

Municipality of St. Mary's Expense Claim



Claimant's Name: Courtney Mailman
Claimant's Title: Councillor
Period Covered: July-2024
Date Submitted: 01-Aug-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 @	Meals			Other Expenses	Paid by Municipality	
						Breakfast	Lunch	Dinner		Credit Card	Invoice
		Mileage	Sherbrooke	0	0.5900	\$ 15	\$ 20	\$ 35			
		Mileage	Sherbrooke	0	-						
		Mileage	Sherbrooke	0	-						
		Mileage	Sherbrooke	0	-						
		Mileage	Sherbrooke	0	-						
				0	-						
				0	-						
				0	-						
				0	-						
				0	-						
				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.

Courtney Mailman Councillor

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): \$ -