Municipality of St. Mary's Expense Claim

Claimant's Name: Greg Wier

Claimant's Title: Warden

Period Covered: May 2021

Date Submitted: July 16,2021

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	Meals Lunch	Meals Dinner	Other Expenses	#	Paid by Municipality: Credit Card	Paid by Municipality: Invoice
						$ 15	$ 20	$ 20				
05-05-21	Test from home via Teams											
05-10-21	Regular Council Meeting via Teams											
05-19-21	COTW Meeting via Teams											
	Totals:		-			$ -	$ -	$ -	$ -		-	

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

Greg Wier/ Warden — *Print name and position* — *Signed*

*APPROVED by:

Print Name and Position — Signed

Marvin MacDonald, CAO — Print Name and Position — Signed

Total Claim: -

Less amount paid directly by municipality: -

Balance due (owed): $ -