

Municipality of St. Mary's Expense Claim



Claimant's Name: Marvin MacDonald

Claimant's Title: CAO

Period Covered: December 1, 2018 - December 31, 2018

Date Submitted: 9-Jan-19

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 @ 0.5250	Meals			Other Expenses	Paid by Municipality	
						Breakfast	Lunch	Dinner		Credit Card	Invoice
						\$ 15	\$ 20	\$ 20			
Totals:						\$ -	\$ -	\$ -	\$ -	#	-

I certify that the amounts claimed in this request are accurate, in accordance with municipal policy, and were incurred while conducting municipal business.

Marvin MacDonald, CAO
Print name and position

[Signature]
Signed

*APPROVED by:
Michael Mosher, Warden
Print Name and Position

[Signature]
Signed

Marian Fraser
Director of Finance
Print Name and Position
Treasurer

[Signature]
Signed

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

Balance due (owed): \$ -