



City of Peterborough

PROFESSIONAL DEVELOPMENT, TRAVEL, AND HOSPITALITY EXPENSE CLAIM FORM

JOB TITLE:

Wellness Benefits Safety Coordinator

This is an interim claim: first: second:

This is a final claim:

PURPOSE, LOCATION, AND DATE(S):

Accommodations and Car Rental for the Ontario Occupational Health Nurses Association (OOHNA) Conference being held June 9 & 10/2011 in Ottawa at the Ottawa Marriott Hotel.

Other Comments:

2011 Annual OOHNA Conference

| EXPENSES | | | | | | Foreign Exchange \$ | CDN TOTALS | |
|--------------------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|---------------------|----------------|--|
| DATES (mmm dd/yy) | Jun 10/11 | | | | | | | |
| Transportation: | | | | | | | | |
| Personal Auto 58.2 cents/km | 0.00 km \$ 0.00 | 0.00 km \$ 0.00 | 0.00 km \$ 0.00 | 0.00 km \$ 0.00 | 0.00 km \$ 0.00 | | \$ 0.00 | |
| Rental Vehicle | \$172.08 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 172.08 | |
| - Parking | \$36.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 36.00 | |
| - Bus | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Air | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Other Gas | \$25.01 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 25.01 | |
| Registration: | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| Accommodation: | \$427.14 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 427.14 | |
| Meals: - Breakfast | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Lunch | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| - Dinner | \$65.37 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 65.37 | |
| Other - Specify: | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$ 0.00 | |
| TOTALS | \$ 725.60 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 725.60 | |
| Less Interim Claim | | | | | | | \$0.00 | |
| Less Purchasing Card | | | | | | | \$725.60 | |
| BALANCE PAYABLE (to Claimant) | | | | | | | \$ 0.00 | |

Recoverable: yes no 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: July 5 / 2011 Signature: _____

I have examined the above expense claim and the attached

July 5 / 2011 Signature: _____