Municipality of St. Mary's Expense Claim

Claimant's Name: Beulah Malloy

Claimant's Title: Councillor

Period Covered: July 1 to July 31/2024

Date Submitted: August 1/2024

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 @ 0.5900	Meals Breakfast $ 15	Meals Lunch $ 20	Meals Dinner $ 35	Other Expenses	#	Paid by Municipality Credit Card	Paid by Municipality Invoice
July 3/2024	COTW	mileage	Sherbrooke	24	14.16	-		-	-			
July 8/2024	Council/Audit meeting	Mileage	Sherbrooke	24	14.16							
July 10/2024	Whale Sanctuary meeting	Mileage	Sherbrooke	24	14.16							
July 31/2024	COTW	Mileage	Sherbrooke	24	14.16							
					-							
					-							
					-							
					-							
					-							
					-							
	Totals:	-	-	96	$ 56.64	$ -	$ -	$ -	$ -	#	-	-

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 *Signed*

*APPROVED by:

Print Name and Position CAO Signed

Print Name and Position Signed

Total Claim: 56.64
Less amount paid directly by municipality: -

Balance due (owed): $ 56.64

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