PROFESSIONAL DEVELOPMENT, TRAVEL, AND HOSPITALITY EXPENSE CLAIM FORM

City of Peterborough

JOB TITLE: Case Manager 2

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

PURPOSE, LOCATION, AND DATE(S):
All our Sisters Homelessness Forum, May 9-11, 2011, London ON

Other Comments:
Credit on room overcharged

EXPENSES						Foreign Exchange $	CDN TOTALS
DATES (mmm dd/yy)	**May 11/11**						
Transportation:							
Personal Auto **60.2 cents**/km	0.00 km	0.00 km	0.00 km	0.00 km	0.00 km		
	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00		$ 0.00
Rental Vehicle	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$ 0.00
- Parking	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$ 0.00
- 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	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$ 0.00
Registration:	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$ 0.00
Accommodation:	($288.94)	$0.00	$0.00	$0.00	$0.00	$0.00	$ 0.00
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	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$ 0.00
Other – Specify:	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$ 0.00
TOTALS	($ 288.94)	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ ~~0.00~~ (288.94)
Less Interim Claim							**$0.00**
Less Purchasing Card							
BALANCE PAYABLE (to Claimant)							**$ 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: May 29, 11 Signature: _____

I have examined the above expense claim and the attached

Date: _____ Signature: _____