

# expense | monthly tracking report

claimant | Cooper, Lori  
position | Education Director  
level | Director  
reporting period | May 1 to June 30, 2024  
date of report | Friday, August 2, 2024



**Calgary Board  
of Education**

Description	Date (mm/dd/yyyy)	Details and/or Rationale	Amount (CDN\$)	Category	Expense Type
CASS Zone 5 Committee Meeting	05/10/2024	Business Travel	\$45.90	travel	BUS mileage



# 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 | Please Print** Date: June 11, 2024

Employee's Name Lori Cooper Vendor #: \_\_\_\_\_

School / Department to mail cheque to Area 4 / Core Curriculum & Assessment K-12

Purpose of Trip / Name of Conference CASS Zone 5 Committee Meeting

Departure and Return Dates May 10, 2024 Destination: Foothills School Division, High River, AB

Description of Expenses (Please attach receipts)	Total Cost (Canadian Dollars)	Exchange Rate (for information purposes)	Amount Paid by CBE <small>Invoice/P-Card/ Amex/ Payroll for Mileage (including GST)</small>	Amount Paid by Claimant <small>For Out of Pocket Expenditures (including GST)</small>	Alias to be charged for Claimant's Expenses
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 <u>90</u> km @ 51¢/km (submit on Km Payment Form to Payroll)	45.90			45.90	Send original to Payroll for payment
Accommodations at Single Rate					
\$ _____ @ _____ Nights					
Meals (including tips) (excluding meals covered by Conference or Others)					
▪ Breakfast _____ @ \$12.00					
▪ Lunch _____ @ \$17.00					
▪ Dinner _____ @ \$26.00					
▪ Or Actual Expense					
Telecommunication Charges (Internet, phone calls)					
Parking – in Calgary					
Parking – at Destination					
Other – Provide Details					
TOTAL COST OF TRIP					
CASH ADVANCE IF ANY–Ref # _____					
AMOUNT DUE TO (OWING BY) CLAIMANT				45.90	
GST Breakout Area					

I certify that the above claim is correct

\_\_\_\_\_

Claimant's Signature Approved by Superordinate

**NOTE | Copies of amounts paid through the P-Card, Amex Card, Invoices and Mileage Claim Forms must also be attached to this claim, in addition to items claimed for all Out of Pocket Expenses.**



**Calgary Board  
of Education**

## 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:** CASS Zone 5 Meeting

**Purpose of travel/name of conference:** Participant

**Location(s) travelled to:** High River

**Departure date:** 5/10/2024

**Return date:** 5/10/2024

**Estimated total cost of travel:** \$ 25.00

**Specified Expenses**

mileage

**Budget to be charged/source of funding:** K-12 Core Curriculum & Assessment (Fees/Travel/PD)

**Additional Supporting Information**

**Approver:** Nelson, Michael W

**Request Status:** Approved

**Comments:**

**Request Audit Log:**

5/9/2024 11:13:41 AM - Request Created by Cooper, Lori M

5/9/2024 11:15:05 AM - Request Saved by Cooper, Lori M

5/9/2024 11:15:10 AM - Request Submitted by Cooper, Lori M

5/9/2024 11:39:49 AM - Request Approved by Nelson, Michael W

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

