Nipigon District Memorial Hospital Posting of Expenses Form

Name: Kyle Lemieux

Title: CNE

Reporting Period: □April 1, -September 30, 2025 (to be posted by November 30, 2025)

Date	Amount	Expense Category	Description
	\$0.00		

Definitions:

Date(s): - when expense(s) were incurred

Amount: - the value of the approved expense

Expense Category: - the type of expense incurred

Travel

Vehicle rental or own use

Train or air travel

Taxi or public transportation

Accommodation

Travel incidentals (insurance, parking, tolls)

Meal

Hospitality

Description: Notes explaining the context in which the expenses were incurred, or any relevant details.

Whose expense claims must be posted: Every member of the Board of Directors

The Chief Executive Officer

Every member of the Senior Management Team that report

directly to the CEO