



OUT OF TOWN TRAVEL EXPENSE ACCOUNT

For Accounting Use Only

VENDOR #

EMPLOYEE #

SECTION 1

| | | | |
|---|----------------------------|---|--|
| EMPLOYEE NAME (Please Print) Lisa Blackburn | | PERIOD OF TRAVEL From May 30, 2019 To Jun 3, 2019 | |
| HRM WORK LOCATION 4th Floor, City Hall | PHONE # 490-4050 | DESTINATION Quebec City, Quebec | |
| PURPOSE OF TRAVEL (CONFERENCE, COURSE, NAME OF ORGANIZATION ETC) FCM 2019 Annual Conference & Tradeshow | | | |

SECTION 2

| TRAVEL TYPE | AMOUNTS | CLAIM | CHARGED TO HRM |
|----------------------------------|----------|----------|----------------|
| Air USE DROP DOWN MENU TO SELECT | | | \$ 736.28 |
| MILEAGE 56 KMS AT 0.46 PER KM | \$ 25.76 | \$ 25.76 | |
| _____ KMS AT _____ PER KM | | | |

SECTION 3

| MEALS AND LODGING: (ATTACH RECEIPTS) Please see page 2 for detailed instructions | | | | | |
|---|--|------------|------------|--|------------|
| ACCOMODATIONS The Hilton Quebec | | \$1,232.84 | | | |
| MEALS 2 Breakfast 5 Lunch 4 Supper | | \$ 209.00 | | | |
| GROUND TRANSPORTATION Taxi | | \$ 42.12 | | | |
| INCIDENTALS 4 Days | | \$ 40.00 | | | |
| Total | | \$1,523.96 | \$1,215.75 | | \$ 308.21 |
| ELIGIBLE MISCELLANEOUS EXPENSES- NOT INCLUDED ABOVE: (ATTACH RECEIPTS) | | | | | |
| Baggage | | | | | |
| Conference Fee (E200-6902) | | | \$ 69.00 | | \$1,004.88 |
| TOTAL EXPENSES - SECTION 2 + 3 | | | \$1,310.51 | | \$2,049.37 |
| | | | | TOTAL COST THIS CLAIM & CHARGE DIRECT | \$3,359.88 |

TOTAL TO BE REIMBURSED TO EMPLOYEE \$1,310.51

LESS ADVANCE RECEIVED DATED: _____ AMOUNT _____

BALANCE OWING HRM Employee AMOUNT \$1,310.51

| COMPANY CODE | COST CENTER | EXPENSE CODE | AMOUNT |
|--------------|-------------|--------------|------------|
| HR0P | E200 | 69041310 | \$1,310.51 |

Employee Signature

Date

Approved by Name and Title (Please Print)

Approving Signature

Date

| Week 1 | | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
|-----------------------|------------|------------|------------|------------|------------|------------|-------|-------|
| Date | YYYY-MM-DD | 2019-05-30 | 2019-05-31 | 2019-06-01 | 2019-06-02 | 2019-06-03 | | |
| Accommodations | | | \$ 308.21 | \$ 308.21 | \$ 308.21 | | | |
| Meals | B | | | \$13.00 | | \$13.00 | | |
| | L | \$15.00 | \$15.00 | \$15.00 | \$15.00 | \$15.00 | | |
| | S | \$27.00 | 27.00 | \$27.00 | | \$27.00 | | |
| Ground Transportation | | | | | | \$ 42.12 | | |
| Incidentals | | \$ 10.00 | \$ 10.00 | | \$ 10.00 | \$ 10.00 | | |
| Other | | \$ 34.50 | | | | \$ 34.50 | | |
| | | \$ 12.88 | | | | \$ 12.88 | | |
| Totals | | \$ 99.38 | \$ 360.21 | \$ 363.21 | \$ 333.21 | \$ 154.50 | | |

| 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)

Receipts should be converted to Canadian funds on Page 1 of claim (specify conversion rate used).