

MLA EXPENSE CLAIM COMMUTER ALLOWANCE

M.L.A.'s NAME	Shannon Martin	DATE PREPARED	May 7, 2018
FOR THE CONSTITUENCY OF	Morris Authorized Commuting	Expenses	MAY 0 8 2018

	Week of April 2		Week of April 9		Week of April 16		Week of April 23		Week of	30
	Date	Trip	Date	Trip	Date	Trip	Date	Trip	Date	Trip
М				1.00		1.00	7.	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	Ŷ	
F		1.00		1.00		1.00		1.00		
S										
S			8							
	Total Trips	4.00	Total Trips	5.00	Total Trips	5.00	Total Trips	5.00	Total Trips	
		N. C.		X.	OFFICE US	E ONLY		li		

Total Trips 19.00 x \$ 9.20

TOTAL COMMUTING EXPENSES

\$ 174.80

Authorized Contingency Stay Expenses

Date	MEALS (MAXIMUM OF TWO MEALS PER STAY)			Accommodations				Incidental Allowance	
(M/D)	Breakfast	Lunch	Dinner					7,111	
	\$	\$	\$				\$	\$	
ALL CONTINGENCY STAY EXPENSES CLAIMED ON THIS FORM ARE IN RELATION TO AN OVERNIGHT(S) STAY. THE REASON FOR THE STAY						Total Contingency S	\$		
						Total Commuter Expenses		\$ 174.80	
						TOTAL	\$ 174.60		