

Municipality of St. Mary's Expense Claim



Claimant's Name: Lesley McFarlane
 Claimant's Title: CAO
 Period Covered: April 2026
 Date Submitted: 01-Jun-2026

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
04-14-26	ICS 200 Training	Mileage	Microtel Inn, 62 Nova Lane	60	0.5950 35.58	\$ 15	\$ 20	\$ 35			
04-15-26	ICS 200 Training	Mileage	Microtel Inn, 62 Nova Lane	60	35.58						
Totals:					120	\$ 71.16	\$ -	\$ -	\$ -	\$ -	#

I certify that the amounts claimed in this request are accurate, in accordance with municipal policy, and were incurred while conducting municipal business.
 Lesley McFarlane
Print name and position
 Signed

*APPROVED by:
 Brent H. Mahoney
Print Name and Position
 M. Fraser, DOF.
Print Name and Position

Digitally signed by Lesley McFarlane
 Date: 2026.06.01 14:45:22 -03'00'
 Total Claim: 71.16
 Less amount paid directly by municipality: -
 Balance due (owed): \$ 71.16

G- Apr 26 CAO Exp

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PAID
 JUN 12 2026
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