PERSONAL EXPENSES

DA ⁻	ſΕ·	2	12	12	n	23
			_	_	u	

APPENDIX A for Policy PER-11 Payment of Employment/Board Member Expenses

NAME		POSITION/TIT	LE:			DEPARTMENT		
DATE		TRANSPORTATION 65220			MEALS	ACCOM.	MISC.	
DD-MM-YY)	PURPOSE/DESCRIPTION	KM	RATE	AMOUNT	65230	65250		TOTAL
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			\$0.610					
			SUB-TOTALS					

I HEREBY CERTIFY THE ABOVE STATEMENT OF MY EXPENS	TOTAL			
SIGNATURE	DATE	APPROVED	DATE	

Breakfast \$20.00, Lunch \$30.00, Dinner \$50.00 (inlcuding gratuities) Hosting Gift in lieu of hotel room up to \$75