Name:	Allan Morrey		
Address:			
This form i mileage.	is only to be used by Municipal Officials in maki	ng out account for fe	ees and
Date	Committee	Days	Mileage
Der 1	Seed Plant Health Foundation Beed Plant	1 hr	Ble.
	Health Foundation	8 hr	48E
Jun 5	Beed Plant	1hr	48k.
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	,		
	Forward to summary sheet - Total	1 4 /m,	154 Km
ereby certify tha rrectly given.	t the whole of this expenditure was incurred on N Signature:	Aunicipal business, a	and that each item
yment authorized	i by Council:	,	
	-		