



OUT OF TOWN TRAVEL EXPENSE ACCOUNT

For Accounting Use Only

VENDOR #

[Empty box]

EMPLOYEE #

[Empty box]

SECTION 1

| | | | |
|---|---------------------|---|--|
| EMPLOYEE NAME (Please Print) Bill Karsten | | PERIOD OF TRAVEL From Nov 18, 2018 To Nov 23, 2018 | |
| HRM WORK LOCATION 4th Floor, City Hall | PHONE # 490-4050 | DESTINATION Ottawa, Ontario | |
| PURPOSE OF TRAVEL (CONFERENCE, COURSE, NAME OF ORGANIZATION ETC) FCM 2018 November Board Meeting | | | |

SECTION 2

| TRAVEL TYPE | USE DROP DOWN MENU TO SELECT | AMOUNTS | CLAIM | CHARGED TO HRM |
|-------------|------------------------------|------------|----------|----------------|
| Air | | | | \$ 571.40 |
| MILEAGE | 76 KMS AT 0.46 PER KM | \$ 34.96 ✓ | \$ 34.96 | |
| | | | | |

SECTION 3

| MEALS AND LODGING: (ATTACH RECEIPTS) Please see page 2 for detailed Instructions | | AMOUNTS | CLAIM | CHARGED TO HRM |
|--|---------------------------|-------------------|---------------------|---------------------|
| ACCOMMODATIONS | Fairmount Chateau Laurier | \$1,363.25 ✓ | | |
| MEALS | 3 Dinner per diem | \$ 81.00 ✓ | | |
| GROUND TRANSPORTATION | Taxi | \$ 40.00 ✓ | | |
| INCIDENTALS | 5 Days | \$ 50.00 | | |
| | Total | \$1,534.25 | \$1,534.25 | |
| ELIGIBLE MISCELLANEOUS EXPENSES- NOT INCLUDED ABOVE: (ATTACH RECEIPTS) | | | | |
| | Baggage (69.00) | | | |
| | Airport Parking (110.00) | | | |
| | | | \$ 179.00 | |
| TOTAL EXPENSES - SECTION 2+3 | | | \$1,748.21 ✓ | \$ 571.40 |
| TOTAL COST THIS CLAIM & CHARGE DIRECT | | | | \$2,319.61 ✓ |

TOTAL TO BE REIMBURSED TO EMPLOYEE \$1,748.21

LESS ADVANCE RECEIVED DATED _____ AMOUNT _____

BALANCE OWING HRM Employee AMOUNT \$1,748.21

| COMPANY CODE | COST CENTER | EXPENSE CODE | AMOUNT |
|--------------|-------------|--------------|------------|
| HROP | E200 | 6904 | \$1,748.21 |

Employee Signature [Redacted] Date [Empty box]

Approved by Name and Title (Please Print) [Redacted]

Approving Signature [Redacted] Date [Redacted]

| Week 1 | | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|-----------------------|------------|------------|------------|------------|------------|------------|------------|-------|
| Date | YYYY-MM-DD | 2018-11-18 | 2018-11-19 | 2018-11-20 | 2018-11-21 | 2018-11-22 | 2018-11-23 | |
| Accommodations | | \$ 272.65 | \$ 272.65 | \$ 272.65 | \$ 272.65 | \$ 272.65 | | |
| Meals | B | | | | | | | |
| | L | | | | | | | |
| | S | \$00.00 | 27.00 | \$27.00 | | \$27.00 | | |
| Ground Transportation | | \$ 34.96 | | | | | \$ 40.00 | |
| Incidentals | | \$ 10.00 | \$ 10.00 | \$ 10.00 | \$ 10.00 | \$ 10.00 | | |
| Other | | \$ 34.50 | | | | | \$ 144.50 | |
| Totals | | \$ 352.11 | \$ 309.65 | \$ 309.65 | \$ 282.65 | \$ 309.65 | \$ 184.50 | |

| Week 2 | | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|-----------------------|------------|-------|-------|-------|-------|-------|-------|-------|
| Date | YYYY-MM-DD | | | | | | | |
| Accommodations | | | | | | | | |
| Meals | B | | | | | | | |
| | L | | | | | | | |
| | S | | | | | | | |
| Ground Transportation | | | | | | | | |
| Incidentals | | | | | | | | |
| Other | | | | | | | | |
| Totals | | | | | | | | |

Accommodations: Detailed receipts required

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

| | |
|---------------|-----------------|
| Breakfast | \$13.00 |
| Lunch | \$15.00 |
| Supper | \$27.00 |
| DAILY MAXIMUM | <u>\$55.00*</u> |

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.

*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.

Ground Transportation: Detailed receipts required

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).