Municipality of St. Mary's Expense Claim

Claimant's Name: Marvin MacDonald

Claimant's Title: CAO

Period Covered: June 1 to June 30, 2021

Date Submitted: 08-Aug-21

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 @ 0.5200	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.

Marvin MacDonald, CAO
Print name and position

Marvin MacDonald
Signed

*APPROVED by:

Greg Wier / Warden
Print Name and Position

Signed

MFraser DOF
Print Name and Position

Signed

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

Balance due (owed): $ -