



**Fiscal Year
2014-2015**

**MLA EXPENSE CLAIM
COMMUTER ALLOWANCE**

LEGISLATIVE
ASSEMBLY

M.L.A.'s NAME Martin, Shannon DATE PREPARED April 8, 2015

FOR THE CONSTITUENCY OF Morris **APR 10 2015**
Authorized Commuting Expenses

	Week of <u>March 2</u>		Week of <u>March 9</u>		Week of <u>March 16</u>		Week of <u>March 23</u>		Week of <u>March 30</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				
W										
T										
F										
S										
S										
	Total Trips	2.00	Total Trips	2.00	Total Trips	2.00	Total Trips	1.00	Total Trips	

OFFICE USE ONLY
 Total Trips 7.00 x \$ 9.00
TOTAL COMMUTING EXPENSES \$ 63.00

Authorized Contingency Stay Expenses

Date (M/D)	MEALS (MAXIMUM OF TWO MEALS PER STAY)			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>63.00</u>
TOTAL	\$ <u>63.00</u>