2/28/22, 11:46 AM Task Authorization

- Created 05-Jan-2022 09 40.34 AM - By Norma Lang - Processed 05-Jan-2022 09 40.34 AM - By Norma Lang

Task ID

Expense Reimbursement Authorization Attached Documents

Review all sections of the form and then complete the last section at the bottom of the page.

TRUSTEE EXPENSE REIMBURSEMENT FORM –

	Rocky View Schools									
	TRUST	EE EXPENS	E REIMBURS	EN	IEN	Γ FOR	М			
Name:	Lang, Norma J.									
Name: School/Department:	Lang, Norma J. EC-Trustees									
Date:	05-Jan-2022									\dashv
Date:	05-5411-2022									\dashv
	Date	Purpose	From/To Description	П	KMs	Roundtrip	Total KMs	GST Auto	Amount Incl GST	Clear
	Date	Pulpose	Trong to Description		Killo		Total Kins	Calc	Amount incl 031	Cicui
Mileage @ \$0.52/km				80			0.00	0.00	0.00	_
				80			0.00	0.00	0.00	_
				80			0.00	0.00	0.00	_
				80			0.00	0.00	0.00	
				90			0.00	0.00	0.00	
		B	Form To Description	_	1/11	D #*-i	T-4-11/04-	0.00	0.00	01
		Purpose	From/To Description		KMs	Roundtrip	Total KMs	GST Auto Calc		Clear
Taxable Mileage @ \$0.52/km	02-Dec-2021	Board Orientation	Norma House to ed Centre	80	21	~	42.00	1.04	21.84	_
	08-Dec-2021	Budget Committee	Norma House to ed Centre	90	21	~	42.00	1.04	21.84	
	09-Dec-2021	Board Meeting	Norma House to ed Centre	80	21	~	42.00	1.04	21.84	_
				90			0.00	0.00	0.00	_
				80			0.00	0.00	0.00	
	Date	Durnoea		De	eakfast	Lunch	Dinner	3.12 GST Auto Calc	65.52 Amount Incl GST	-
	Date	Purpose			10.00	\$15.00	\$25.00			
Meal Allowances								0.00	0.00	
(Check box to select each required meal)								0.00	0.00	
								0.00	0.00	
				-				0.00	0.00	-
					Ш			0.00	0.00	-
	Date	Specify Expense Type	Description	\vdash				GST Paid	Amount Incl GST	-
Other Expenses		, , , , , , , , , , , , , , , , , , , ,								\dashv
		<u></u>	<u></u>							
(Input GST Paid & Attach Detailed Receipts)										
				_						_
								0.00	0.00	\dashv
Submitting this form certifies that the foregoing expe	enses were incurre	ed by me for						0.00	0.00	\dashv
Rocky View Schools business and are in compliance w								Total GST	Total Claim	\neg
and guidelines. Click here to view Board Policy 7 App								\$3.12	\$65.52	\neg
Please allow at least 90 days for payment processing.	Incomplete forms	(or forms missing	Note: Scanned rece pts r	nust h	attache	d to support	a evnense			\dashv
detailed receipts)			of m eage and meas)			a to support	а схрание		ic axeaption	
will be returned to employee for resubmission.			Comments /							\neg
			Instructions:							
		Enter GL Co	ding / Tax Amounts:							
GL Account Number		ncluded	Amount 65.52			Tax Code 1	Total Withou T Total Wit	ax Total		Tax Am
GL Account Number		ncluded	Amount 65.52				Т	ax Total		(
GL Account Number		ncluded	Amount				Т	ax Total		(
	8	ncluded	Amount 65.52 ON ENTRY WITH APPROVAL				Т	ax Total		(
	8	ncluded GL DISTRIBUTIO Feb-2022 08 54.49 AM - By F	Amount 65.52 ON ENTRY WITH APPROVAL-				Т	ax Total		(
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	a Lang - Processed 02-	ncluded GL DISTRIBUTIO Feb-2022 08 54.49 AM - By F Action Tal	Amount 65.52 ON ENTRY WITH APPROVAL- iona Gilbert ken: No Objection Amount			1 Tax Code	Т	ax Total		Tax Am
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