

# Out-of-Town Travel Expense Account



<b>EMPLOYEE #</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<b>VENDOR #</b> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<b>Accounting Use Only</b>
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## SECTION 1 - CLAIMANT

<b>EMPLOYEE NAME</b> Iona Stoddard	<b>EMAIL</b> iona.stoddard@halifax.ca	<b>PERIOD OF TRAVEL</b> FROM 2023-08-08 TO 2023-08-11
<b>HRM WORK LOCATION</b> City Hall	<b>PHONE</b> 902.240.7926	<b>DESTINATION</b> Ottawa
<b>PURPOSE OF TRAVEL</b> (CONFERENCE, COURSE, NAME OF ORGANIZATION, ETC.) Canadian Congress of Black Parliamentarians		

## SECTION 2 – TRAVEL EXPENSES

EXPENSE	CLAIM AMOUNT	DIRECT PAID BY HRM	TOTAL EXPENSE
<b>TRANSPORATION</b> (select from drop down menu) Air		\$ 510.19	\$ 510.19
<b>KILOMETRAGE</b> 0 – 20,000 km: <u>92.8</u> kms at <u>0.5770</u> per km	\$ 53.55		\$ 53.55
20,000.1+ km: _____ kms at <u>0.5092</u> per km	\$ 0.00		\$ 0.00

## SECTION 3 – DESTINATION EXPENSES (attach receipts) - see page 2 for worksheet and additional details.

<b>ACCOMMODATIONS</b> Marriott Bonvoy		\$ 842.62	\$ 842.62
<b>MEALS</b> Per diem - Only 1 breakfast provided (no other meals)	\$ 207.00		\$ 207.00
<b>GROUND TRANSPORTATION</b> Taxi to/from Airport, local travel (see receipts)	\$ 90.00		\$ 90.00
<b>INCIDENTALS</b> Per diem x3, checked baggage x2 (see receipts)	\$ 99.00		\$ 99.00
<b>SUBTOTAL</b>	\$ 449.55	\$ 1,352.81	\$ 1,802.36
<b>OTHER ELIGIBLE EXPENSES</b> (specify and attach receipts)			\$ 0.00
			\$ 0.00
			\$ 0.00
<b>TOTALS: CLAIM AMOUNT &amp; DIRECT PAID BY HRM (SECTIONS 2 &amp; 3)</b>	\$ 449.55	\$ 1,352.81	
<b>TOTAL COST OF OUT-OF-TOWN TRAVEL</b>			\$ 1,802.36

<b>TOTAL AMOUNT REIMBURSABLE TO EMPLOYEE</b>	\$ 449.55
<b>LESS ADVANCE RECEIVED ON</b>	
<b>BALANCE OWING</b> (if negative, employee must repay amount to HRM)	
<b>PAYABLE:</b> <input checked="" type="radio"/> TO EMPLOYEE FROM HRM <input type="radio"/> FROM EMPLOYEE TO HRM	\$ 449.55

COMPANY CODE	COST CENTRE	EXPENSE CODE	AMOUNT
	MA000012	6904	

<b>EMPLOYEE SIGNATURE</b> 	<b>DATE</b> 2023-09-15
<b>*APPROVED BY (NAME &amp; TITLE)</b> Jerry Blackwood, CFO	
<b>*APPROVER SIGNATURE</b> 	<b>DATE</b>

\* 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
	Date	8/8/23	8/9/23	9/10/23	9/11/23			
	Accommodations	\$ 280.87	\$ 280.87	\$ 280.88				
	B	\$ 13.00	\$ 13.00		\$ 13.00			
	L	\$ 15.00	\$ 15.00	\$ 15.00	\$ 15.00			
	S	\$ 27.00	\$ 27.00	\$ 27.00	\$ 27.00			
	Meals (See daily maximums below)							
	Ground Transportation							
	Incidentals		\$ 10.00	\$ 10.00	\$ 10.00			
	Other							
	Daily Totals	\$ 335.87	\$ 345.87	\$ 332.88	\$ 65.00	\$ 0.00	\$ 0.00	\$ 0.00

Week 2		Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
	Date							
	Accommodations							
	B							
	L							
	S							
	Meals (See daily maximums below)							
	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 TRANSPORTATION TOTAL	INCIDENTALS TOTAL	OTHER TOTAL
\$ 842.62	\$ 207.00	\$ 0.00	\$ 30.00	\$ 0.00

**Accommodations:** Detailed receipts required.

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

Breakfast (B)	\$13.00	*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.
Lunch (L)	\$15.00	
Supper (S)	\$27.00	
DAILY MAXIMUM	\$55.00*	

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.

**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).