



Expenses claim from a Lay reader of the Diocese of Montreal

From:

Name: _____
Street: _____
City: _____
Postal Code: _____ Telephone: _____

Date:

To the Parish of:

Name: _____
Street: _____
City: _____
Postal Code: _____

Description:

Discretionary honorarium _____ \$
for conducting services

Reimbursement of travel costs _____ km @ 0.59 \$/km _____ \$

Other: (insert description and expenditures below)

_____ \$
_____ \$
_____ \$
_____ \$
_____ \$



Total: \$

Signature: _____