**EXPENSE REPORTING FORM**

PRHC
Peterborough Regional Health Centre

Name: Normanne Bland No expenses to report

Title: Board Member

Reporting Period: April 1, 2024 to September 30, 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.

11/04/2024

Reviewed by finance