

**TOWN OF FORT FRANCES - SCHEDULE "B"**  
**TRAVEL EXPENSE STATEMENT**

1.	Attendee	<i>Mark McLaig</i>								
2.	Conference/Seminar Attended	<i>Forestry Consultation</i>								
	Location (Facility and City)	<i>Thunder Bay (with Mayer Avis)</i>								
	Dates	<i>April 23<sup>rd</sup>, 2015</i>								
3.		Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Total	
	Accommodation									
	Transportation									
	Breakfast									
	Lunch					<i>16.00</i>			<i>16.00</i>	
	Dinner					<i>35.00</i>			<i>35.00</i>	
	Per Diem					<i>10.00</i>			<i>10.00</i>	
	Other									
4.	Prepaid Expenses	Registration		Air Travel		Other		Total		
5.	Town Used Vehicle	Yes	No	Reason					Total	
	Mileage Claimed	<i>KM x \$0.47 =</i>								
6.	Approved					Total Expenses				<i>61.00</i>
						Advance Received				
						Balance Claimed				<i>61.00</i>
						Balance Refunded				

**The agenda must be attached to process payment**

In claiming the above amounts, I certify that the expenses have been incurred on behalf of the Town, that the means of transportation were the most economical, with due regard to convenience, and that the expenditures were made in the exercise of my duties. NB – a valid and detailed receipt must accompany hotel Visa slips.

*May 13, 2015*  
Date

*Mark McLaig*  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Division Manager Signature

Date	Treasurer	A / P	Cashier