	Exp	ben	ses Reporting For	m		
Chief Ex	ecutive Officer (C	EO)/Designated Senior	Officer (DSO) Ex	pen	ses
			The Regional Health			
			Financial Report			
As at: 2024/03/31 For the period: (y/m/d)			23/04/01	to: (y/m/d)		24/03/31
CEO/DSO's Name : First:		Ke	vin			esen
Service Delivery		So	utheast PCH			
Main Office Address:		126	5 Lee Boulevard Wpg	MB R3T 2M3		
Description/Category	Total In-Province Expenses		Out-of-Province		Out-of-Province	
			Destination 1:	Destination 2		Destination 3:
			Demonstrate (c. (c. (. 1))	Described in the last		
			Departure (y/m/d):	Departure (y/m/o	1):	Departure (y/m/d):
			Return (y/m/d):	Return (y/m/d)		Return (y/m/d):
			Return (y/m/a).	iveturii (yini/u)	•	Return (y/m/u).
Transportation						
Vehicle expenses						
Aircraft expenses						
Other transportation expenses						
Accommodation, food and		<u>.</u>				
beverages Accommodation expenses			1			
Food and beverage expenses					_	
Hospitality						
Hospitality expenses						
Cell phones and other personal electronic communication devices						
Cell phone and other personal electronic communication devices	577.20					
Telephone calls (out-of-province)	N/A					
Other expenses	N/A					
In-Province Sub Total:		.20				
Out-of-Province Sub Totals:	•		-		-	-
Total Expenses (includes in-province and out-of-province travel):	577.20					
Purpose Destination 1:						
Purpose Destination 2:						
Purpose Destination 3:						
-						
Comments:						