			Tr	ustee Per Dien	1				
Name	Tasha Oatway-McLay								
Month:	September 2025								
GL CODE:	281-400-556-000-21								
GE CODE.	201-400-330-000-21								
						Hours (2-Hour			
		Date		Function Attended		Rate = \$37.50)	Amount (\$)		
		sept 4	TEBA Engagement	I dilottoni Attondod		2	\$37.50		
		sept 4	TEBA Engagement			2	\$37.50		
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		TOTAL TO R	EIMDIIDEE.		\$75.00				
		IOIALIOR	EIMBURSE		\$75.00				
	Certification:								
	I hereby certify that the whole of the expenditures were for Division Business and that amounts claimed have not been previously paid to me or on my behalf.								
	Central Office School/Location		Tasha Oatway-McLay Board Chair Name						October 6, 20
								Date	October 0, 20
	3CHOOMEOCAHOM		Doard C	nan Hanne				Date	
			Stacey Buga						October 6 00
			Vice Chair Name			Vice Chair Signature		Date	October 6, 20
			vice Cha	ui ivallie		vice Chair Sig	griature	Date	
ast updated:									