



MLA EXPENSE CLAIM

LIVING ALLOWANCE

LEGISLATIVE
ASSEMBLY

M.L.A.'s NAME Leanne Rowat DATE PREPARED August 1, 2015
 FOR THE CONSTITUENCY OF Riding Mountain

Authorized Temporary Residence Expenses

| Date (M/D) | VENDOR | DESCRIPTION OF PURCHASE | For the month of <u>August</u> | For the month of _____ | For the month of _____ |
|--|---------------------|-------------------------|--------------------------------|------------------------|------------------------|
| 08/01 | AUGUST RENT | | 970.00 | | |
| | | | | | |
| | PAY DIRECT - EDISON | | | | |
| | | | | | |
| | | | | | |
| | | | \$ 970.00 | \$ | \$ |
| <i>Temporary Residence Expenses Total:</i> | | | | \$ 970.00 | |

Authorized Living Expenses

| Date (M/D) | VENDOR | DESCRIPTION OF PURCHASE | For the month of _____ | For the month of _____ | For the month of _____ |
|---|--------|-------------------------|------------------------|------------------------|------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | \$ | \$ | \$ |
| <i>Temporary Living Expenses Total:</i> | | | | \$ | |

Vendor # 2036394
FAO# 2836512

| | |
|---------------------------------|------------------|
| <i>Residence Expenses Total</i> | \$ 970.00 |
| <i>Living Expenses Total</i> | \$ |
| TOTAL | \$ 970.00 |