Out-of-Town Travel Expense Account



EMPLOYEE	#	VENDOR #										
			Accou	unting								
			Use C	nly								
SECTION 1 - CLAIMANT EMPLOYEE NAME EMAIL PERIOD OF TRAVEL												
EMPLOYEE NAME Councillor Patty Cuttell Cuttelp@halifax.ca PERIOD OF FROM 2022								2022-06-06				
HRM WORK L												
4th Floor, City Hall 902.221.6893 Regina, Saskatchewan PURPOSE OF TRAVEL (CONFERENCE, COURSE, NAME OF ORGANIZATION, ETC.)												
FCM 2022 Annual Conference and Trade Show												
SECTION 2 – T	DIRECT PAID	TOTAL										
		CLAIM AMOUNT	BY HRM	EXPENSE								
TRANSPORA (select from d		\$ 1,299.85	\$ 1,299.85									
KILOMETRAG	SE 0 – 16,000	\$ 0.00		\$ 0.00								
	16,001+ kı	\$ 0.00		\$ 0.00								
SECTION 3 – DESTINATION EXPENSES (attach receipts) - see page 2 for worksheet and additional details.												
ACCOMMODATIONS Paid for by Councillor Sam Austin (5 Nights x\$794.60)								\$ 0.00				
MEALS per diem (B \$13, L \$15, D \$27) Daily Total: \$55								\$ 330.00				
GROUND TRA	ANSPORTATION	\$ 9.25		\$ 9.25								
INCIDENTALS	\$ 60.00		\$ 60.00									
SUBTOTAL						\$ 399.25	\$ 1,299.85	\$ 1,699.10				
OTHER ELIGIBLE EXPENSES	Airport Parking	3			\$ 80.00		\$ 80.00					
	Conference Re	gistration (6902)				\$ 966.00	\$ 966.00					
(specify and attach receipts)							\$ 0.00					
TOTALS: CL	AIM AMOUN	Γ & DIRECT PA	ID BY HRM	S 2 & 3)	\$ 479.25	\$ 2,265.85						
	TOTAL COST OF OUT-OF-TO							\$ 2,745.10				
TOTAL AMOUNT REIMBURSABLE TO EMPLOYEE												
LESS ADVANCE RECEIVED ON												
BALANCE OWING (if negative, employee must repay amount to HRM)												
PAYABLE: TO EMPLOYEE FROM HRM FROM EMPLOYEE TO HRM												
COMPAN	IY CODE	COST	COST CENTRE EXPENS			CODE	AMOUNT					
HROP		E2	00 690			4	\$ 479	9.25				
EMPLOYEE SIGNATURE Cuttell, Patty Digitally signed by Cuttell, Patty Date: 2022.08.31 15:28:15 -03'00'							DATE					
*APPROVED BY (NAME & TITLE) Quentin Hill, Manager												
*APPROVER SIGNATURE							DATE					

^{*} Refer to the Employment Expense Authorization Grid in section seven (7) of the Employment Expense Reimbursement Policy for a listing of authorized approvers.

Week 1		Day 1	Day 2		Day 3	Day 4	Day 5	Day 6	Day 7
Da	te [6/1/22	6/2/	'22	6/3/22	6/4/22	6/5/22	6/6/22	
Accommodations									
	в	\$ 13.00	\$	13.00	\$ 13.00	\$ 13.00	\$ 13.00	\$ 13.00	
Meals (See daily	ㄴ [\$ 15.00	\$	15.00	\$ 15.00	\$ 15.00	\$ 15.00	\$ 15.00	
maximums below)	s [\$ 27.00	\$	27.00	\$ 27.00	\$ 27.00	\$ 27.00	\$ 27.00	
Ground Transportation							\$ 9.25		
Incidentals		\$ 10.00	\$ 10.00	\$ 10.00	\$ 10.00	\$ 10.00	\$ 10.00		
Other Daily Totals								\$ 80.00	
		\$ 65.00	\$	65.00	\$ 65.00	\$ 65.00	\$ 74.25	\$ 145.00	\$ 0.00
Week 2		Day 1	Day 2		Day 3	Day 4	Day 5	Day 6	Day 7
Da	te								
Accommodations									
Meals	в								
(See daily maximums below)	ᆫ								
S									
Ground Transportation									
Incidentals									
Other									
Daily Totals		\$ 0.00	\$ 0.00		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
ACCOMMODATIONS TOTAL		MEALS TOTAL			GROUND NSPORTATION TOTAL	INCIDENTALS TOTAL		OTHER TOTAL	
\$ 0.00		\$ 330.0	00		\$ 9.2	5	\$ 60.00		\$ 80.00

Accommodations: Detailed receipts required.

Meals: Per diem reimbursement (no receipts required) inclusive of tax & gratuities.

Breakfast (B) \$13.00 Lunch (L) \$15.00 Supper (S) \$27.00 DAILY MAXIMUM

*Meal reimbursements in excess of per diem amount require Director's approval and must be supported with appropriate detailed receipts for

allowable expenses for the day.

Meal cost will not be reimbursed where the cost is included in the air fare or in registration fees at conventions, conferences, training institutions, etc.

Ground Transportation: Detailed receipts required.

\$55.00*

Incidentals: Daily rate \$10.00 (no receipts required).

Amounts shown above are Canadian Funds. All expenses should be converted to Canadian funds on Page 1 of claim (specify conversion rate used).