


Expense Reimbursement Authorization

Attached Documents

Review all sections of the form and then complete the last section at the bottom of the page.

TRUSTEE EXPENSE REIMBURSEMENT FORM

Task ID - Created 06-Nov-2021 03 19.38 PM - By Shali Baziuk - Processed 14-Feb-2022 08 49.24 PM - By Shali Baziuk

 Rocky View Schools										
TRUSTEE EXPENSE REIMBURSEMENT FORM										
Name:		Baziuk, Shali								
School/Department:		EC-Trustees								
Date:		06-Nov-2021								
	Date	Purpose	From/To Description		KMs	Roundtrip	Total KMs	GST Auto Calc	Amount Incl GST	Clear
Mileage @ \$0.52/km	02-Feb-2022	Expulsion Hearing	Chestermere to Ed Centre	<input checked="" type="checkbox"/>	41	<input checked="" type="checkbox"/>	82.00	2.03	42.64	
	03-Feb-2022	Board and Planning meeting	Chestermere to Ed Centre	<input checked="" type="checkbox"/>	41	<input checked="" type="checkbox"/>	82.00	2.03	42.64	
	10-Feb-2022	Planning and Budget meeting	Chestermere to Ed Centre	<input checked="" type="checkbox"/>	41	<input checked="" type="checkbox"/>	82.00	2.03	42.64	
	11-Feb-2022	Appeal Hearing	Chestermere to Ed Centre	<input checked="" type="checkbox"/>	41	<input checked="" type="checkbox"/>	82.00	2.03	42.64	
	13-Feb-2022	Appeal Hearing	Chestermere to Ed Centre	<input checked="" type="checkbox"/>	41	<input checked="" type="checkbox"/>	82.00	2.03	42.64	
							10.15		213.20	
	Date	Purpose	From/To Description		KMs	Roundtrip	Total KMs	GST Auto Calc	Amount Incl GST	Clear
Taxable Mileage @ \$0.52/km				<input type="checkbox"/>		<input type="checkbox"/>	0.00	0.00	0.00	
				<input type="checkbox"/>		<input type="checkbox"/>	0.00	0.00	0.00	
				<input type="checkbox"/>		<input type="checkbox"/>	0.00	0.00	0.00	
				<input type="checkbox"/>		<input type="checkbox"/>	0.00	0.00	0.00	
				<input type="checkbox"/>		<input type="checkbox"/>	0.00	0.00	0.00	
				<input type="checkbox"/>		<input type="checkbox"/>	0.00	0.00	0.00	
	Date	Purpose		Breakfast \$10.00	Lunch \$15.00	Dinner \$25.00	GST Auto Calc	Amount Incl GST		
Meal Allowances (Check box to select each required meal)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0.00	0.00		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0.00	0.00		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0.00	0.00		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0.00	0.00		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0.00	0.00		
	Date	Specify Expense Type	Description				GST Paid	Amount Incl GST		
Other Expenses (Input GST Paid & Attach Detailed Receipts)										
								0.00	0.00	
Submitting this form certifies that the foregoing expenses were incurred by me for Rocky View Schools business and are in compliance with School Division policy and guidelines. Click here to view Board Policy 7 Appendix B										
Please allow at least 90 days for payment processing. Incomplete forms (or forms missing detailed receipts) will be returned to employee for resubmission.										
							Total GST		Total Claim	
							\$10.15		\$213.20	
Note: Scanned receipts must be attached to support all expense claims (with the exception of mileage and meals)										
Comments / Instructions:										

Enter GL Coding / Tax Amounts:

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
	<input checked="" type="checkbox"/>	213.20	1	10.15
Total Without Taxes				203.05
Tax Total				10.15
Total With Taxes				213.20

GL DISTRIBUTION ENTRY WITH APPROVAL

Task ID - Created 14-Feb-2022 08 49.24 PM - By Shali Baziuk - Processed 15-Feb-2022 07 24.47 AM - By Norma Lang

Action Taken: No Objection

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
	<input checked="" type="checkbox"/>	213.20	1	10.15
Total Without Taxes				203.05
Tax Total				10.15
Total With Taxes				213.20

Comment:

ACCOUNTS PAYABLE CLERK SECTION

Task ID - Created 15-Feb-2022 07 24.48 AM - By Norma Lang - Processed 22-Feb-2022 02 02.25 PM - By Jenelle Weisgarber

Action Taken: Approve Expense

Period: 202206

Vendor Number: Baziuk, Shali

Invoice Number:

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
	<input checked="" type="checkbox"/>	213.20	1	10.15
Total Without Taxes				203.05
Tax Total				10.15
Total With Taxes				213.20

Comment:

FEB MILEAGE