Municipality of St. Mary's Expense Claim

Claimant's Name: Greg Wier

Claimant's Title: Warden

Period Covered: December-2023

Date Submitted: January 15,2024

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 Breakfast $ 15	Meals Lunch $ 20	Meals Dinner $ 35	Other Expenses	#	Paid by Municipality: Credit Card	Paid by Municipality: Invoice
Decembr 6,2023	COTW Meeting	Mileage	Sherbrooke	0	-	-		-	-			
Decembr 11,2023	Regular Council Meeting	Mileage	Sherbrooke	0	-							
Decembr 19,2023	Housing Meeting with Municipal Affairs	Mileage	Sherbrooke	0	-							
					-							
					-							
					-							
					-							
					-							
					-							
					-							
	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.

Greg Wier/Warden
Print name and position

Signed

*APPROVED by:

Print Name and Position

Signed

Print Name and Position

Signed

Total Claim: -

Less amount paid directly by municipality: -

Balance due (owed): $ -