



990 Cedar Street, Campbell River, BC, V9W 7Z8

**STAFF EXPENSE CLAIM FORM
EXEMPT STAFF**

NAME: Madison Stewart

DATE: Feb 29 2024

ADDRESS: [Redacted]

PURPOSE OF CLAIM: Discovery Island Affordable Housing Society AGM (Quadra Island) & More Eatery return pla

Date	Description of Expense (include "from" & "to" for km's traveled)	Expenses \$ Amount	Kilometers Traveled	
			Paved	Unpaved
Feb 19 2024	SRD to Quadra Island Rec Centre	\$9.24	13.2	
Feb 22 2024	Return January Meeting Platters to More Ea	\$3.78	5.4	
FORMULAS - PLEASE LEAVE AS IS	SUB-TOTAL	\$ 13.02	18.6	0
	RATE/KM	n/a	\$ 0.70	\$ 0.82
	TOTAL CLAIM	\$ 13.02	\$ 18.6	\$ 0

(a) (b) (c)
(a+b+c)

REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS

- Commercial Accommodation => Actual Cost @ Gov't Rates
- Non-Commercial Accommodations => \$35/night
- Per Diem & Meal Allowance => \$125/day
Rate Breakdown:
Breakfast -> \$20
Lunch -> \$25
Dinner -> \$35
Incidentals -> \$45 (for trips in excess of 24 hrs only)
- All other expenses => Actual Cost

TOTAL EXPENSES \$ 13.02

Less Advance Acct 01-3-000-649 \$

NET CLAIM \$ 13.02

"I hereby request reimbursement of these expenses and certify that they were incurred as a result of travel on Strathcona Regional District business and that I will not be reimbursed for them by any other party."

Madison Stewart
SIGNATURE OF PERSON MAKING CLAIM

February 29th 2024
DATE

Approved for Payment *A. Nelson* Account No. 01-2-400-320 AV63 Vendor No.



STAFF EXPENSE CLAIM FORM
EXEMPT STAFF

NAME: Madison Stewart

DATE: Feb 29 2024

ADDRESS: [REDACTED]

PURPOSE OF CLAIM: BC Legislature Throne Speech and Budget

Date	Description of Expense (include "from" & "to" for km's traveled)	Expenses \$ Amount	Kilometers Traveled		
			Paved	Unpaved	
Feb 22 2024	Dinner	\$35.00			
Feb 23 2024	Breakfast, incidentals	\$65.00			
FORMULAS - PLEASE LEAVE AS IS		SUB-TOTAL	\$ 100.00	0	0
		RATE/KM	n/a	\$ 0.70	\$ 0.82
		TOTAL CLAIM	\$ 100.00	\$ 0	\$ 0

(a) (b) (c)

(a+b+c)

REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS

- Commercial Accommodation => Actual Cost @ Gov't Rates
- Non-Commercial Accommodations => \$35/night
- Per Diem & Meal Allowance => \$125/day
Rate Breakdown:
Breakfast -> \$20
Lunch -> \$25
Dinner -> \$35
Incidentals -> \$45 (for trips in excess of 24 hrs only)
- All other expenses => Actual Cost

TOTAL EXPENSES \$ 100.00

Less Advance
Acct 01-3-000-649 \$

NET CLAIM \$ 100.00

"I hereby request reimbursement of these expenses and certify that they were incurred as a result of travel on Strathcona Regional District business and that I will not be reimbursed for them by any other party."

Madison Stewart
SIGNATURE OF PERSON MAKING CLAIM

February 29th 2024
DATE

Approved for Payment A. Wilson Account No. 01-2-401-320 A163 Vendor No.



301-990 Cedar Street, Campbell River, BC, V9W 7Z8

**STAFF EXPENSE CLAIM FORM
EXEMPT STAFF**

NAME: Madison Stewart DATE: July 5 2024

ADDRESS: [REDACTED]

PURPOSE OF CLAIM: Tahsis Engagement and RSWAC Meeting (Courtenay)

Date	Description of Expense (include "from" & "to" for km's traveled)	Expenses \$ Amount	Kilometers Traveled	
			Paved	Unpaved
June 13 2024	Incidentals for overnight in Tahsis	\$ 45.00		
June 27 2024	From SRD to CVRD		54.20	
June 27 2024	From CVRD to Home		47.00	
FORMULAS - PLEASE LEAVE AS IS	SUB-TOTAL	\$ 45.00	101.20	-
	RATE/KM	n/a	\$ 0.68	\$ 0.80
	TOTAL CLAIM	\$ 45.00	\$ 68.82	\$ -

(a) (b) (c)
(a+b+c)

REFER TO STAFF TRAVEL POLICY FOR TRAVEL CLAIM EXPECTATIONS

- Commercial Accommodation => Actual Cost @ Gov't Rates
- Non-Commercial Accommodations => \$35/night
- Per Diem & Meal Allowance => \$125/day
Rate Breakdown:
Breakfast -> \$20
Lunch -> \$25
Dinner -> \$35
Incidentals -> \$45 (for trips in excess of 24 hrs only)
- All other expenses => Actual Cost

TOTAL EXPENSES	\$	113.82
Less Advance Acct 01-3-000-649	\$	-
NET CLAIM	\$	113.82

"I hereby request reimbursement of these expenses and certify that they were incurred as a result of travel on Strathcona Regional District business and that I will not be reimbursed for them by any other party."

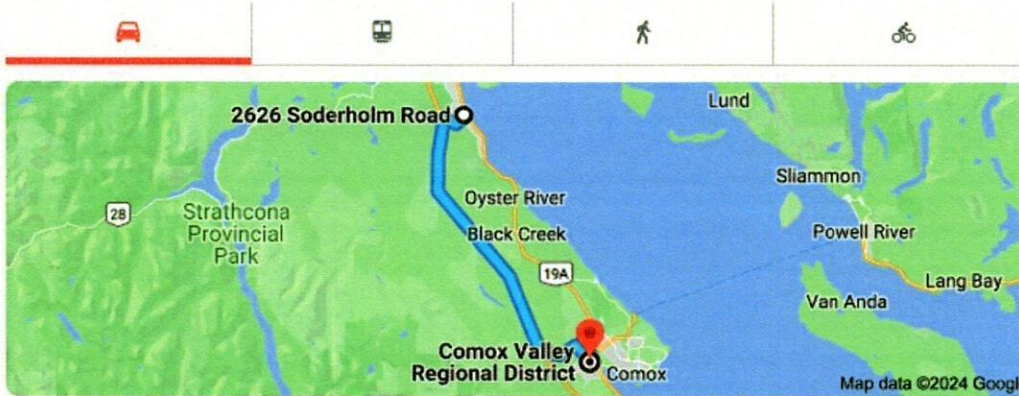
Madison Stewart
SIGNATURE OF PERSON MAKING CLAIM

July 5 2024
DATE

Approved for Payment <u>[Signature]</u>	Account No. <u>01-2-401-320</u>	Vendor No. <u>ANF</u>
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○ 2626 Soderholm Road Campbell River, BC

○ Comox Valley Regional District, 770 Harmston Ave, Courtenay, BC V9N 2X6



35 min (47.0 km) via BC-19 S

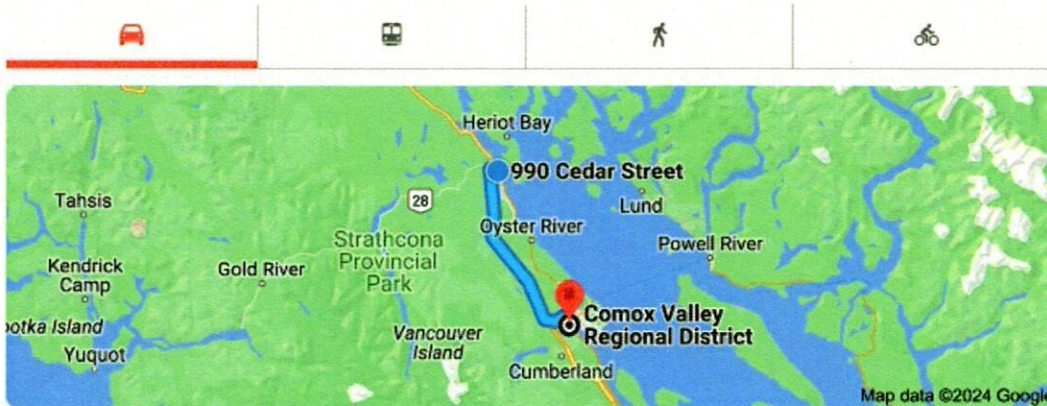


Directions

39 min (39.6 km) via S Island Hwy/BC-19A

○ 990 Cedar Street Campbell River, BC

○ Comox Valley Regional District, 770 Harmston Ave, Courtenay, BC V9N 2X6



42 min (54.2 km) via Inland Island Hwy/BC-19 S



Directions

48 min (46.2 km) via S Island Hwy/BC-19A S