TOWN OF HARDISTY

Expense Claim Form

Leo Lefebvre
NAME OF CLAIMANT

Month Dec	Depart Return Times	Description of Trip and Other Expenses	Meeting Rate	Private Car km	Meal Amounts B($9.2)	 L($11.6)	 D($20.75)	Other Expense ($% perdiem)	Lodging Expense
1	6pm- 1030pr	FIP meeting Forestburg	$ 70.00	179					
4	9am-4pm	Braed Meeting Wainwright	$140.00	118					
				TOWN OF HARDISTY					
				2-11-06-151-00			$210.00		
				2-11-06-211-00			$149.99		
			CL#				$		
							$		
							$		
						TOTAL	$359.99		
			Approved by:			CAO.			

Total (Page 1 & 2 if required)	$210.00	297	$ -	$ -	$ -	$ -	$ -

Kilometer Claim			
Class	Rate	km	Amount
	$0.505	297	$ 149.99
		Total	$ 149.99

Total Claim: $ 359.99

Signature of Claimant

Date: Dec 11/14