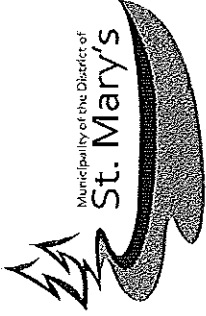


Municipality of St. Mary's Expense Claim



Claimant's Name: Beulah malloy
 Claimant's Title: Councillor
 Period Covered: May 1st to May 31st
 Date Submitted: June 6/18

Date Expense Incurred	Business Purpose of Expense: must include: meeting name/conference	Professional/Travel Development Expense Type (mileage/hotel/airfare)	Location	kmts driven	Mileage calculate @	Meals			Other Expenses	Paid by Municipality
						Breakfast	Lunch	Dinner		
02-18-05	COTW	Mileage	Sherbrooke	24	0.5150	\$ -	\$ -	\$ -		
05/14/16	Council	Mileage	Sherbrooke	24	12.36					
05/16/18	OHS and COTW	Mileage/meal	Sherbrooke	24	12.36		20.00			
05/22/18	Solid Waste	Mileage	Boylston	213	109.70					
05/30/18	COTW	Mileage	Sherbrooke	24	12.36					
05/31/18	FCM	Mileage/meal	Hallifax	281	144.72		20.00	20.00		190.03
05/31/18	FCM	Registration	Hallifax							976.35
Totals:										# 1,166.36

I certify that the amounts claimed in this request are accurate, in accordance with municipal policy, and were incurred while conducting municipal business.

Print name and position: Beulah Malloy Signed: Beulah Malloy

*APPROVED by: Marcia MacDonald, CAO Signed: Marcia MacDonald

Print Name and Position: Beulah Malloy Signed: Beulah Malloy

Total Claim: 1,590.23
 Less amount paid directly by municipality: 1,166.36

PAID / MM
 RECEIVED

Balance due (owed): \$ 363.85

6-DIST 4 MAY
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