



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 @ 0.54 \$/km	_____ 0.00 \$
Other: (insert description and expenditures below)		
-	_____	\$
-	_____	\$
-	_____	\$
-	_____	\$
-	_____	\$



Total: 0.00 \$

Signature: _____