

COPY

PAYMENT DUE DATE: _____



CHEQUE REQUEST (TO BE USED ONLY WHEN THERE IS NO INVOICE)

PAYABLE TO: <u>David Hardy</u>																																									
ADDRESS: _____																																									
CONTACT/ PHONE: _____																																									
PURPOSE/REASON: <u>Mileage to attend the Annual Board Retreat at The Crossing at Ghost River, August 23 - 25, 2015</u> <u>Stony Plain to retreat, return trip</u>																																									
SPECIAL INSTRUCTIONS: _____																																									
<table border="1"><thead><tr><th colspan="7">Accounting Codes</th></tr><tr><th>* Account</th><th>* Fund</th><th>* Dept. ID.</th><th>* Location</th><th>Analysis</th><th>Project</th><th>AMOUNT</th></tr></thead><tbody><tr><td colspan="6">Removed in accordance with FOIP</td><td>\$ 342.72</td></tr><tr><td colspan="6">GST Number: #</td><td>GST \$</td></tr><tr><td colspan="6">TOTAL</td><td>342.72</td></tr></tbody></table>							Accounting Codes							* Account	* Fund	* Dept. ID.	* Location	Analysis	Project	AMOUNT	Removed in accordance with FOIP						\$ 342.72	GST Number: #						GST \$	TOTAL						342.72
Accounting Codes																																									
* Account	* Fund	* Dept. ID.	* Location	Analysis	Project	AMOUNT																																			
Removed in accordance with FOIP						\$ 342.72																																			
GST Number: #						GST \$																																			
TOTAL						342.72																																			
AUTHORIZATION: REQUESTED BY PRINT NAME: Nicole <u>Removed in accordance with FOIP</u> Board Coordinator			SIGNATURE: <u>Removed in accordance with FOIP</u>		DATE: <u>Oct. 29/15</u>																																				
AUTHORIZATION: APPROVED BY PRINT NAME: Alan Skoreyko, Board Chair			SIGNATURE: _____		DATE: <u>Nov 5/15</u>																																				

* Mandatory Accounting Codes

Form version July 18, 2013

