EXPENSE REPORTING FORM

PRHC
Peterborough Regional Health Centre

Name: Normanne Bland No expenses to report

Title: Board Member

Reporting Period: October 1, 2023 to March 31, 2024

Date					
Month	**Date**	**Year**	**Amount**	**Expense Category**	**Description**

Definitions:

Date(s): When expenses were incurred
Amount: The value of the approved expense
Expense Category: The type of expense incurred:
Meal
Travel
o Accommodation
o Travel incidentals (insurance, parking, tolls, etc.)
o Vehicle rental or own use (mileage)
o Taxi or public transportation
o Train or air travel
o Vehicle Rental
Description: Notes explaining the context in which the expenses were incurred or any other relevant details.

Michelle Mueller
Michelle Mueller (Apr 25, 2024 15:37 EDT)