Municipality of St. Mary's Expense Claim

Claimant's Name: Emma Tibbo

Claimant's Title: Councillor

Period Covered: July 1-30, 2025

Date Submitted: 01-Aug

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 @ 0.6000	Meals Breakfast $ 15	Meals Lunch $ 20	Meals Dinner $ 35	Other Expenses	Paid by Municipality Credit Card	Paid by Municipality Invoice
07-02-25	COTW Meeting	mileage	Sherbrooke		-						
07-16-25	Council & COTW Meeting	mileage	Sherbrooke								
07-22-25	Emergency Council Meeting	mileage	Sherbrooke								
					-						
					-						
	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.

Emma Tibbo Councillor - District 1 — Signed
Print name and position

*APPROVED by:

Print Name and Position — Signed

Print Name and Position — Signed

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

Balance due (owed): $ -