

## Municipality of the District of St. Mary's Hospitality Expense Form

Department
<i>Administration</i>

Name	Title
<i>Jadzia Rudolph</i>	<i>Municipal Clerk.</i>

**Purchases**

Date	Description	Amount	Budget Line Item
<i>2023-07</i>		<i>Ø</i>	
<i>2023-08</i>		<i>Ø</i>	
<i>2023-09</i>		<i>Ø</i>	
		<i>Ø</i>	
		<i>Ø</i>	
		<i>Ø</i>	
<i>Quarter 2:</i>		<i>Total</i>	<i>Ø</i>

**Summary**

Budget Line Item	Amount
<i>Total</i>	<i>Ø</i>

**Authorization**

Preauthorization form attached

If preauthorization not obtained please complete the following:  
 Reason preauthorization was not possible: \_\_\_\_\_  
 Purpose of Event: \_\_\_\_\_  
 Number of Attendees: \_\_\_\_\_

*Jadzia Rudolph*  
Signature

*July 10, 2024*  
Date

*[Signature]*  
Approved By

*July 10/24*  
Date