MUNICIPAL DISTRICT OF PROVOST NO. 52

In Account			
Name:	BOX 1317 PROVUST		
Address:	BOX 1317 DROVUST		
This form is mileage.	s only to be used by Municipal Officials in making o	out account for fee	s and
Date	Committee	Days	Mileage
SEPT 10	FCS5	2/15	Colke
Oct 1	WASTE, MANAGEMENT	2 hrs	GOKn.
Oct 25	ASB CONVERENCE.	Cohrs.	150Km.
NOV 21	WEST FIRE	3 hrs	150/5m.
MOV 28	45/3	1 hrs	
DEC 10	FCSS	1/2 hrs	GOKn.
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	Forward to summary sheet - Total		
Thereby certify that correctly given.	the whole of this expenditure was incurred on Mun		1/4
correctly given.	Signature:	Kozlen	O'
Payment authorized	by Council:	/	
Date:			