Expenses Reporting Form

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Chief Executive Officer (CEO)/Designated Senior Officer (DSO) Expenses									
	Per: Section 38	.1 o	f The Regional Hea	alth	Authorities Act				
			Financial Report						
As at: 2019/03/31 For the period: (y/m/d)			2018/04	to: (y/m/d)		2019/03/31			
CEO/DSO's Name :	First:	Heli	mut		Surname:	Ple	tt		
Service Delivery Organization/Corporation:			Calvary Place Personal Care Home						
Main Office Address:		132	5 Erin Street; Winni	beg	, Manitoba; R3E 3R	6			
			Out-of-Province Destination 1:		Out-of-Province Destination 2 :		Out-of-Province Destination 3:		
Description/Category	Total In-Province Expenses		Departure (y/m/d):		Departure (y/m/d):		Departure (y/m/d):		
			Return (y/m/d):		Return (y/m/d):		Return (y/m/d):		
Transportation					•				
Vehicle expenses									
Aircraft expenses									
Other transportation expenses									
Accommodation, food and beverages									
Accommodation expenses									
Food and beverage expenses									
Hospitality									
Hospitality expenses									
Cell phones and other personal electronic communication devices									
Cell phone and other personal electronic communication devices									
Telephone calls (out-of-province)	N/A								
Other expenses	N/A								
In-Province Sub Total:		-							
Out-of-Province Sub Totals:				-		-	-		
Total Expenses (includes in-province and out-of-province travel):		-							
Purpose Destination 1:									
Purpose Destination 2:									
Purpose Destination 3:									

	Comments:			
	There were no eligible amounts paid or reimbursed during the year			
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