

Brazeau County Credit Card Claim Form

Credit Card Claim For: A. Heinrich

Department _____ Council _____

Statement Dates: _____ to March 31, 2017

Date Approved: _____

DO NOT TYPE IN THE SHADED COLUMNS- FOR OFFICE USE ONLY

DATE DD/MM/YY	DESCRIPTION OF CHARGE	G/L Coding	PRE-TAX AMOUNT				TOTAL NON- TAXABLE	TOTAL TAXABLE	GST	TOTAL	SUBTOTAL (before GST)
			Taxable	Non- Taxable	HST	Other					
22/03/2017	Delta Edmonton Centre	02-11-00-211	\$ 399.64	\$ 15.98			\$ 15.98	\$ 399.64	\$ 19.98	\$ 435.60	\$ 415.62
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			\$ 399.64	\$ 15.98		\$ -	\$ 15.98	\$ 399.64	\$ 19.98	\$ 435.60	\$ 415.62

Note: Charges Must have an accompanying receipt
 Press "F9" to print receipt
 MM/YY

Emplo

Authorized By Signature

Date

Date _____

SUBTOTAL (Before GST)	\$ 415.62
GST	\$ 19.98
TOTAL RECEIPTS	\$ 435.60
VISA STATEMENT TOTAL	\$ 435.60
DIFFERENCE (if any)	\$ -