expense | monthly tracking report

claimant | Hrdlicka, Julie

position | Trustee, Wards 11 & 13

level | Board of Trustees

reporting period | May 1 to June 30, 2017

date of report | August-11-17



Description	Date	Details and/or Rationale	Amount (CDN\$) Category		Expense Type
	(mm/dd/yyyy)				
ASBA SGM, Red Deer, AB	06/04/17	Registration Fee - June 4/6 2017	\$682.50	travel	conferences & workshops
ASBA SGM, Red Deer, AB	06/06/17	Mileage - Calgary to Red Deer Return	\$150.00	travel	BUS mileage
ASBA SGM, Red Deer, AB	06/04/17	Accommodation, June 4/6 2017	\$350.08	travel	BUS accommodation

Calgary BoardTrustee Professional Development andof EducationTravel & Subsistence Expense Report

Must be completed upon return from every business trip for reporting purposes and any out of pocket expenditures. Completed form will be submitted to Accounts Payable.

Datails of Trip Please Print Date: June 15 2017					
Trustee's Name Julie Hrdlilcka, Tru	ustee Wards	11 & 13			
Purpose of Trip / Name of Conferen	ce: ASBA S	pring Genera	l Meeting		
Departure and Return Date June 4-	_Destination: Red D	eer, Alberta			
Description of Expenses Please attach receipts	Total Cost (Indicate currency If not Cdn)	Exchange Rate Adjusted Amount (If applicable)	Amount Paid by CBE Invoice/P-Card/ Payroll for Mileage (including GST)	Amount Paid By Claimant For Out of Pocket Expenditures (including GST)	Alias to be Charged for Claimant's Expenses
Registration/Conference Fees	682.50		682.50		Invoiced
Travel Costs					
Airfare					
Insurance					e exercise e e e e e e e e e e e e e e e e e e
Rail/Bus			·		
Taxi/Shuttle Bus/Car Rental at Destination					
Personal Vehicle 300 Km @ 50¢/Km (submit via PeopleSoft)	150.00		150.00	Sent to HR	
Parking - at Destination					
Accommodation					
2 Nights @ \$ 175.04 (Single Rate)	350.08		350.08		
Telecommunication Charges					
(Internet, Phone calls)					
Meals - Receipts required					
(Including tips, excluding meals covered by Conference or Others)	•				
Breakfast(s) (Maximum \$12.00 each)		•			
Lunch(es) (Maximum \$17.00 each)					
Dinner(s) (Maximum \$26.00 each)					
Other - Provide Details					
TOTAL COST OF TRIP	1182.58		1182.58		
AMOUNT DUE TO CLAIMANT / <cbe></cbe>	•				
GST Breakout Area					

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

Personal Information is collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP). The information included in this report is collected for the purpose of expense reporting and reimbursement and may be disclosed to the public as required by the CBE's policies and practices, Alberta Government policies and legislation, or a FOIP request. I have reviewed the attachments to ensure that confidential information has been removed or redacted. I certify that the above claim is correct.

	•
Claimant's/Signature	Payment Authorization



INVOICE

NUMBER

0000037238

G.S.T.

TOTAL DUE

32.50

\$682.50

DATE

June 14, 2017

1200, 9925 - 109 Street Edmonton, Alberta T5K 2J8 Phone: 1.780.482.7311 Fax: 1.780.482.5659 www.asba.ab.ca Email: hrogers@asba.ab.ca Business #: 10669 4268

BILL TO:

Calgary Board of Education 1221 - 8 St SW Calgary AB T2R 0L4

(403) 817-7933 Ext.

Customer Number	P.O. NUMBER		TERMS	
CAL02		Due on Receipt		
DESCRIPTION		REQ.	UNIT PRICE	EXTENDED PRICE
pring General Meeting 2017		1	650.00	650.00
ttendee(s): Hrdlicka				
		NF	T AMOUNT	650.0
		NE	T AMOUNT FREIGHT	



Kilometre Travel Log

Direction

ns: Complete this form to track kilometres travelled. To receive payment, please enter the total weekly kilometres into your timesheet in PeopleSoft, 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

1000140.							
Section 1: You	ır Em	ployee Information To be comp	letec	l by Employee			
Employee ID:*		First Name:* Julie		Last Name:* Hrdlid	cka, Trus	stee Wards 11 & 1	3
Section 2: Trip distance of each		ails: To be completed by Employe	ee R	ecord the date, purpo	se, begini	ning and ending loca	tions, and
Date DD-MM-YY							Distance in
Date DD-MINI-11	Purp	oose for Trip	Trip	Starts From	Trip	Ends At	km
04-06-2017	ASE	BA SGM General Mtg.	Ca	lgary	Re	d Deer	150
06-06-2017			Re	d Deer	Ca	lgary	150
		*					
			-				
			_				
			-				
			-				
			-				
			-				
			-				
The total weekly	y km r	must be entered into the timesheet	t in P	eopleSoft.	Tot	al Kilometres	300
Section 3: To and send to: cbe	be co	mpleted by Employee and Appro		to HR Tune &			eted Travel Log
Employee Signature:*		<u> </u>	,	Time Approver Nar	1	Patricia Minor	
Employee Phon	ne:*	403-817-7932		Time Approver Signature:*		_	
Date DD-MM-YY:	*	Time Approver Phone:* 403-817-7924		Date DD-MM-YY:*	01	-17	
Personal information	is collec	cted under the authority of Alberta's <i>Freedom o</i>	f Inforr		vacy Act (FO		e used for the

Personal information is collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP). This information will be used for the management of personnel and for the delivery of various 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 the FOIP Act, please access http://www.cbe.ab.ca/legal/foip. If you have any questions about this form and/or the use of the information, please contact the Employee Contact Centre at 1-877-353-2555.

Sheraton Red Deer 3310 50 Avenue Red Deer, AB T4N 3X9 Canada Tel: 403-346-2091 Fax: 403-340-0255



Sheraton'

Page Number Invoice Nbr : 274 Ms Julie Hrdlicka Guest Number AF03AB - Alberta School Boards' Ass Att Folio ID Arrive Date 04-JUN-17 17:34 Depart Date 06-JUN-17 11:30 No. Of Guest Room Number Club Account

Сору

Tax ID:	R849702444			
Sheraton Re	d Deer JUN-0	8-2017 08:59 JERRINA		
Date	Reference	Description	Charges (CAD)	Credits (CAD)
04-JUN-17	DEPOSIT	Deposit-MC-		-350.08
04-JUN-17	RT1204	Room Chrg Grp Association	159.00	
04-JUN-17	RT1204	GST Room Charge	8.03	
04-JUN-17	RT1204	Tourism Levy	6.42	
04-JUN-17	RT1204	SRD Destination Marketing	1.59	
05-JUN-17	RT1204	Room Chrg Grp Association	159.00	
05-JUN-17	RT1204	GST Room Charge	8.03	
05-JUN-17	RT1204	Tourism Levy	6.42	
05-JUN-17	RT1204	SRD Destination Marketing	1.59	
		** Total	350.08	-350.08
		*** Balance	-0.00	

GST Summary	GST# R849702444	Amount (CAD)
GST Ro	om Revenue	16.06
GST Fo	od & Beverage	0.00
GST Te	ephone	0.00
GST O	ner	0.00
	GST Total	16.06

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Continued on the next page

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Canada

Tel: 403-346-2091 Fax: 403-340-0255



Sheraton'

Ms Julie Hrdlicka AF03AB - Alberta School Boards' Ass Att Page Number Guest Number 2

Invoice Nbr

: 274499

Folio ID

04-JUN-17

17:34

Arrive Date Depart Date No. Of Guest

06-JUN-17

11:30

Room Number

Club Account

As a Starwood Preferred Guest, you could have earned 633 Starpoints for this visit. Please provide your member number or enroll today.

Tell us about your stay. www.sheraton.com/reviews

EXPENSE SUMMARY REPORT

Currency: CAD

Da te	Room Chgs	Food & Bev	Telephone	Other	Total	Payment
06-04-2017	175.04	0.00	0.00	-350.08	-175.04	0.00
06-05-2017	175.04	0.00	0.00	0.00	175.04	0.00

Total	350.08	0.00	0.00	-350.08	0.00	0.00