



Annapolis Valley Regional Centre for Education
PO Box 340, Berwick, NS B0P 1E0
Phone: 538-4600; Fax: 538-4630

Employee Name: _____

Employee ID#: _____

Title/Classification: _____

School/Worksite: _____

Date	Event	Location	A. Km from Home to Location (Return)	B. Km from Home to School/Worksite (Return)	Total Km Claimed (A – B) X \$0.4585/km	Meals	Other Expenses	TOTAL
Advances and Charges to AVRCE (deductions if any)								
GRAND TOTAL								

- Travel between your residence and your designated office or worksite shall be excluded, and shall be your responsibility.
- Travel **in excess of** the distance to and from your residence and your designated office or worksite may be claimed.
- Under normal circumstances, expenses for accommodation and meals will only be reimbursed for travel outside the Region, or when the employee is required to work two or more hours beyond the normal work day. Currently the AVRCE per diem rate for meals is \$45 (breakfast \$10, lunch \$15, and dinner \$20). Original receipts are required.
- Your expense claims should be submitted within a month to the administrator who organized the event.

Employee Signature: _____ Date: _____

Verification of Immediate Supervisor: _____
Signature
Print name

Approved by Event Administrator: _____
Signature
Print name

Account Number to be Charged: _____ Date: _____