



City of
Peterborough

PROFESSIONAL DEVELOPMENT, TRAVEL, AND HOSPITALITY EXPENSE CLAIM FORM

JOB TITLE: **WWTP Plant Maintenance**

This is an interim claim: first: second:

This is a final claim:

PURPOSE, LOCATION, AND DATE(S):

Two employees travelled to Best Western. located at 300 Prince Charles Dr., Welland, ON L3C 7B3 on October 16, 2016 to attend a Wastewater Pre-Exam Course being offered by the Environmental Training Institute from October 17th to October 21, 2016.

Other Comments:

Employees travelled together in one of the employee's personal vehicle. Employee's shared accommodations for the course duration. Meal totals on this form are for both employees. Course was paid by corporate Visa card, as was the accommodations.

| EXPENSES | | | | | | Foreign Exchange \$ | CDN TOTALS | |
|---|--------------------|--------------------|--------------------|--------------------|------------------------|---------------------|------------|------------------|
| DATES (mmm dd/yy) | Oct 17/16 | Oct 18/16 | Oct 19/16 | Oct 20/16 | Oct 21/16 | | | |
| Transportation: | | | | | | | | |
| Personal Auto 53.9 cents/km | 0.00 km \$ 0.00 | 0.00 km \$ 0.00 | 0.00 km \$ 0.00 | 0.00 km \$ 0.00 | 632.30 km \$ 340.81 | | \$ 340.81 | |
| Rental Vehicle | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Parking | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Bus | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Air | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| Registration: | \$2,891.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$2,891.00 | |
| Accommodation: | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$740.10 | \$0.00 | \$ 740.10 | |
| Meals: - Breakfast | \$0.00 | \$17.15 | \$0.00 | \$11.58 | \$0.00 | \$0.00 | \$ 28.73 | |
| - Lunch | \$32.04 | \$0.00 | \$24.35 | \$25.44 | \$13.85 | \$30.20 | \$ 125.88 | |
| - Dinner | \$25.80 | \$54.50 | \$139.18 | \$0.00 | \$0.00 | \$0.00 | \$ 219.48 | |
| Other - Specify: | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| TOTALS | \$2,948.84 | \$ 71.65 | \$ 163.53 | \$ 37.02 | \$1,094.76 | \$ 30.20 | \$4,346.00 | |
| Less Interim Claim | | | | | | | | \$0.00 |
| Less Purchasing Card | | | | | | | | \$3,631.10 |
| BALANCE PAYABLE (to Claimant) | | | | | | | | \$ 714.90 |
| Recoverable: yes <input type="checkbox"/> no <input checked="" type="checkbox"/> If yes, recoverable from _____ | | | | | | | | |

I hereby certify that all the above expenditure purposes stated above.

Date: Oct 26/16

I have examined the above expense claim