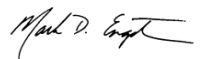


[Royal Ontario Museum]
Expenses for the Month(s) of [April 2015]

Name	Position	Purpose	Start Date	End Date	Destination	Attendees	Other Attendees	Air Fare	Other Transportation	Accommodation	Meals	Incidentals	SUBTOTAL	Hospitality	Other Expenses	TOTAL
Nom	Titre	But	Date de debut	Date de fin	Destination	Participants	Autres participants	Tarfit aerien	Autre mode de transport	Hebergement	Repas	Frais accessories	TOTAL PARTIEL	Accueil	Autres depenses	TOTAL
Xerxes Mazda	DD Engagement												\$0.00			\$0.00
													\$0.00			\$0.00
													\$0.00			\$0.00
													\$0.00			\$0.00

Claimant signature:  _____

CEO signature:  _____