

March 13, 2008 (Modified January 23, 2019)



**SCHOOL DISTRICT NO. 92 (NISGA'A)
BOARD OFFICE**

PO Box 240, Phone: 250-633-2228
New Aiyansh, BC Fax: 250-633-2401
V0J 1A0

EXPENSE REIMBURSEMENT
Original form only will be processed

Please attach receipts, ticket stubs, etc. securely to the form before submitting to the Board Office. **SEE REVERSE.**

| | |
|---|--|
| Name: _____ Address: _____ _____ Headquarters at: _____ | Purpose of Travel – Workshop Title or Meeting with: _____ Location: _____ Dates: _____ |
|---|--|

Code/Cost Distribution: _____

| Date (mm-dd-yyyy) | Travel to/from: (personal vehicle use) | Mileage | Accommodations <small>Receipts required for commercial establishment</small> | Miscellaneous Expenses – Transportation <small>Receipt(s) required.</small> | Meals <small>Check (✓) if applicable</small> |
|-----------------------------|---|------------------------------|---|---|---|
| | | # of km. _____ X \$0.64 = | | | Breakfast \$11 Lunch \$17 Dinner \$25 |
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| | | # of km. _____ X \$0.64 = | | | Breakfast \$11 Lunch \$17 Dinner \$25 |
| | TOTAL: | 1. | 2. | 3. | 4. |
| TOTAL OF COLUMNS 1-4 | | | | | |
| Trans #: | | Batch #: | | | |

Certified this is a true statement of disbursements made by me at the places shown and that I have not been and will not be reimbursed for them by outside parties:

Claimant Signature: _____

Approved By: _____

Date Approved: _____

| FOR INTERNAL USE ONLY | |
|---|--|
| Total of Columns 1-4: | |
| Deduct Advances if Applicable: | |
| Net Amount for Cheque: | |
| A copy of this form will be returned to claimant with reimbursement. | |

School District 92 **Policy #806**

The Board of School Trustees shall reimburse employees and individual Trustees for authorized travel and business expenses incurred while carrying out their official duties and in accordance with the Regulation to this Policy.

School District 92 **Regulation #806**

All travel on Board or District business on behalf of the Board must be approved by the immediate supervisor AND the Secretary Treasurer. The travel of the Superintendent of Schools shall have the Board Chair or Alternate and the Secretary Treasurer shall have the approval of the Superintendent of Schools, or in his/her absence, the Board Chair.

Any request for reimbursement for expenses must be accompanied by a completed Expense Report and include any required receipts prior to being reimbursed for expenses.

RECEIPTS ARE NOT REQUIRED FOR:

1. MEALS: which are reimbursed at the following rates, to a maximum of \$53.00/day:
 - Breakfast - \$11.00
 - Lunch - \$17.00
 - Dinner - \$25.00
2. MILEAGE: in accordance with the Board Mileage chart or actual mileage @ the current BCSTA rate.
**NOTE: Fuel expense shall not be paid when claiming mileage.
**For travel in excess of 800 km round trip, the following shall apply:
 - a. If an individual chooses to drive rather than fly, the mileage allowance shall not exceed the two-week advance booking rate for air fare.
 - b. One travel day each way is allowed, and meals may be claimed as required. Accommodation shall be reimbursed for one travel day only.
 - c. Alternate travel such as commercial bus lines shall be reimbursed at cost.
 - d. Travel days during inclement weather shall be subject to review by the employee's supervisor.
3. Mileage for employees who are authorized to use their vehicles within the village shall be reimbursed at the rate of \$1.50/trip to a maximum of \$4.50/day between the place of employment and return.
4. If an individual chooses to stay with friends or relatives instead of at a commercial establishment, a daily rate of \$40.00 shall be paid.

ORIGINAL RECEIPTS ARE REQUIRED FOR: Airfare, airport improvement fees, shuttle bus, taxis, ferry, busses, hotel room and out-of-pocket purchases of school supplies.

The District shall reimburse employees and individual Trustees only.

Requests for reimbursement must be completed within one week of returning from a trip.

BEFORE SUBMITTING YOUR EXPENSE REPORT: Please check that receipts are attached, the expenses have been "Certified Correct" by the immediate supervisor with applicable codes. Your reimbursement will be sent via inter-office mail or Canada Post if applicable, along with a copy of this expense report. Please attach additional sheets if more space is required.