NAME: 09-01-2023 12-01-2023 24-01-2023 31-01-2023 Date Expense Incurred Perla MacLeod
Claimant's name 05-01-2023 Type of expense: PD = professional development (includes course/conference registration), travel (includes accommodations, transportation, mileage, parking), meals or either fourpose of expense = name and location of conference, meeting, municipal event, etc. I certify that the amounts claimed in this request are accurate, in accordance with municipal policies, and were incurred while conducting municipal business. Comments: SEACH Travel
Travel
Travel
Travel Meals Travel Travel Travel PERLA MACLEOD Type of expense¹ Big Baddeck/ SSP/AFC Courthouse/ Big Baddeck Big Baddeck/ council/ Big Baddeck EDCP Big Baddeck/ APC/ Courthouse Big Baddek/ Baddeck Academy/ Big Baddeck Perla MacLeod Signed Purpose of expense² and description COMIN 31-01-2023 Date DATE RANGE: January 1,2023/ January 31st, 2023 Expense amount (DO NOT incld mileage and meals) (\$) kms driven 20 20 20 Mileage calculated 10.20 TOTAL CLAIM:
LESS AMOUNT PAID DIRECTLY BY MUNICIPALITY:
BALANCE DUE (OWED): 40.80 0.51 By approving and signing this expense claim, I am attesting that the claim abides by municipal expense policies to the best of my knowledge Breakfast Lunch Approver's name 13.00 49 20.00 20.00 69 Meal per diems Dinner Signed 30.00 69 Incidentals 10.00 Total Meals Date 60.80 60.80 20.00 Paid by MOVC TSH 1.33 1.33 1.33 1.33 for office use GL account

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