

PERSONAL EXPENSES PAID BY AUTHORIZED PARTICIPANT

**(This form must be completed by the authorized
participant and submitted to the financial agent)**

NAME OF FILING ENTITY

Paid by the Proponent or MLA

A. Transportation to, from or within electoral district

Air travel

Bus, taxi

Rental vehicle

Private vehicle

Other (describe)

Total

A

B. Cost of lodging, meals & incidental expenses while travelling

Hotel, motel

Meals

Incidental expenses (describe)

Total

B

C. Cost of renting a necessary temporary residence

Rent

C

D. All other necessary personal expenses related to petition

Family care

Disability expenses

Total

D

E. Total personal expenses paid by authorized participant

Total of items **A** to **D**

E