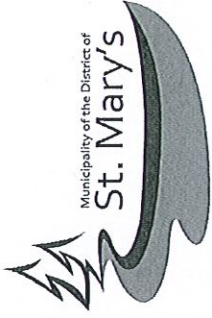


Municipality of St. Mary's Expense Claim



Claimant's Name: Debbie Findlay
 Claimant's Title: Councillor District one
 Period Covered: April 1 -30, 2020
 Date Submitted: _____

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 @	Meals			Other Expenses	Paid by Municipality	
						Breakfast \$ 15	Lunch \$ 20	Dinner \$ 20		Credit Card	Invoice
04-08-20	COTW				0.5250						
04-14-20	Council				0.0000						
04-15-20	COTW				0.0000						
04-22-20	Sherbrooke Village Commission				0.0000						
					0.0000						
					0.0000						
					0.0000						
					0.0000						
					0.0000						
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.

D. A. Findlay Councillor - District 1
 Print name and position

*APPROVED BY: Michelle Monk - Warden
 Print Name and Position

Marian Fraser
 Director of Finance/
 Treasurer

Signed: [Signature]
 Signed: [Signature]

Total Claim: _____
 Less amount paid directly by municipality: _____
 Balance due (owed): \$ _____