AN ENGLISH EDUCATION, **A BILINGUAL FUTURE**

COMMISSION SCOLAIRE SIR-WILFRID-LAURIER
SIR WILFRID LAURIER SCHOOL BOARD

UNE ÉDUCATION EN ANGLAIS, **UN AVENIR BILINGUE**

EXPENSES REIMBURSEMENT POLICY FORM - ALL EMPLOYEES

NAME:	*Donna Anber*	SCHOOL:		PERIOD:	
EMPL.#: [redacted]	PHONE #: [redacted]	JOB TITLE:	*Commissioner*	YEAR :	*2021-2022*

DATE (Mth/Dy/Yr) (AA/00/00)	LOCATION FROM	LOCATION TO	DESCRIPTION/ NATURE OF BUSINESS	TRAVEL CENTRAL Principal & Management Advisory Meetings KM	TRAVEL CENTRAL AMOUNT	REGULAR TRAVEL @ $0.48/KM KM	REGULAR TRAVEL AMOUNT	CAR POOLING TRAVEL @ $0.53/KM KM	CAR POOLING COST	MEALS #	MEALS COST	LODGING # DAYS	LODGING COST	OTHER COST
03/09/2022	[redacted]					124	$ 59.42		$ -					
03/11/2022						48	$ 23.23							
04-21-2022						124	$ 59.52							
04-29-2022						48	$ 23.23							
05-12-2022						32	$ 15.36		$ -					
05-14-2022						138	$ 66.34		$ -					
05-17-2022						103	$ 49.44		$ -					
05-18-2022						178	$ 85.25		$ -					
05-18-2022						133	$ 64.03		$ -					
							$ -		$ -					
							$ -							
							$ -		$ -					
							$ -		$ -					
							$ -		$ -					
							$ -							
							$ -		$ -					
GRAND TOTAL:			**$ 445.82**		**$ -**	929	**$ 445.82**		**$ -**		$ -		$ -	$ -

BUDGET CODES

				PROJECT CODE
TRAVEL CENTRAL (PRINCIPALS ONLY)	$ -	200-1-21120-	308	
TRAVEL (SCH G/L)	$ 445.82	203-51110	302	
LODGING/MEALS	$ -	203-51110	302	
CAR POOLING TRAVEL (SCH G/L)	$ -	203-51110	302	
OTHER			592	
OTHER				
OTHER				
TOTAL	**$ 445.82**			

***** IMPORTANT *****

1. Kilometers are calculated at $0.48/km.
2. **Car pooling kilometers are calculated at $0.53/km. You must provide names of passengers in the descriptions line.**
3. Attach ORIGINAL receipts to this form.
4. This form must be signed by claimant and approved by your immediate supervisor.
5. This expense claim form is not to be used for the purchasing of equipment and supplies for your school or department. The normal purchasing procedures must be followed.
6. Expense claims must be submitted by 4:30 pm to Finance on the Tuesday of the week preceding a pay in order for it to be processed for the following pay. Principals, please send to Manon Monette.
7. Please complete this form electronically. This form is available on the Portal.

REQUESTED BY:

[redacted]

NAME (Please print):

(Immediate Superior)