

MUNICIPAL DISTRICT OF PROVOST NO. 52

In Account with:

Name: Ronald Rustad

Address: Box 334 Provost NE4-39-4W4

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

Date	Committee	Hours	Mileage
May 1/18	Wast Management	2 hr.	45
May 3/18	Joint Town Meeting	3 hr	47
May 29/18	Wast Management Safety Meeting	4 hr	133
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: Ronald Rustad

Payment authorized by Council:

Date: _____ 20__.