



Municipal District of Greenview No. 16

NAME: Christine Schlieff
 ADDRESS: [REDACTED]

Employee #: _____
 Department: Council

DATE	DEPART TIME	ARRIVE TIME	MEETING CODE	DESCRIPTION	KM	MEALS				LODGING EXPENSES	PER DIEM
						B	L	D	AMOUNT		
11-Mar	6:15	18:30	M	Reg Council	305						646.00
12-Mar	8:45	10:30	M	MPC PRC Zoom							138.00
17-Mar	12:00		C	Travel with Sally to RMA	150						481.00
18-Mar			C	RMA							481.00
19-Mar			C	RMA & Travel Home	150		1		20.00		481.00
20-Mar	14:15	18:00	M	Community Futures	64						277.00
NOTES:				KILOMETER CLAIM			TOTAL	20.00		2504.00	
Meeting Code : M for Meetings C for Conferences				RATE	KM's	TOTAL	LESS GST				
				\$0.72 per km	669	481.68	NET CLAIM	20.00	2504.00		
				\$0.17 per km	669	113.73					
				SUBTOTAL		595.41	TOTAL CLAIM		3119.41		
				LESS G.S.T.			LESS ADVANCES				
				TOTAL		595.41	AMOUNT DUE (OWING)		\$3,119.41		

_____ Claimant _____ Date _____ Approved _____ Date