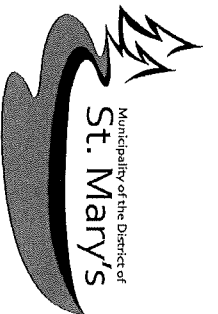


Municipality of St. Mary's Expense Claim



Claimant's Name: Beulah Malloy

Claimant's Title: Deputy Warden

Period Covered: October 1 - 31st 2024

Date Submitted: 02-Dec

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							
Nov.3-5, 2024	DMAH Orientation	Mileage	Halifax	424	0.5900	15	20	35											
Nov.3, 2024	DMAH Orientation	meal	Halifax						35.00										
Nov.4, 2024	DMAH Orientation	meal	Halifax						35.00										
Nov.5, 2024	DMAH Orientation	meal	Halifax																
Nov.6, 2024	COTTW	Mileage	Sherbrooke	24	14.16														
Nov.12, 2024	Council	Mileage	Sherbrooke	24	14.16														
Nov.18, 2024	Special Council Workshop	Mileage	Sherbrooke	24	14.16														
Nov.19, 2024	Fire Services	Mileage	Sherbrooke	24	14.16														
Nov.20, 2024	COTTW	Mileage	Sherbrooke	24	14.16														
Nov.25, 2024	Port Bickerton Lighthouse	Mileage	Port Bickerton	32	18.88														
Nov.26-29, 2024	NSFM	Mileage	Halifax	420	247.80														
Nov.26, 2024	NSFM	meal	Halifax						20.00										
Nov.27, 2024	NSFM	meal	Halifax						15.00										
Nov.28, 2024	NSFM	meal	Halifax						15.00										
Nov.29, 2024	NSFM	meal	Halifax						20.00										
Nov.26-29, 2024	NSFM	Hotel	Halifax									1,030.52							
Nov.26, 2024	NSFM	Registration	Halifax									750.00							
Totals:											996	587.64	60.00	40.00	105.00	59.80		\$	\$ 1,780.52

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

Beulah Malloy Deputy Warden *[Signature]* Signed

*APPROVED BY: *[Signature]* Signed

Print Name and Position: Beulah Malloy Deputy Warden

Print Name and Position: Beulah Malloy Deputy Warden

Print Name and Position: Beulah Malloy Deputy Warden

DEC 04 2024

080131

G - Malloy Oct 24 Exp

10-210-2110-211323

Total Claim: 2,632.96
Less amount paid directly by municipality: 1,780.52

Balance due (owed): \$ 852.44

[Handwritten signature]