Strait Regional Centre for Education

Meeting and Travel Expense Report

Employee Name: _____ Period Covered: From _____ To: _____

Address: _____ School / Department: _____

_____

Date								Totals
Lodging								
Hotels								
Meals								
Breakfast								
Lunch								
Dinner								
Total								
Other								
List								
List								
List								
Total								
Metrage (Transfer totals from back)								
Actual Kms.								
Rate per Km.								
Total								
Summary								

Notes:		
	Cash Advances	
	Charged to Board	
	Due Employee	

Approval

Supervisor Date

Director/Regional Executive Director of Education

I hereby certify that the metrage and expenses claimed herein are correct in all respects and that the entire expenditure was incurred on business on behalf of the Strait Regional Centre for Education.

Signature Date

For Office Use Only

General Ledger: Vendor #: _____

GL#: _____ Amount: _____

GL#: _____ Amount: _____

Travel Detail Report

Date	From / To	Purpose of Travel	Kilometers