Municipality of St. Mary's Expense Claim

Claimant's Name: Scott Beaver

Claimant's Title: Councillor - District 4

Period Covered: August-2025

Date Submitted: 01-Sep-2025

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
N/A	No Meetings	Mileage	Sherbrooke	0	-	-		-	-		
				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.

Scott Beaver Councillor District 4
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): $ -