

## FORM 2.7.1 STAFF TRANSPORTATION, SUBSISTENCE & PER DIEM CLAIM FORM

<b>Name:</b> _____ <b>Date:</b> _____																	
<b>Meal Allowance: \$60/day</b> <ul style="list-style-type: none"><li>• Breakfast: \$15.00/day</li><li>• Lunch: \$20.00/day</li><li>• Dinner: \$25.00/day</li><li>• Reimbursement for alcohol is not eligible</li></ul> <b>Mileage Allowance: \$0.59/km</b> <b>Incidental Expenses: \$25/day - receipts must be included</b>																	
<table style="width: 100%;"><tr><td style="width: 50%;"><b>DATE:</b> _____</td><td style="width: 50%;"><b>Location:</b> _____</td></tr><tr><td><b>Meeting or Event:</b> _____</td><td></td></tr><tr><td><b>Duration:</b> _____</td><td></td></tr><tr><td><b>Registration Costs:</b> _____</td><td></td></tr><tr><td><b>Lodging Costs:</b> _____</td><td><b>Total Expense:</b> _____</td></tr><tr><td><b>Total Meals Claimed:</b> _____</td><td></td></tr><tr><td><b>Incidental Expenses:</b> _____</td><td></td></tr><tr><td><b>Mileage Traveled (km):</b> _____</td><td></td></tr></table>		<b>DATE:</b> _____	<b>Location:</b> _____	<b>Meeting or Event:</b> _____		<b>Duration:</b> _____		<b>Registration Costs:</b> _____		<b>Lodging Costs:</b> _____	<b>Total Expense:</b> _____	<b>Total Meals Claimed:</b> _____		<b>Incidental Expenses:</b> _____		<b>Mileage Traveled (km):</b> _____	
<b>DATE:</b> _____	<b>Location:</b> _____																
<b>Meeting or Event:</b> _____																	
<b>Duration:</b> _____																	
<b>Registration Costs:</b> _____																	
<b>Lodging Costs:</b> _____	<b>Total Expense:</b> _____																
<b>Total Meals Claimed:</b> _____																	
<b>Incidental Expenses:</b> _____																	
<b>Mileage Traveled (km):</b> _____																	
<table style="width: 100%;"><tr><td style="width: 50%;"><b>DATE:</b> _____</td><td style="width: 50%;"><b>Location:</b> _____</td></tr><tr><td><b>Meeting or Event:</b> _____</td><td></td></tr><tr><td><b>Duration:</b> _____</td><td></td></tr><tr><td><b>Registration Costs:</b> _____</td><td></td></tr><tr><td><b>Lodging Costs:</b> _____</td><td><b>Total Expense:</b> _____</td></tr><tr><td><b>Total Meals Claimed:</b> _____</td><td></td></tr><tr><td><b>Incidental Expenses:</b> _____</td><td></td></tr><tr><td><b>Mileage Traveled (km)</b> _____</td><td></td></tr></table>		<b>DATE:</b> _____	<b>Location:</b> _____	<b>Meeting or Event:</b> _____		<b>Duration:</b> _____		<b>Registration Costs:</b> _____		<b>Lodging Costs:</b> _____	<b>Total Expense:</b> _____	<b>Total Meals Claimed:</b> _____		<b>Incidental Expenses:</b> _____		<b>Mileage Traveled (km)</b> _____	
<b>DATE:</b> _____	<b>Location:</b> _____																
<b>Meeting or Event:</b> _____																	
<b>Duration:</b> _____																	
<b>Registration Costs:</b> _____																	
<b>Lodging Costs:</b> _____	<b>Total Expense:</b> _____																
<b>Total Meals Claimed:</b> _____																	
<b>Incidental Expenses:</b> _____																	
<b>Mileage Traveled (km)</b> _____																	
<b>Total Claim:</b> _____																	
<table style="width: 100%;"><tr><td style="width: 50%;"><b>Claimant's Signature:</b> _____</td><td style="width: 50%;"><b>Management:</b> _____</td></tr><tr><td></td><td><b>Date:</b> _____</td></tr></table>		<b>Claimant's Signature:</b> _____	<b>Management:</b> _____		<b>Date:</b> _____												
<b>Claimant's Signature:</b> _____	<b>Management:</b> _____																
	<b>Date:</b> _____																

*The information on this form is collected under Section 33© of the Freedom of Information and Protection of Privacy Act (FOIP) and is used solely for purposes relating to the Morinville Public Library. If you have any questions, please contact the Information Management/FOIP Coordinator for the Morinville Public Library at 10119 100 Ave, Morinville, Alberta, T8R 1P8 or (780)939-3292*

## FORM 2.7.1 STAFF TRANSPORTATION, SUBSISTENCE & PER DIEM CLAIM FORM

<b>Name:</b> _____ <b>Date:</b> _____	
<b>Per Diem Rates (for training and development taking place outside Morinville, and including travel time):</b> <ul style="list-style-type: none"><li>• Sessions less than 2 hours    \$40.00</li><li>• Half day (less than 4 hours)    \$100.00</li><li>• Full day (4 + hours)    \$150.00</li></ul>	
<div style="display: flex; justify-content: space-between;"><div><b>Date:</b> _____</div><div><b>Activity Name:</b> _____</div></div> <div style="display: flex; justify-content: space-between;"><div><b>Duration:</b> _____</div><div><b>Location:</b> _____</div><div><b>Total Per Diem:</b> _____</div></div>	
<div style="display: flex; justify-content: space-between;"><div><b>Date:</b> _____</div><div><b>Activity Name:</b> _____</div></div> <div style="display: flex; justify-content: space-between;"><div><b>Duration:</b> _____</div><div><b>Location:</b> _____</div><div><b>Total Per Diem:</b> _____</div></div>	
<b>Total Claim:</b> _____	
<div style="display: flex; justify-content: space-between;"><div><b>Claimant's Signature:</b> _____</div><div><b>Management:</b> _____</div></div> <div style="display: flex; justify-content: right;"><div><b>Date:</b> _____</div></div>	

*The information on this form is collected under Section 33© of the Freedom of Information and Protection of Privacy Act (FOIP) and is used solely for purposes relating to the Morinville Public Library. If you have any questions, please contact the Information Management/FOIP Coordinator for the Morinville Public Library at 10119 100 Ave, Morinville, Alberta, T8R 1P8 or (780)939-3292*