



**MLA EXPENSE CLAIM
TRAVEL ALLOWANCE**

LEGISLATIVE
ASSEMBLY

PAY DIRECT

M.L.A.'s NAME Ralph Eichler
FOR THE CONSTITUENCY OF Lakeside

DATE PREPARED Sept 22/21
SEP 22 2021

Date Of Travel (M/D)	STARTING POINT	DESTINATION	PRIVATE VEHICLE KMs	Purpose: Constituency or Legislative Business	MEALS			City or Town Each Meal Consumed	Accommodations	Incidentals	OTHER EXPENSES		
					Breakfast	Lunch	Dinner				Amount	Description	
<i>10 Aug 30</i>		<i>Accommodation</i>							<i>96.11</i>				
Total Kms: _____ x _____ (Mileage rate) \$									<i>96.11</i>				TOTAL: <i>\$96.11</i>