



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

NAME		Grace Nesi		JOB TITLE		Commissioner		MONTH		June July September									
EMPLOYEE NO.								YEAR		2014									
				GENERAL EXPENSES				PROFESSIONAL IMPROVEMENT											
DATE (Day/Mth/Yr) (00/00/00)	LOCATION		DESCRIPTION/ NATURE OF BUSINESS	302 TRAVEL Standing Committees		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	Brd Office	Council	38	18.24														
07/09-14	Vimont	Brd Office	Council	38	18.24														
17/09/14	Vimont	Brd Office	Council	38	18.24														
18-09-14	Vimont		Fund Raiser	20	9.60														
				64.32															
GRAND TOTAL				\$	64.32	134	\$	64.32	\$	-	\$	-	\$	-	\$	-	\$	-	\$

ENTERED OCT 3 2014

RECEIVED
SCHOOL BOARD
OCT 10 2014

BUDGET CODES			IMPORTANT		REQUESTED BY:	
TRAVEL	\$ 64.32	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.		[Redacted]	
MEALS	\$ -	203-1-51110-302				
OTHER	\$ -	203-1-51110-302				
PIC - TRAVEL			***Do not write in this area***		APPROVED	
PIC-CONFERNCES	\$ -	203-1-55500-812				
PIC-LODGING	\$ -	203-1-55500-302				
PIC-MEALS	\$ -	203-1-55500-302				
PIC-OTHER	\$ -	203-1-55500-302				
*ADVANCE		000-1-01503-000				
TOTAL	\$ 64.32					

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

Rec'd Oct 29/2014

Revised 08/03/01



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

NAME		Gracie Nesi		JOB TITLE		Commissioner		MONTH		OCTOBER									
EMPLOYEE NO.								YEAR		2014									
				GENERAL EXPENSES				PROFESSIONAL IMPROVEMENT											
DATE (Day/Month/Year) (dd/mm/yy)	LOCATION		DESCRIPTION NATURE OF BUSINESS	302 TRAVEL Standing Committees		302 MEALS		302 OTHER		302 TRAVEL PIC		812 CONFERENCES		302 LODGING		302 MEALS		302 OTHER	
	FROM	TO		KM	AMOUNT	#	COST	COST	KM	AMOUNT	COST	#	AMOUNT	#	COST	COST			
02/10/14	Vimont	Brd Office	Parents Committee	38	18.24														
10/05/14	Vimont		LSHS Grad	12	5.76														
12/10/14	Vimont	MT	Poenix Grad	14	6.72														
								Amount paid 30.72											
								NOV - 6 2014											
								Initials											
								ENTERED ON 28/10/14											
GRAND TOTAL		\$ 30.72		64	\$ 30.72	5	\$ -	\$ -	\$ -	\$ -	5	\$ -	5	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

BUDGET CODES			IMPORTANT
TRAVEL	\$ 30.72	203-1-51110-302	1 - Attach original receipts to this form 2 - The form must be signed by claimant and duly approved. 3 - Kilometers are calculated at 20.48/km for first 5,000 km and 20.43 for each additional kilometer as of March 1st, 2008
MEALS	\$ -	203-1-51110-302	
OTHER	\$ -	203-1-51110-302	
	xxx		
	xxx		
PIC - TRAVEL	\$ -	203-1-55500-302	***Be not added to this category***
PIC - CONFERENCES	\$ -	203-1-55500-812	
PIC - LODGING	\$ -	203-1-55500-302	
PIC - MEALS	\$ -	203-1-55500-302	
PIC - OTHER	\$ -	203-1-55500-302	
*ADVANCE		000-1-01503-000	
TOTAL	\$ 30.72		

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