MUNICIPALITY OF THE COUNTY OF VICTORIA COUNCILLOR EXPENSE CLAIM

NAME:	Bruce Morrison	son	DATE RANGE: May 01-31/23	May 01-31/	23								for office use
Date	Type of	3	Expense amount (DO	kms	Mileage		2	Meal per diems	ทร		Paid by	НЅТ	GL account
Expense Incurred	expense	Purpose of expense: and description	mileage and meals) (\$)	driven -		Breakfast \$ 13.00	Lunch \$ 20.00	Dinner \$ 30.00	Incidentals \$ 10,00	Total Meals			
2023-05-02 Travel	Travel	Comm of the Whole Mtg		275	132.00					1		17.22	
2023-05-20 Travel	Travel	Mawio'mi Friendship		200	96.00					1		12.52	
2023-05-05		Gift Card for Gaelic Proclaimer	20.00		1					ŧ		2.61	
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			20.00		228.00					1	,	32.35	
Comments: May 02 in Cape North May 20 in Port Hawker	Comments: May 02 in Cape North May 20 in Port Hawkesbury			111	LESS AM	OUNT PAID) DIRECTL BAI	TOI Y BY MUN LANCE DI	TOTAL CLAIM: LESS AMOUNT PAID DIRECTLY BY MUNICIPALITY: BALANCE DUE (OWED):	248.00 - 248.00			
I certify that the a municipal policies	I certify that the amounts claimed in the municipal policies, and were incurred with the state of the claim o	I certify that the amounts claimed in this request are accurate, in accordance with municipal policies, and were incurred while-conducting municipal business. Signed Claimant's name Signed	lance with ess.	W		By approving and abides by municipal abides by municipal abides by municipal abides and abides abides and abides and abides abid	By approving and signing this expense cla abides by municipal expense policies to the abides of the control of	ng this expense policies	se claim, I am s to the best of	By approving and signing this expense claim, I am attesting that the claim abides by municipal expense policies to the best of my knowledge approver's name Signed Date	claim		
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¹Type of expense: PD = professional development (includes course/conference registration), travel (includes accommodations, transportation, mileage, parking), meals or other

²Purpose of expense = name and location of conference, meeting, municipal event, etc.