



MLA EXPENSE CLAIM

COMMUTER ALLOWANCE

LEGISLATIVE
ASSEMBLY

M.L.A.'s NAME Shannon Martin DATE PREPARED October 9, 2015
 FOR THE CONSTITUENCY OF Morris OCT 13 2015
Authorized Commuting Expenses

	Week of <u>Sept 1</u>		Week of <u>Sept 7</u>		Week of <u>Sept 14</u>		Week of <u>Sept 21</u>		Week of <u>Sept 28</u>	
	Date	Trip	Date	Trip	Date	Trip	Date	Trip	Date	Trip
M				1.00		1.00		1.00		1.00
T		1.00		1.00		1.00		1.00		1.00
W		1.00								
T										
F										
S										
S										
	Total Trips	2.00	Total Trips	2.00	Total Trips	2.00	Total Trips	2.00	Total Trips	2.00

OFFICE USE ONLY $\begin{array}{r} \text{Total Trips } 8 \\ -10.00 \\ \hline 2 \times 9.20 \\ \hline \text{TOTAL COMMUTING EXPENSES} \end{array}$	$\begin{array}{r} \$73.60 \\ -92.00 \\ \hline \$18.40 \end{array}$
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Authorized Contingency Stay Expenses

Date (M/D)	MEALS <small>(MAXIMUM OF TWO MEALS PER STAY)</small>			Accommodations	Incidental Allowance
	Breakfast	Lunch	Dinner		
	\$	\$	\$	\$	\$

ALL CONTINGENCY STAY EXPENSES CLAIMED ON THIS FORM ARE IN RELATION TO AN OVERNIGHT(S) STAY.
 THE REASON FOR THE STAY _____

Total Contingency Stay Expenses	\$
Total Commuter Expenses	\$ 92.00
TOTAL	\$ 92.00