expense | monthly tracking report

claimant | Cooper, Lori

position | Education Director

level | Director

reporting period | March 1 to April 30, 2024

date of report | Friday, June 7, 2024



Description	Date (mm/dd/yyyy)	Details and/or Rationale	Amount (CDN\$)	Category	Expense Type
CASS Annual Learning	03/18/2024	Business Travel	\$196.68	travel	PD accommodation
Conference 2024					
CASS Annual Learning	03/18/2024	Busines Travel	\$52.00	travel	PD food/non alcoholic beverage
Conference 2024					



Travel & Subsistence Expense Report

Must be completed upon return from every business trip for reporting purposes and any out of pocket expenditures. Return completed to Accounts Payable (CBEAccountsPayable@cbe.ab.ca) with a copy of your approved *Travel Within Alberta form.*

Details of Trip I Please Print			Date: _	March 20, 2024		
Employee's Name Lori Cooper			_Vendor#:			
School / Department to mail cheque to Area	41 Core Curric	ulum & Asse	ssment K-12			
Purpose of Trip/ Name of Conference CAS	S Annual Learr	ning Confere	nce 2024			
Departure and Return Dates March 18-19, 2024 Destination:				: Edmonton, Alberta		
						
Description of Expenses	Total Cost (Ganacian Dollars)	Exchange Rate	Amount Paid byCBE	Amount Paid by Claimant	Alias to be charged for Claimant's Expenses	
(Please attach receipts)		(for infom,ation purposes)	Invoice/P-Card/ Arre:,/ Payroll for Mileage (induding GST)	For Out of Pocket Expenditures (induding GST)	очинальс Бролос	
Registration/Conference Fees						
Travel Costs						
Airfare (including trip cancellation insurance)						
• Rail/Bus						
Taxi/Shuttle Bus/Car Rental in Calgary						
Taxi/Shuttle Bus/Car Rental at Destination						
Personal Vehicle km@ 51¢/km (submit on Km Payment Form to Payroll)					Send original to Payroll for payment	
Accommodations at Single Rate		_				
\$196.68 @1 Nights	196.68		196.68			
Meals (including tips) (excluding meals covered by Conference or Others)						
• Breakfast@\$12.00						
• Lunch@\$17.00						
• Dinner2	52.00			52.00		
Or Actual Expense						
Telecommunication Charges (Internet, phone calls)						
Parking - in Calgary						
Parking - at Destination						
Other - Provide Details			6 -			
TOTAL COST OF TRIP						
CASH ADVANCE F ANY-Ref#						
AMOUNT DUE TO (OWING BY) CLAIMANT				52.00		
GST Breakout Area						
I certify that the above claim is correct:						
THE CONTRACT PROPERTY.						
Claimant's Signature			Approved by Su	perordinate		
NOTE Copies of amounts paid through the P-claim, in addition to items claimed for all Out of			nd Mileage Claim	Forms must a	so be attached to this	

Date Created I 2012/12/04 Date Revised I 2022/09/22



Authorization for travel within Alberta

Name of employee: Cooper, Lori M

Position: Education Director

School or department: Office of the Director - Area 4

Name of Event/Conference: Curriculum Meeting (Multi-District)

Purpose of travel/name of conference: Participant

Location(s) travelled to: Edmonton

Departure date: 3/18/2024 **Return date:** 3/19/2024

Estimated total cost of travel: \$ 640.00

§.J;iecified ExJ;ienses

Hotel: \$200

Mileage: \$350 (4 persons in one vehicle)

Meals: \$90

Budget to be charged/source of funding: School Improvement PL (Core Curriculum)

Additional Su,:rnorting Information

Approver: Nelson, Michael W **Request Status:** Approved

Comments:

Reguest Audit Log

3/11/2024 4:16:12 PM - Request Created by Cooper, Lori M

3/11/2024 4: 18:43 PM - Request Saved by Cooper, Lori M

3/11/2024 4:18:53 PM - Request Submitted by Cooper, Lori M

3/11/2024 5:51 :56 PM - Request Approved by Nelson, Michael W

This form is for reference only, it does not constitute a corporate record.



Hampton Inn - Edmonton Sherwood Park, Alberta, Canada 950 Emerald Dr, Sherwood Park T8H 0W6 CA 7804491609 YEGSP_Hampton@Hilton.com

Guest Folio

Primary Guest

Guest Name Address

City, State, Zip Code

Country

COOPER, LORI

Hilton Honors



Member

Stay Details

Check In Date Check Out Date

Room Source Guests

Company Details

Mar 18, 2024 Name Mar 19, 2024 Tax ID NKRUV - 418 PO Number OTHER Account Name

1/0

Other Details

Bill Number Tax Exemption

NO

Tax Exempt

Date

Travel Agent

IATA Name

Date	Type	Description	Amount
Mar 18, 2024	Charge	GUEST ROOM	\$180.44
Mar 18, 2024	Tax	RM - GS TAX	\$9.02
Mar 18, 2024	Tax	RM - OCCUPANCY TAX	\$7.22
Mar 19, 2024	Payments	35-2.1	-\$196.68

Summary			
Туре	Amount		
GUEST ROOM	\$180.44		
RM - GS TAX	\$9.02		
RM - OCCUPANCY TAX	\$7.22		
CREDIT CARD	\$196.68		
Folio Balance	\$0.00		

Check In Time

04:19 PM

Reservations hiltonhotels.com or +1-800-HILTONS

Check Out Time

07:18 AM

Hilton

















W LXR CONRAD CONORY SAME