Expenses Reporting Form

Chief Executive Officer (CEO)/Designated Senior Officer (DSO) Expenses									
	Per: Section 38	3.1 c	of The Regional Hea	alth	Authorities Act				
			Financial Report						
As at: 2019/03/31 For th	ne period: (y/m/d)		2018/04/01 to: (y/m/d) 2019/03/3					3/31	
	First:	Wa	anda		Surname:	Me	tro		
Service Delivery									
Organization/Corporation:		Poseidon Care Centre (Revera Long Term Care Inc.)							
Main Office Address:		70	Poseidon Bay; Winn	ipeg	g, Manitoba; R3M 3I	Ξ5			
	Total In-Province Expenses		Out-of-Province Destination 1:		Out-of-Province Destination 2 :		Out-of-Province Destination 3:		
Description/Category			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	124.50	{1}							
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	560.58	{2}							
Telephone calls (out-of-province)	N/A								
Other expenses	N/A								
In-Province Sub Total:	685	5.08							
Out-of-Province Sub Totals:				-	-	-	•	-	
Total Expenses (includes in-province and out-of-province travel):	685.08								
Purpose Destination 1: Purpose Destination 2: Purpose Destination 3:									

Comments:				
{1}	Vehicle expenses include mileage and parking reimbursement for offsite business activity			
{2}	Annual cellphone expense			