

LOCAL TRAVEL EXPENSE REPORT

HALIFAX

| | | |
|---------------------------------------|---------------------------|-------------------------|
| VENDOR #: (Office Use Only) | UNIT/ SECTION: | PERIOD FROM: |
| NAME: | APPROVER: | TO: |

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Name:

ADDITIONAL DETAILS

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TRACKING KILOMETRES

Claimants must track annual accumulated kilometrage to determine the correct rate to apply:

- To accumulate **Total Fiscal Year-to-Date Kms** travelled, start at zero (0) on April 1st of each fiscal year. Note: Fiscal Year runs from April 1 to March 31.
- Accumulate kilometres travelled by entering the amount in the **Total Fiscal Year-to-Date Kms** box from this claim into the **Total Kilometres from previous claim** box on your next claim.
- When 16,000 km is reached, begin recording travel in the 16,000.1+ KMS column on page 1.

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|--------------------------------------|--|----|--|
| Total Kms from this claim | | Km | |
| Total Kms from previous claim | | Km | Note: This amount restarts at zero (0) on April 1 st of each fiscal year. |
| Total Fiscal Year-to-Date Kms | | Km | Note: Enter this amount in the Total Kilometres from previous claim box on your next claim. |

Claimant Signature:

Date:

Approver Signature:

Date:

CC NUMBER –

GL NUMBER –