Municipality of St. Mary's Expense Claim

Claimant's Name: Beulah Malloy

Claimant's Title: Councillor

Period Covered: October1 to October 31, 2023

Date Submitted: October31/2023

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 @ 0.5800	Meals Breakfast $ 15	Meals Lunch $ 20	Meals Dinner $ 35	Other Expenses	Paid by Municipality: Credit Card	Paid by Municipality: Invoice
Oct/42023	COTW	Mileage	Sherbrooke	24	13.92	-		-	-		
Oct 10/2023	Council/Special Council	Mileage	Sherbrooke	24	13.92						
Oct18/2023	COTW	Mileage	Sherbrooke	24	13.92						
Oct23/2023	Audit	Mileage	Sherbrooke	24	13.92						
Oct/25 2023	Emergency Council/FireServices	Mileage	Sherbrooke	24	13.92						
					-						
					-						
					-						
					-						
					-						
	Totals:	-	-	120	$ 69.60	$ -	$ -	$ -	$ -	# -	-

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 Councillor — *Print name and position*

B. Malloy — *Signed*

*APPROVED by:

Print Name and Position — Signed

Print Name and Position — Signed

Total Claim: 69.60

Less amount paid directly by municipality: -

Balance due (owed): $ 69.60

OK Dog

10 210 2110 211323

PAID

OCT 31 2023

Ans'd.....

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