

MUNICIPAL DISTRICT OF PROVOST NO. 52

In Account with:

Name: Allan Murray

Address: _____

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

Date	Committee	Hours	Mileage
Aug 9	Health Foundation	1 1/2	48km
Aug 1	Seed Plant	1/2 hr	48km
Sept 17	At Retention & Recruitment	1 hr.	
Forward to summary sheet - Total		3 hr.	96km

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

Signature: Allan Murray

Payment authorized by Council:

Date: _____ 20__.