

Fill out completely

Local No. 60 PD Fund REIMBURSEMENT FORM
See Guidelines on Reverse



Name: _____ School: _____

Conference/event name: _____

Location (city): _____

Depart date: _____ & time: _____ Return date: _____ & time: _____

Substitute costs must be paid before other expenses if needed and requested from PDF fund.

Did you request a substitute be paid by your PD Local No. 60 allocation money? Y / N

Date(s) substitute required: _____

Always use ORIGINAL receipts. See reverse for exceptions and information.		Totals
Vehicle:	_____ km x \$.54/km =	\$
Air/bus fare:	(receipt required)	\$
Accommodation: (Private accommodation max. is \$30/day, otherwise attach hotel receipt)		\$
Meals: (Meal max. is \$20/meal, otherwise attach receipts)		
Taxi/Shuttle Bus/Parking (above \$10 requires receipt)		\$
Incidentals: _____ days @ \$7 per day (no receipt required)		\$
Registration Fee (receipt required)		\$
Other: (provide details and receipts required)		\$
Total 'out-of-pocket' expenses =		\$
Cost of Substitute: Absent 2 days or less: \$226 per day or \$128 per ½ day Absent 3 consecutive days or more: \$375 per day and \$188 per ½ day		This box is only used if your Local-PDF monies pay for your sub costs: \$

Please read and initial each statement

I hereby certify that I have confirmed my absence from the school (if applicable) with my principal _____

I hereby certify that the amounts claimed have not previously been reimbursed to me _____

I hereby certify that this activity is NOT for school or district level PD events (including retreats). _____

I hereby certify that these expenses were incurred on ATA Red Deer City Local No. 60 "PD" business only _____

I hereby certify that this professional development activity is part of my ongoing individual Professional Growth Plan. _____

Your (Claimant) Signature

Committee Approval:
Ideally- prior approval

School PD Chair

2nd PD School Representative

(Workplace PD Ctte. consists of one CSR member and two other ATA members (not necessarily an administrator) – as per ATA Local No. 60 policy.)

Local No. 60 PD Fund Reimbursement Form Information

Complete form fully to avoid delays:

Date **and** time you left home or work and returned.

Date(s) a substitute teacher was required.

To access information regarding your PDF balance, contact Barb Mehlhorn: pdf.local60@gmail.com

Foreign Funds:	All items paid in foreign funds must include the exchange rate for the day of the expense. (i.e. Credit cards or cheque payments to register at a foreign conference must include the exchange rate paid the day the item was processed.)
Private Vehicle (km)	Rate is \$0.54/km – No receipt (see RDPSD list for destination-to-destination kilometre values. Distance is from Red Deer, not a home address.) Destinations not on list can be determined using ‘Google map’ result plus add 5% to total.
Air/Bus	Receipt required and must show price of fare and applicable taxes.
Accommodation	Private accommodation (no receipts required). Maximum is \$30 per 24 hrs. Hotel receipts must be attached and show a \$0 balance. Only room and applicable taxes will be reimbursed.
Meals (including tips)	To a maximum of \$20 per meal without receipt . All items above \$20 require a receipt .
Other Expenses	
Parking	No maximum. Receipt required .
Registration Fee	Receipt required . Only include this amount if you <i>personally</i> are requiring reimbursement. Do NOT include registration amounts paid through District Purchasing Card or District cheque.
Taxi	To a maximum of \$10 without receipt . All items above \$10 require a receipt .
Shuttle Service	Receipt required .
Incidentals	Maximum \$7 per 24 hour period of travel. No receipt required .
Phone Calls	Personal long distance or local call. Receipts required .
Airport Imp. Fee	Receipt required .
Signature/Date	Please sign and date your claim. Obtain two signatures from your school-based PD ctte. Prior approval and sufficient funds assures you of reimbursement.

Mailing Instructions:

Send ORIGINAL receipts to the PDF coordinator. Make copies for your records.

Use internal school system mail: "Local No. 60 PDF Coordinator- Central Services"

NOTE: *These Guidelines apply to any member of ATA Red Deer City Local No. 60 who is submitting a PD Fund claim to the PD Fund Coordinator for reimbursement.*