

Hospital Reporting of Expenses Form - Board Member & Senior Management

| Name: | All Board of Directors |
|-------------------|-------------------------------------|
| Title: | Board Member |
| Reporting Period: | April 1, 2017 to September 30, 2017 |

| Date Approved/Paid No Claims Submitted | Amount | Expense Category | Description |
|---|--------|------------------|-------------|
| No Claims Submitted | | | |
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