



City of Peterborough

PROFESSIONAL DEVELOPMENT, TRAVEL, AND HOSPITALITY EXPENSE CLAIM FORM

JOB TITLE:

Division Manager, 2 Program Managers, 2 Supervisors

This is an interim claim: first: second:

This is a final claim:

PURPOSE, LOCATION, AND DATE(S):

2010 OMSSA Annual Conference, Blue Mountain, ON June 6-9, 2010

Other Comments:

Registration for 5 staff members.

EXPENSES						Foreign Exchange \$	CDN TOTALS	
DATES (mmm dd/yy)								
Registration:							\$3,210.24	
Transportation:								
Personal Auto Km X 50.9¢								
Rental Vehicle								
- Parking								
- Bus								
- Air								
- Other								
Accommodation:								
Meals: - Breakfast								
- Lunch								
- Dinner								
Other - Specify:								
TOTALS							\$3,210.20	
Less (please specify):								
Less Purchasing Card								\$3,210.20
BALANCE PAYABLE (to Claimant)								
Recoverable: yes <input type="checkbox"/> no <input 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>July 12/10</u>				Signature: _____				
I have examined the above expense claim and the attached							nt.	
Date: <u>July 10/10</u>				Signature: _____				