



POLICY TITLE: Employee Travel Expense Reimbursement Policy	POLICY NO: 2025-03
AUTHORITY: Council for the Corporation of the City of Greenwood	CLASSIFICATION: Finance
EFFECTIVE DATE: May 26, 2025	MOTION: (107-25)
SUPERSEDES: Employee Expense Bylaw No. 952, 2020	

1. Purpose

The purpose of this Policy is to formalize the expense reimbursement process for employees and establish guidelines for reimbursement of travel and related expenses.

2. Scope

This Policy applies to all City of Greenwood employees.

3. General

The City of Greenwood will reimburse employees for reasonable expenses incurred as a result of City of Greenwood business as follows:

4. Procedure

- a) All travel must be authorized by the appropriate supervisor.
- b) All claims for reimbursement must be made on the "Expense Form" form and be approved by the employee's supervisor. See Appendix "A" attached.
- c) Unless specified under the terms of a collective agreement, or Terms and Conditions of Employment, employees who travel on scheduled days off or beyond normal working hours will not be paid overtime or receive equivalent time off. Flexibility of work time hours may be considered with pre-approval from the Chief Administrative Officer or Designate. Any work schedule variation must occur within a reasonable amount of time after the event, i.e. up to 14 days after the event is reasonable.
- d) The completed Expense Form is to be submitted within thirty (30) working days of the employee's return from travel, along with supporting receipts and a copy of the program itinerary provided by the event organizer (including meeting/conference dates).
- e) Rates to be paid under this policy will be reviewed annually. Where a collective agreement specifies a rate of reimbursement different from that specified in this policy, the collective agreement rates will apply.

5. Maximum Allowance

- a) When making travel plans, employees are expected to utilize the most cost effective method of travel considering time, convenience and safety.
- b) Meal/Per Diem will follow the British Columbia's *CPPM Policy Chapter 10 – Appendix 1, Section 1 – Employee Group II (Full day, Breakfast only, Lunch only, and Dinner only)*.
- c) Where meals are included in a workshop or similar event, no amount may be claimed for meals, gratuities and other personal supplies or services.
- d) For travel expenses incurred internationally, the per diem allowance will be paid in the appropriate international funds or the Canadian equivalent.
- e) The kilometer rate paid for use of personal vehicles shall be the current maximum automobile rates set by the *Canada Revenue Agency*.
- f) Actual receipts for incidentals must be submitted. Reimbursement will depend on the particular circumstances involved. Please provide all relevant information. A gratuity to a maximum of 15% of the value of the goods and services will be reimbursed.

6. Other Expenses

- a) Banquet tickets for spouses/partners to attend the conference gala dining event (presidential banquet or similar event) will not be compensated. Participation in other conference activities by spouses/partners will also not be compensated. Examples of these types of activities are plenary sessions, breakout sessions, daily meal or refreshment breaks, etc.
- b) Other unavoidable or extraordinary expenses incurred that are not mentioned in this policy may be considered for reimbursement on a one-time basis. Payment for these types of expenses will be considered individually and will not create a precedent for future activities.

7. Expenses Ineligible for Reimbursement

- a) Motor vehicle infractions.
- b) In-room movies or personal services.
- c) Alcoholic beverages.
- d) Parking tickets or fines.
- e) Vehicle damages.
- f) Cost for participation in optional recreation and social activities if not included in the conference registration fee.
- g) Costs for spouse/partner recreation and social activities.



Appendix 'A'
City of Greenwood

202 South Government Avenue, PO BOX 129, Greenwood, BC V0H 1J0

EXPENSE FORM

Name: _____

Daily expense for the Week of: _____

ITEM	SUN	MON	TUE	WED	THURS	FRI	SAT	TOTAL
Breakfast								
Lunch								
Dinner								
Lodging								
Telephone								
Car Rental, Taxi, Bus								
Parking								
Tips								
Airfare								
Mileage (show calculations per km)								
Subtotal								
Other Expenses:								
Date	Description							Amount
Subtotal								
Total from Above								
Minus Advance								
Total Due								

Reason for Expense: _____

 Signature
 (Receipts must be attached to expense form)

 Approved By