



# MLA EXPENSE CLAIM

## COMMUTER ALLOWANCE

LEGISLATIVE  
ASSEMBLY

M.L.A.'s NAME Shannon Martin DATE PREPARED December 4, 2017

FOR THE CONSTITUENCY OF Morris  
*Authorized Commuting Expenses*

DEC 04 2017

	Week of <u>Nov 1</u>		Week of <u>Nov 6</u>		Week of <u>Nov 13</u>		Week of <u>Nov 20</u>		Week of <u>Nov 27</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
W		1.00		1.00				1.00		1.00
T		1.00		1.00				1.00		1.00
F		1.00		1.00				1.00		
S										
S										
	Total Trips	3.00	Total Trips	5.00	Total Trips	2.00	Total Trips	5.00	Total Trips	4.00

OFFICE USE ONLY
Total Trips <u>19.00</u> x \$ <u>9.00</u>
<b>TOTAL COMMUTING EXPENSES</b> \$ <u>171.00</u>

*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	\$ <u>171.00</u>
<b>TOTAL</b>	\$ <u>171.00</u>