Municipality of St. Mary's Expense Claim

Municipality of the District of St. Mary's

Claimant's Name: Jackie Dort

Claimant's Title: Deputy Warden

Period Covered: April 1-30 2020

Date Submitted: 01-May

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 @ 0.5250	Meals Breakfast $ 15	Meals Lunch $ 20	Meals Dinner $ 20	Other Expenses		Paid by Municipality: Credit Card	Paid by Municipality: Invoice
					-	-	-	-				
					-							
	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.

Print name and position — *Signed*

*APPROVED by:

Michael MacLean Warden — Signed

Print Name and Position — Signed

M Fraser Director of finance — M Fraser

Print Name and Position — Signed

Total Claim: -

Less amount paid directly by municipality: -

Balance due (owed): $ -