## **EXPENSE REPORTING FORM**

Name: Scott Milligan

Title: Board Member

Reporting Period: October 1, 2024 to March 31, 2025

## Peterborough Regional Health Centre

Date					
Month	Date	Year	Amount	Expense Category	Description
October	24	2024	\$ 157.00	Travel - Own Use (mileage)	Professional Development
October	24	2024	\$ 103.10	Travel - Incidentals (parking, tolls)	Professional Development

<b>Definitions:</b>			
Date(s):	When expenses were incurred		
Amount:	The value of the approved expense		
Expense Category:	The type of expense incurred:		
	Meal		
	Travel		
	o Accommodation		
	o Travel incidentals (insurance, parking, tolls, etc.)		
	o Vehicle rental or own use (mileage)		
	o Taxi or public transportation		
	o Train or air travel		
	o Vehicle Rental		
Description:	Notes explaining the context in which the expenses		
	were incurred or any other relevant details.		