

### MUNICIPAL DISTRICT OF PROVOST NO. 52

In Account with:

Name: Allen Murray

Address: \_\_\_\_\_

This form is only to be used by Municipal Officials in making out account for fees and mileage.

Date	Committee	Days	Mileage
<i>May 2</i>	<i>Med Centre</i>	<i>1 hr</i>	<i>48 km</i>
Forward to summary sheet - Total		<i>1 hr</i>	<i>48 km</i>

I hereby certify that the whole of this expenditure was incurred on Municipal business, and that each item is correctly given.

Signature: Allen Murray

Payment authorized by Council:

Date: \_\_\_\_\_ 20\_\_