -	203-1-51110-302		
	XXX			
	XXX			
PIC - TRAVEL	\$ -	203-1-55500-302	***Do not write in this area***	NAME OF CLAIMANT
PIC-CONFERENCE	\$ -	203-1-55500-812		APPROVED BY:
PIC-LODGING	\$ -	203-1-55500-302		
PIC-MEALS	\$ -	203-1-55500-302		
PIC-OTHER	\$ -	203-1-55500-302		
*ADVANCE		000-1-01503-000		
TOTAL	\$ 318.24			NAME (Please)

*Note: If advance has been received and total is negative, the amount is to be reimbursed to the School Board.