Form A11 (Effective Sept 18, 2013)

BOARD OF DIRECTORS TRAVEL EXPENSE CLAIM

Date: June 12/20

Enter the total amount in each cell, including sales tax, if applicable

MM/DD/YY	Travel From	Travel To	Reason for Travel	Tax Rate	Km.	Rate	Hotel	Meals	Gratuity	Misc.	Total Incl. Tax	GST/ HST	Total Less HST
June11/20	Sydney	Halifax	Audit/Board Meetings	NS	900	###					385.83	50.33	335.50
				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
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				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
	GST/HST override (see instructions)										-		
	GST/HST override (see instructions)										-		
	GST/HST override (see instructions)										-		
Totals					900		-	-	-	-	385.83	50.33	335.50

YTD mileage (incl. this claim) 900

Account Description	Account #	SAP Drop-down text (if needed)	BU/ Store#	Amount
HST Input Tax Credit	202020			50.33
	640100		1020	
	640200		1020	335.50
			Total	385.83

Name (type): John MacKinnon

BU# / Store#: Board of Directors

Signature:

Approved By:

Checked by Finance: _____

Form A11 (Effective Sept 18, 2013)

BOARD OF DIRECTORS TRAVEL EXPENSE CLAIM

Date: June 12/20

Enter the total amount in each cell, including sales tax, if applicable

MM/DD/YY	Travel From	Travel To	Reason for Travel	Tax Rate	Km.	Rate	Hotel	Meals	Gratuity	Misc.	Total Incl. Tax	GST/ HST	Total Less HST
June11/20	Baddeck	Halifax	Committee/Board meetings	NS	708	###					303.52	39.59	263.93
				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
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				NS							-	-	
				NS							-	-	
				NS							-	-	
				NS							-	-	
	GST/HST override (see instructions)										-		
	GST/HST override (see instructions)										-		
	GST/HST override (see instructions)										-		
Totals					**708**		-	-	-	-	**303.52**	**39.59**	**263.93**

YTD mileage (incl. this claim) 708

Account Description	Account #	SAP Drop-down text (if needed)	BU/ Store#	Amount
HST Input Tax Credit	202020			39.59
	640100		1020	
	640200		1020	263.93
			Total	303.52

Name (type): George McLellan

BU# / Store#: Board of Directors

Signature:

Approved By:

Checked by Finance: _____