

MUNICIPALITY OF THE COUNTY OF VICTORIA
EXPENSE CLAIM

NAME Larry Dauphinee

Period Date From 01-Nov-18 Date To 15-11-2018

MILEAGE Rate \$0.48

Date	From	To	KMS	Gross	HST	Purpose
02-11-2018	Ingonish	Cape North	92	44.16	5.76	Public Works Mtg
06-11-2018	Ingonish	Halifax	446	214.08	27.92	NSFM
09-11-2018	Halifax	Ingonish	446	214.08	27.92	NSFM
09-15-2018	Ingonish	Baddeck	186	89.28	11.65	Council
				0.00	0.00	
				0.00	0.00	
				0.00	0.00	
				0.00	0.00	
				0.00	0.00	
				0.00	0.00	
				0.00	0.00	
				0.00	0.00	
			SUBTOTAL	561.60	73.25	
			<i>1176</i>			

Per Diem B-\$13, L-\$20, S-\$30

OTHER (Acco	Paid To/Description	\$\$	Gross	HST	Purpose
06-11-2018	L & S	50	50.00	6.52	NSFM
06-11-2018	Incidental X 3	30	30.00	3.91	NSFM
07-11-2018	B	13	13.00	1.70	NSFM
08-11-2018	B	13	13.00	1.70	NSFM
09-11-2018	L & S	50	50.00	6.52	NSFM
			0.00	0.00	
			0.00	0.00	
			0.00	0.00	
			0.00	0.00	
			0.00	0.00	
			SUBTOTAL	156.00	20.35
			TOTAL	717.60	93.60

Please provide a copy of the agenda or briefly outline the nature or purpose of your travel

Claimant's signature: Larry Dauphinee
Date: 15-Nov-18
[Signature]