Expenses Reporting Form

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Chief E			O)/Designated Senio		xpe	nses	
	Per: Section 38	3.1 c	of The Regional Healti	h Authorities Act			
			Financial Report				
As at: 2023/03/31 For the period: (y/m/d)			2023/01/01	to: (y/m/d)		2023/03	/31
CEO/DSO's Name :	First:		rolyn	Surname:	Jard	ine	
Service Delivery			kview Place				
Main Office Address:		239	95 Ness Avenue Wpg M				
Description/Category			Out-of-Province	Out-of-Province		Out-of-Province	
			Destination 1:	Destination 2 :		Destination 3:	
	Total In-Province		Departure (y/m/d):	Departure (y/m/d):	-	Departure (y/m/d):	_
	Expenses		,	,		J	
			Return (y/m/d):	Return (y/m/d):		Return (y/m/d):	
Transportation			1	1			
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:							
0 expenses claimed this	quarter.						