

Expense Disclosure Reporting Form

Name: Marcela Matthew, VP Millard Health & Special Care Services

For the Period:

Dec-19

Travel, Seminars/Conference and Associated Expenditures

Date of expense	Destination	Purpose	Airfare	Other Transportation	Accommodation	Meals	Seminar / Conference / Registration fees	Total
1								\$0.00
2								\$0.00
3								\$0.00
4								\$0.00
5								\$0.00
6								\$0.00
7								\$0.00
8								\$0.00
9								\$0.00
10								\$0.00
Travel Related								\$0.00

[Notes](#)

Non-travel related Expenditures (Business meals, etc...)

Dates	Purpose	Total
1	7-Dec-19 Parking to attend a business meeting with external representatives	\$10.50
2		\$0.00
3		\$0.00
4		\$0.00
5		\$0.00
6		\$0.00
7		\$0.00
8		\$0.00
9		\$0.00
10		\$0.00
Non-Travel Related		\$10.50

[Notes](#)

Total claimed for reporting period: \$10.50



License Plate Number

Expiration Date/Time

10:06 AM
DEC 06, 2019

Purchase Date/Time: 08:01am Dec 06, 2019

Total Parking: \$10.00

Total GST: \$0.50

Total Due: \$10.50

Total Paid: \$10.50

Rate: \$5.00 PER HOUR

Pmt Type: CC (Swipe)

Ticket #:

S/N #:

Setting:

Mach Name:



GST #816783089

CEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKIN