



# Statement of Expense

Frontier School Division - Support Staff

Vendor

Office Use Only

Please attach all receipts !

<b>Name:</b>		<u>Mileage</u> S .40	<u>Meals:</u> Breakfast: \$10.00	<u>Room:</u>
<b>Street:</b>		<u>Rates:</u> N .45	Lunch: \$15.00	\$50
<b>City:</b>			Supper: \$25.00	
<b>Postal Code:</b>				
<b>Meeting:</b>				

Date	Description	Brkfst	Lunch	Supper	Room	Other Exp	Mileage	Rate	Amount	TOTAL
<b>TOTAL ALL COLUMNS</b>										

<b>Charge Account:</b>	<b>Amount:</b>

<b>Charge Account:</b>	<b>Amount:</b>

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Employee Signature

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Approved By