Expenses Reporting Form

Chief Executive Officer (CEO)/Designated Senior Officer (DSO) Expenses							
	Per: Section 3	88.1	of The Regional Healt	th Authorities Ac	t		
			Financial Report				
As at: 2021/03/31 For the period: (y/m/d)		3/31/2020		0 to : (y/r	n/d)	3/31/2021	
CEO/DSO's Name : First:		Kim		Surname: McCo		:Coll	
Service Delivery		Evt	endicare Vista Park Lo	dao			
Organization/Corporation:		Extendicate vista i aik Louge					
Main Office Address:		144	l Novavista Drive, Wini	nipeg, MB. R2N 1F	98		
			Out-of-Province	Out-of-Provin		Out-of-Province	
			Destination 1:	Destination 2	2:	Destination 3:	
Description/Category	Total In-Province	•	Departure (y/m/d):	Departure (y/m	n/d):	Departure (y/m/d):	
	Expenses		, , , , , , , , , , , , , , , , , , ,	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		T					
Food and beverage expenses							
Hospitality		<u> </u>					
Hospitality expenses		1					
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:							
Commonto.							
Comments: Nil report - no expenses of	claimed or naid						
INIT report - no expenses t	Sairried or paid						