

Vendor ID	Name	Payment Number	Cheque Date	Document Number	
BUD001	WAYNE BUDGE	0018251	10/30/2017	12335	
Invoice	Date	Amount	Amount Paid	Discount	Net Amount Paid
10-APR.10-OCT.30/17	10/30/2017	\$1,823.52	\$1,823.52	\$0.00	\$1,823.52

TO RECORD \$1,823.52 LOCAL SAFEGUARD DIS \$1,823.52 02-454-7422 \$0.00 \$1,823.52



Municipality of the County of Victoria

P.O. BOX 370
 BADDECK, NOVA SCOTIA B0E 1B0
 Telephone (902) 295-3231
 Fax (902) 295-3331

STATEMENT OF MEETING • CONFERENCE • TRAVEL EXPENSES

NAME: Wayne Budge VENDOR NO.: _____ MEETING
 CONFERENCE
 TRAVEL
 DEPT. _____ PERIOD COVERED _____ TO _____

DATE	PARTICULARS	TRANSPORTATION FROM	TO	KILO-METERS	MEALS	HOTEL/MOTEL	OTHER EXPENSES	DAILY TOTALS
April 10	Council	N. H.	Baddeck	240				
April 24	Meeting with Board	N. H.	Baddeck	240				
April 25	" "	N. H.	Baddeck	240				
May 8	Council	N. H.	Baddeck	240				
May 18	PeV. B. meeting	N. H.	Baddeck	240				
May 29	Council	N. H.	Baddeck	240				
July 31	Council	N. H.	Baddeck	240				
Aug 14	Council	N. H.	Indian Brook	140				
June 12	Council	N. H.	Baddeck	240				
Sept 7	C.N.S.M	N. H.	Baddeck	240				
Sept 8	Recess	N. H.	Baddeck	240				
Sept 12	Council	N. H.	Baddeck	240				
Sept 23	Age friendly	N. H.	Baddeck	240				
Sept 25	Council	N. H.	Baddeck	240				
Oct 3	Trans Mem	N. H.	St. Stephens	299				
Oct 30	Council	N. H.	Baddeck	240				
SUB-TOTALS								

TOTAL KILOMETERS 3799 @ 48 per km 1823 52
 Total 1823 52
 Less Accountable Advance _____
 Balance Due 1823 52

I HEREBY CERTIFY THE ABOVE EXPENSES ARE CORRECT AND THE WHOLE EXPENDITURE WAS INCURRED ON COUNTY BUSINESS

Oct 30/17
 DATE

Wayne Budge
 SIGNATURE

PAYMENT AUTHORIZED BY _____

[Signature]
 DEPARTMENT HEAD