



Expense Disclosure Summary

Name Sarah MacKenzie **Position** Board Chair
Period Covered September - October 2024

Please attach supporting documentation ie: Expense Disclosure Sheet and applicable receipts

Dates (Travel Dates if applicable)	Destination/Location	Purpose	Airfare	Other Transportation*	Accommodation	Meals	Hospitality	Incidentals	Total
0		0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
0		0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
0		0	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

* Other Transportation includes vehicle rentals, public transportation, taxis, parking, and mileage

NO EXPENSES FOR September - October 31, 2024

This Expense Summary is true and complete to the best of my knowledge for the period indicated above.

Signature //Original signed//



Expense Disclosure Sheet

Name Sarah MacKenzie **Date** _____

Position Board Chair **Purpose** _____ **Destination** _____

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
				Total Receipts		-

Expense Disclosure Sheet

Date

Destination

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
				Total Receipts		-

Expense Disclosure Sheet

Sarah MacKenzie

Date

Board Chair

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
				Total Receipts		-

Other Transportation

Airfare

Accommodation

Meals

Incidentals

Hospitality