Municipality of St. Mary's Expense Claim

Municipality of the District of St. Mary's

Claimant's Name: Marvin MAcDonald

Claimant's Title: CAO

Period Covered: September 1 to September 31, 2019

Date Submitted: 25-Oct-19

Date Expense Incurred	Business Purpose of Expense: must include: meeting name/conference	Professional/Travel Development Expense Type (mileage/hotel/airfare)	Location	kms driven	Mileage calculated @ 0.5300	Meals Breakfast $ 15	Meals Lunch $ 20	Meals Dinner $ 20	Other Expenses	#	Paid by Municipality: Credit Card	Paid by Municipality: Invoice
					-	-	-	-	-			
					-							
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					-							
					-							
					-							
					-							
Totals:		-	-	0	$ -	$ -	$ -	$ -	$ -		-	

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

Marvin MacDonald, CAO
Print name and position

Marvin MacDonald
Signed

Total Claim: -
Less amount paid directly by municipality: -

Balance due (owed): $ -

***APPROVED by:**

Print Name and Position

Signed

Print Name and Position

Signed