Amount paid 31.20

Revised 08/03/01

AN ENGLISH EDUCATION, A BILINGUAL FUTURE

UNE ÉDUCATION EN ANGLAIS, UN AVENIR BILINGUE

AUG 05 2021

Initials

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

NAME	BOBBY PELLERIN	JOB TITLE	Commissioner	MONTH	June
EMPLOYEE NO.	[redacted]			YEAR	2021

DATE (Yr-Mth-Day) 2011-01-01	LOCATION		DESCRIPTION/ NATURE OF BUSINESS	GENERAL EXPENSES						PROFESSIONAL IMPROVEMENT							
				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
2021-06-22	Joliette	Rawdon	PED	65	31.20												
GRAND TOTAL			$ 31.20	65	$ 31.20		$ -	$ -			$ -	$ -		$ -		$ -	$ -

ENTERED JUL 14 2021

REÇU RECEIVED FINANCE JUL - 5 2021 C.S. SIR WILFRID LAURIER SIR WILFRID LAURIER SCHOOL BOARD

BUDGET CODES		
TRAVEL	$ 31.20	203- 1- 51110 - 302
MEALS	$ -	203- 1- 51110 - 302
OTHER	$ -	203- 1- 51110 - 302
	XXX	
	XXX	
PIC - TRAVEL	$ -	203- 1- 55500 - 302
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	$ 31.20	-

**** IMPORTANT ****

- Kilometers are calculated at $0.44/km.
- Attach ORIGINAL receipts to this form.
- This form must be signed by claimant and duly approved.
- Expense claims must be submitted by 4:30 pm to Finance on the Wednesday of the week preceding a pay in order for it to be processed for the followingpay.
- Please complete this form electronically. This form is available on the Portal.

REQUESTED [redacted]:

NAME OF CLAIMA[redacted]

APPROVED BY:

NAME (Please [redacted]