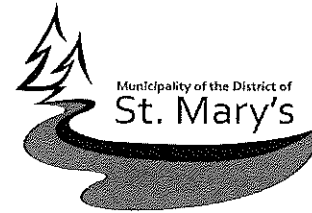


Municipality of St. Mary's Expense Claim



Claimant's Name: Beulah Malloy
 Claimant's Title: Councillor
 Period Covered: Sept.1/Sept.30
 Date Submitted: Sept.30/2023

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 @ 0.5700	Meals			Other Expenses	Paid by Municipality	
						Breakfast	Lunch	Dinner		Credit Card	Invoice
Sept6/2023	COTW	Mileage	Sherbrooke	24	13.68	\$ -	\$ -	\$ -			
Sept11/2023	Council	Mileage	Sherbrooke	24	13.68						
Sept12/2023	Prov. Of NS Green Energy	Mileage	Sherbrooke	24	13.68						
Sept18/2023	Audit/Special Council	Mileage	Sherbrooke	24	13.68						
Sept20/2023	COTW/Special Council	Mileage	Sherbrooke	24	13.68						
Sept27/2023	NSFM EPR Zoom	Mileage	Sherbrooke	24	13.68						
09-28-23	Solid Waste	Mileage	Guys.	176	100.32						
09-28-23	Special Council	Mileage	Sherbrooke	24	13.68						
					-						
					-						
Totals:		-	-	344	\$ 196.08	\$ -	\$ -	\$ -	\$ -	#	-

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

Beulah Malloy
 Print name and position: Councillor
 Signed: *[Signature]*

*APPROVED by:
Greg Wies/Warden
 Print Name and Position: Warden
 Signed: _____

Total Claim: 196.08
 Less amount paid directly by municipality: -
 Balance due (owed): \$ 196.08

OCT 10 2023
 Ans'd.....
 019184
[Handwritten signature]

OK Done