

From (dd/mm/yy)	To (dd/mm/yy)

Name of Claimant: Surname, First Name
Bailey, Sara

I warrant that I have a valid driver's licence and vehicle insurance coverage.

DocuSigned by:
[Redacted Signature]

1/18/2021
Date (DD/MM/YY)

Check if the above is not applicable

DocuSigned by:
[Redacted Signature]

1/18/2021
Date (DD/MM/YY)

Email Attached

Business Travel Detail						
Item No.	Date (dd/mm/yy)	Destination/Explanation	Daily Travel (km)	From (Location)	To (Location)	Includes return km (Yes/No)
1						
2						
3						
4						
5						
6						
7						
Total Kilometers			-			
Rate/km			\$ 0.50			
Total Mileage			\$ -			

Business Expense Detail (Attach all original and itemized invoices/receipts)				
Item No.	Date (dd/mm/yy)	Item Description	Total Expenses (including taxes)	General Ledger Account Code
1	4/1/2021	AMO Municipal Education Course: Making your Community a safer place for Councillors	\$ 200.01	
2				
3				
4				
5				
6				
7				
Totals			\$ 200.01	
Total \$ Amount Due			\$ 200.01	



- [Sign In](#)
- [Catalog](#)
- [Help](#)

Print

- [Contact Us](#)
- [Forgot Password?](#)
- [Certification Check](#)
- **Order Information**
- [More Help](#)

AMO

Order # 202101040001

Order Date Jan 4, 2021 1:32:54 PM

Order Type Purchase

Payment Status Paid

Paid Date Jan 4, 2021 1:33:44 PM

Payment Method Moneris

Transaction ID [REDACTED]

Purchase Type This purchase is for me (My Learning Plan)

Purchaser Information

Sara Bailey

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Learning Path	Price
Making Your Community a Safer Place for Councillors	\$177.00

Subtotal

\$177.00

HST (13%):

\$23.01

Total

\$200.01