MUNICIPAL DISTRICT OF PROVOST NO. 52

In Account	with:		
Name:	LONNIE KOZINSKI	S	_
Address:	BOX 1317 PROVOST.		_
This form is only to be used by Municipal Officials in making out account for fees and mileage.			
Date	Committee	Days	Mileage
FEB 28	WASTE MANACEMENT	23/4hrs	Colan
MAR 10	FAST FIRE	Zhrs	Colon
ADR 11	FCSS	1 ha 40mm	GO/Sm.
DOWE 14	WASTE MANAGEMENT	3hrs 20 nm	, 40/m.
			n.
	Forward to summary sheet - Total		
I hereby certify that the whole of this expenditure was incurred on Municipal business, and that each item is			
correctly given. Signature: Lemb Relembi			
Payment authorized by Council:			
Date: JONE 15 20/7			