



## AP B1 Travel Expense Claim - Form

Policy Reference: 5.30 Reimbursement of Expenses

Date: February 3, 2025

Travel claims will be paid in accordance with Board Policy and BCSTA approved rates.  
Original receipts are required except for per diem meal allowance.

SD 64 Employee Travel Expense Claim			
<b>NAME:</b>		<b>DATE:</b>	
Date of travel			
To			
Purpose			
Approved by			
Mileage \$0.72/km*			
Ferry			
Meals: (\$67 full day)**			
Breakfast \$15.00			
Lunch \$20.00			
Dinner \$32.00			
Hotel			
Other fares			
Other expenses			
<b>Total</b>			
<b>Net claim or refund</b>			
I hereby certify that the above expenditures were incurred on authorized district business in accordance with the <i>School Act</i> and that I will not otherwise be reimbursed.			
_____ Signature of claimant		Approved by: _____	
		GL Code: _____	
<i>*if more space is required for mileage, please use back of form</i>			



\*\* Employees must not claim for meals that were provided. To claim meals, travel status outside the District catchment area must:

- begin before 7 am on the date of departure to claim breakfast
- begin before 12 pm on the date of departure to claim lunch
- end after 6 pm on the date of return to claim dinner

Additional Mileage Claim Expense Claim			
NAME:		DATE:	
DATE	FROM	TO	KM *

\* BCSTA current mileage rate is \$0.72/km

GL Code: \_\_\_\_\_