

Expense Reimbursement Authorization

Attached Documents

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

EMPLOYEE EXPENSE REIMBURSEMENT FORM- SUPERINTENDENT

Task ID: Created: 12-Jul-2022 04:01.33 PM - By: Gregory Luterbach - Processed: 12-Jul-2022 04:01.33 PM - By: Gregory Luterbach

	Rocky View Schools
EMPLOYEE EXPENSE REIMBURSEMENT FORM- SUPERINTENDENT	

Name:	Luterbach, Gregory W
School/Department:	EC-Superintendent
Date:	12-Jul-2022

	Date	Purpose	From/To Description	KMs	Roundtrip	Total KMs	GST Auto Calc	Amount Incl GST	Clear
Mileage @ \$0.505/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	
							0.00	0.00	

	Date	Purpose		Breakfast \$9.20	Lunch \$11.60	Dinner \$20.75	GST Auto Calc	Amount Incl GST	Clear
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	
							0.00	0.00	

	Date	Specify Expense Type	Description		GST Paid	Amount Incl GST	Clear
Other Expenses (Input GST Paid & Attach Detailed Receipts)	12-Jul-2022	Roaming Charges	Easy Roam charges from PL event in USA		3.60	75.60	
					3.60	75.60	

<p>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. <a href="#">Click here to view AP5110.</a></p> <p>Please allow at least 90 days for payment processing. Incomplete forms(or forms missing detailed receipts) will be returned to employee for resubmission.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"></td> <td style="text-align: right;">Total GST</td> <td style="text-align: right;">Total Claim</td> </tr> <tr> <td colspan="2"></td> <td style="text-align: right;">\$3.60</td> <td style="text-align: right;">\$75.60</td> </tr> </table> <p>Note: Scanned receipts must be attached to support all expense claims (with the exception of mileage and meal allowances)</p> <p>Comments / Instructions:</p>			Total GST	Total Claim			\$3.60	\$75.60
		Total GST	Total Claim						
		\$3.60	\$75.60						

Enter GL Coding / Tax Amounts:				
GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
	<input checked="" type="checkbox"/>	75.60	1	3.60
				Total Without Taxes: 72.00
				Tax Total: <u>3.60</u>
				Total With Taxes: 75.60

GL DISTRIBUTION ENTRY WITH APPROVAL

Task ID: - Created: 12-Jul-2022 04:01.33 PM - By: Gregory Luterbach - Processed: 17-Jul-2022 02:48.20 PM - By: Norma Lang

Action Taken: No Objection

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
	<input checked="" type="checkbox"/>	75.60	1	3.60
				Total Without Taxes: 72.00
				Tax Total: <u>3.60</u>
				Total With Taxes: 75.60

Comment

ACCOUNTS PAYABLE CLERK SECTION

Task ID - Created: 17-Jul-2022 02:48.20 PM - By: Norma Lang - Processed: 20-Jul-2022 09:46.06 AM - By: Cinty Ramjattan

Action Taken: Approve Expense

Period: 202211  
Vendor Number: Luterbach, Gregory W  
Invoice Number:

GL Account Number	Taxes Included	Amount	Tax Code	Tax Amount
	<input checked="" type="checkbox"/>	75.60	1	3.60
				Total Without Taxes: 72.00
				Tax Total: <u>3.60</u>
				Total With Taxes: 75.60

Comment