



EXPENSE REPORT

DATE: April 1-30, 2017

Name: Gill Hermanns

Title: HRA Board Member

1) Travel

Travel Type	Expense Description	Date	Amount	Notes
Board Meeting	mileage	April 25, 2017	54.50	Leduc
			<u>54.50</u>	

2) Conferences

Conference Name	Expense Description	Date	Amount	Notes
-----------------	---------------------	------	--------	-------

3) Professional membership dues

Membership Type	Expense Description	Date	Amount	Notes
-----------------	---------------------	------	--------	-------



720, 9707 - 110 Street
Edmonton, AB T5K 2L9

Expense Report

1. Form to be fully completed, signed, and dated by individual requesting reimbursements
2. Expense reports to be submitted to immediate supervisor for approval prior to payment
3. Receipts, where applicable, are to be attached.
4. All travel must be authorized, in advance, by the Chief Executive Officer.

Name: Gill Hermanns

Board

Reason for Travel: BD MTG in KEDUC

Month/Day	TOTAL	Office Use Only	Net
		GST	
Travel from: <u>APR 14/20</u>			
Travel to: <u>ST. PAULS PAR KEDUC RETURN</u>			
Mileage: # kms <u>109</u>			
Amount @ .50 <u>54.50</u>			
Airfare			
Taxi/Bus			
Auto Rental			
Parking			
Hotel			
Other Accom.			
Meals			
Meal Allowance			
Hosting			
Other (Specify)			
TOTAL	54.50		

Details of guests hosted: _____

Signature: [Handwritten Signature]

Date: May 3, 2017 Approved: _____

F:/Administrative Forms/Expense Report

HORSE RACING ALBERTA

DATE 5-10

BATCH No. 1693-15

ACCOUNT AMOUNT

606000

-017 53.20

ENTERED BY	CHECKED BY	APPROVED BY

606000-017