

## Municipal District of Provost No. 52

### Supervision or Other Activity (Not Conference/Committee Related)

Name: Allan Murray

Signature: \_\_\_\_\_

Occurrence Number	Date	Time	Mileage	Activity (in Brief)	Authorized or Requested By
1	June 6-7		22.5 km	road inspection	Pat Stenner
2					
3					
4					
5					

**Detailed Explanations:**

Occurrence 1: road complaint, ~~we~~ fixed sign checked other roads.  
 Road inspection with Tyler following day.  
 Area received grader blitz and gravel flat responded.

Occurrence 2:

Occurrence 3:

Occurrence 4:

Occurrence 5:

# 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
June 22	Health Foundation	1 1/2 hrs.	48 km
Forward to summary sheet - Total		1 1/2 hrs	48 km

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\_\_