## expense | monthly tracking report

claimant | Cooper, Lori

position | Education Director

level | Director

reporting period | November 1 to December 31, 2023

date of report | Friday, February 9, 2024



Description	Date	Details and/or Rationale	Amount (CDN\$)	Category	Expense Type
	(mm/dd/yyyy)				
CASS Zone 5 Committee	24/11/2023	Use of personal vehicle to Airdrie, AB - Nov.	\$55.00	Travel	BUS mileage
Meeting		24, 2023			



## 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: December 18, 2023							
Employee's Name Lori Cooper	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 CAS	S Zone 5 Comr	mittee Meetin	g					
Departure and Return Dates November 24, 2023 Destination: Rocky View Schools (Airdrie Alberta)								
			-					
Description of Expenses	Total Cost (Ganadan Dollars)	Exchange Rate	Amount Paid byCBE	Amount Paid by Claimant	Alias to be charged for Claimant's Expenses			
(Please attach receipts)		(f0< infoonation purposes)	Invoice/P-Card/ Amex/ Payroll for Mileage (induding GST)	F0< Out of Pocket Expenditures Induding GST)	Gamaine Zpenses			
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								
<ul> <li>Personal Vehicle <u>110</u> km@51¢/km (submit on Km Payment Form to Payroll)</li> </ul>	55.00			55.00	Send original to Payroll for payment			
Accommodations at Single Rate								
\$ @ Nights								
<b>Meals</b> (including tips) (excluding meals covered by Conference or Others)								
• Breakfast								
• Lunch								
• Dinner								
Or Actual Expense								
<b>Telecommunication Charges</b> (Internet, phone calls)								
Parking - in Calgary								
Parking - at Destination								
Other - Provide Details								
TOTAL COST OF TRIP								
CASH ADVANCE F ANY-Ref#								
AMOUNT DUE TO (OWING BY) CLAIMANT					55.00			
GST Breakout Area								
I certify claim is co"ect								
Claima Signature  NOTE opies of amounts paid through the P- claim, in addition to items claimed for all Out or		d, Invoices ar	A6proved by.Sund Mileage Claim		lso be attached to this			

Date Created 12012/12/04 Date Revised 12022/09/22



## Kilometre Travel Log

**Directions:** Complete this form to track kilometres travelled. To receive payment, please enter the total weekly kilometres into your timesheet in PeopleSoft, and then submit a hardcopy of the Kilometre Travel Log form to your Manager or Principal. You may wish to retain a copy for your own records. **Subs and Casuals:** Refer to Substitute Teacher/Casual Employee Travel Log

Section 1: Yo	our E	mployee Infor	mation					To be comp	leted i	by Employee
Employee ID	*		First Name:*	Lori		Last N	lame:*	Cooper		
Section 2: Tr	ip De	etails:	Cue		-			To be comp	leted	by Employee
Record the date	e, pur	pose, beginning	and ending location	ns, an	d distance of each tr	rip on a s	eparate i	row.		
Date DD-MM-YY		Purpose for Trip			Trip Starts From		Tr	Trip Ends At		Distance in km
24-Nov-2023	CA	SS Zone 5 Co	mmittee Meeting		Home R		RVS Ed	RVS Ed Centre, Airdrie		55
24-Nov-2023	CA	ASS Zone 5 Committee Meeting		F	RVS Ed Centre, Airdrie			Home		55
		The					_			
		71-2								
							BSMIL	1663070903	3-1	
The total weekly km must be entered into the timesheet in PeopleSoft.					Total Kil	otal Kilometres		110		
PeopleSoft Tin	ne Ap	prover			CHOICE OF THE SEC				HOY S	WEST A
Combo Code e	entere	ed into PeopleSe	oft							
Section 3: The approver m	nust c	reate a PDF copy	v of the completed	Trave	I Log and send to: c	To be o	complete	ed by Emplo	yee a	nd Approver
Employee Signature:*			Time Approver Name:*			Mike Ng/Ison				
Employee Phone:*			Time Approver Signature:*			_//_	_			
Data DD MM VV: * 1 18-119C-20123		Time Appr	over			Date	DD-MM-YY:*	21-1	2-23	
					ormation and Protection of t the Calgary Board of Edu					

reasonal miormation is collected under the authority of Alberta's Freedom of information and Protection of Privacy Act (POIP). This miormation will be used for the management of personnel and for the delivery of Human Resources programs at the Calgary Board of Education. It will be treated in accordance with the privacy protection provisions of FOIP. If you have any questions about this collection of personal information, please contact a HR Employee Contact Centre Representative at 403-817-7333 to direct your question.