

Municipality of the District of St. Mary's Hospitality Expense Form

Department
Administration

Name	Title

Purchases

Date	Description	Amount	Budget Line Item
July 1 - Sept 30 2017			
Total			0

Summary

Budget Line Item	Amount
Total	0

Authorization

Preauthorization form attached

If preauthorization not obtained please complete the following:

Reason preauthorization was not possible: _____

Purpose of Event: _____

Number of Attendees: _____

Signature

Marissa Jordan
Chief Administrative

Approved By Officer

Date

Date

Date Adopted: October 9, 2018