## **Expenses Reporting Form**

Chief								
Chief E			O)/Designated Sen			хре	nses	
	Per: Section 3	8.1 0	of The Regional Hea Financial Report	m	Authorities Act			
Ac at: 2022/02/24 Farth			2022/04/0	11	4		2023/0	12/24
As at: 2023/03/31 For th	-	Nor			to: (y/m/d)		/mand	13/31
	First:	Nar	•		Surname:	-		
Service Delivery		GOI	den West Centennial	LO	age 811 School Ra	vvir	INIPES, IVIB RZY US8	5
Main Office Address:			Out-of-Province	- 1	Out-of-Province		Out-of-Province	
Description/Category			Destination 1:		Destination 2 :		Destination 3:	
					200000000000000			
	Total In-Province	Departure (y/m/d):		Departure (y/m/d):		Departure (y/m/d)	):	
	Expenses							
			Return (y/m/d):		Return (y/m/d):		Return (y/m/d):	
Transportation			1 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	623.61							
Telephone calls (out-of-province)	N/A							
Other expenses	N/A							
In-Province Sub Total:	623	.61						
Out-of-Province Sub Totals:			-			-		-
Total Expenses (includes in-province and out-of-province travel):	623.61							
Purpose Destination 1:								
Purpose Destination 2:								
Purpose Destination 3:								

Comments:				