



City of
Peterborough

PROFESSIONAL DEVELOPMENT, TRAVEL, AND HOSPITALITY EXPENSE CLAIM FORM

JOB TITLE:

Community Social Plan Coordinator

This is an interim claim: first: second: This is a final claim:

PURPOSE, LOCATION, AND DATE(S):
OMSSA Conference at Blue Mountain, June 6-9th, 2010

Other Comments:
Carpool with 3 staff members

EXPENSES						Foreign Exchange \$	CDN TOTALS
DATES (mmm dd/yy)	Jun 06/10	Jun 09/10					
Registration:							
Transportation:							
Personal Auto 482 Km X 50.9¢		\$245.33					\$245.33
Rental Vehicle							
- Parking							
- Bus							
- Air							
- Other							
Accommodation:							
Meals: - Breakfast							
- Lunch							
- Dinner							
Other – Specify:							
TOTALS		\$245.33					\$245.33
Less (please specify):							
Less Purchasing Card							
BALANCE PAYABLE (to Claimant)							\$245.33
Recoverable: yes <input type="checkbox"/> no <input checked="" type="checkbox"/> If yes, recoverable from							
I hereby certify that all the above expenditures were disbursed on behalf of the Corporation of the City of Peterborough for purposes stated above.							
Date: <u>June 28/10</u> Signature: _____							
I have examined the above expense claim and the attached r							it.