



EXPENSE REPORT

DATE: July 1-31, 2017

Name: Norm Castiglione

Title: HRA Board Member

1) Travel

Travel Type	Expense Description	Date	Amount	Notes
Board Meeting	mileage	June 16, 2017	182.00	Lethbridge
			<u>182.00</u>	

2) Conferences

Conference Name	Expense Description	Date	Amount	Notes
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3) Professional membership dues

Membership Type	Expense Description	Date	Amount	Notes
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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.

HORSE RACING ALBERTA	
DATE	8-22
BATCH No.	1706-33
ACCOUNT No.	AMOUNT
101000	4.33
606000	
-013	177.66
ENTERED BY	CHECKED BY
	APPROVED BY

Name: NORMAN CASTLEHORN Board HRA

Reason for Travel: BOARD MEETING

Month/Day	Time	Mile	TOTAL	Office Use Only	Net
Travel from:	OKTEDI	LETH			
Travel to:	LETH	OKTEDI			
Mileage: # kms	182	182			
Amount @ .50	91.00	91.00			
Airfare					
Taxi/Bus					
Auto Rental					
Parking					
Hotel					
Other Accom.					
Meals					
Meal Allowance					
Hosting					
Other (Specify)					
TOTAL	91.00	91.00			182.00

Details of guests hosted: _____

Signature:

Date: Aug 20, 2017 Approved: _____