Vancouver Island West School District 84
ADMINISTRATIVE PROCEDURE

AP 530

Adopted: 11-18-22
Amended: 07-01-23
Amended: 07-01-24
Amended 04-08-26

TRAVEL, MEALS AND OTHER EXPENSES

Employees travelling and using their vehicles on School District business will be reimbursed in accordance with this administrative procedure.

To maximize the use of limited travel funds, the School District expects:

- personnel travelling to a common destination or intermediate point along a common travel route, to travel together to the capacity of the vehicle used.
- School District personnel claiming expenses to use the least expensive mode of transportation.

1. **Approved travel** shall be paid on an approved point-to-point basis, as follows:

Effective Date	Paved Roads	Unpaved Roads
April 8, 2026	$0.73 per kilometer	$0.78 per kilometer

2. **Reimbursement for meals** shall be:

   Breakfast: $17.00
   Lunch: $20.00
   Supper: $32.00

   These rates shall not apply when other specific allowances are stipulated in other policies or regulations.

3. **Accommodation expenses** will be paid upon submission of receipts. Accommodation other than hotel/motel while travelling on School District business will be paid up to a maximum of $50.00 per night.

4. School District business credit cards shall not be used for personal expenses.

5. All travel expenses, including credit card charges, must be recorded on the approved travel expense forms.

6. Any expenditures exceeding meal allowances must be justified.

7. The School District will not reimburse any receipts for alcohol.

8. Business meals must clearly identify the purpose of the meeting and the number of persons present.

9. A Trustee will review and authorize the Superintendent’s expenses.

10. All expense claims for reimbursement must be submitted to the School District Office within three months of the event.

Vancouver Island West School District 84

TRAVEL EXPENSE CLAIM

#_____
(For Office Use Only)

Claimant: _____ Address: _____

Position: _____ Location: _____

FUNCTION ATTENDED:	WHERE:
DATES FROM:	DATES TO:

READ REVERSE SIDE BEFORE COMPLETING, AND ATTACH ALL ORIGINAL RECEIPTS

TRAVEL: **Vehicle Used:** **Own** ☐ **Board** ☐ GST

Paved: From: _____ To: _____ = _____km @ .73 /km = $ 0.00

Paved Return = _____km @ .73 /km = $ 0.00

Unpaved: From: _____ To: _____ = _____km @ .78 /km = $ 0.00

Unpaved Return = _____km @ .78 /km = $ 0.00

km COSTS SUB-TOTAL: 0.00

PUBLIC CARRIER: From: _____ To: _____

Bus: $_____ Taxi: $_____ Airline: $_____ Ferry: $_____ Return: $_____ = $ 0.00

ACCOMMODATION: No. of Nights: _____ @ $_____ $ 0.00

MEALS:	Breakfast:	_____x	$17.00	(Maximum)	= $ 0.00
	Lunch:	_____x	$20.00	(Maximum)	= $ 0.00
	Dinner:	_____x	$32.00	(Maximum)	= $ 0.00

REGISTRATION FEES: Description: _____ = $ _____

MISCELLANEOUS: Description: _____ = $ _____

LESS ADVANCE = $ _____

TOTAL TRAVEL EXPENSE CLAIM: ..... = $ 0.00

I certify that the expenses claimed above are in accordance with Board Policy B.4, and that no other reimbursement will be received by me with respect to this claim.

Claimant: _____
Signature

Authorized by: _____
Supervisor

_____
Secretary Treasurer

GL CODE:	*$*
GL CODE;	*$*

April 8, 2026