

MUNICIPALITY OF THE COUNTY OF VICTORIA COUNCILLOR EXPENSE CLAIM

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NAME:	Leanne M	lacEachen	DATE RANGE:	1-1	Nov-23	30-Nov-23									
Date Expense Incurred	Type of expense ¹	Purpose of expense ² and description	Expense amount (DO NOT incid mileage and meals) (\$)	From	То	kms driven	Mileage calculated	Breakfast	Meal per diems			Paid by MOVC	HST	GL account	
							\$ 0.58	\$ 13.00	\$ 20.00			Total Meals			
Nov 3/23	Travel	Strait IT Board		Port Hood	Port Hawkesbury	110	\$63.47		\$20.00			\$20.00		\$10.89	
Nov 7/23_	Travel	Policing meeting		Port Hood	HALIFAX	600	\$346.20	\$13.00	\$20.00			\$33.00		\$49.46	
Nov 9/23	Travel	Meeting with Minister Rushton DNRR		Port Hood	HALIFAX	600	\$346.20	\$13.00	\$20.00	\$30.00		\$63.00		\$53.37	
Nov 24/23	Travel	Strait IT Board meeting		Port Hood	Port Hawkesbury	110	\$63.47					\$0.00		\$8.28	
Nov 7/23	Travel	Parking/Tolls	\$16.50				\$0.00					\$0.00		\$2.15	
Nov 9/23	Travel	Parking /Tolls	\$16.50									\$0.00		\$2.15	
	Travel											\$0.00		\$0.00	
	Other											\$0.00		\$0.00	
												\$0.00		\$0.00	
												\$0.00		\$0.00	
												\$0.00		\$0.00	
												\$0.00		\$0.00	
												\$0.00		\$0.00	
			\$33.00				\$819.34					\$116.00	\$0.00	\$126.31	
Comments:															
							LESS AMO	DUNT PAID			ICIPALITY:				
									BAL	ANCE DU	E (OWED):	\$968.34			
municipal busin	I certify that the amounts claimed in this request are accurate, in accordance with municipal policies, and were incurred while conducting municipal business. Claimant's name Signed Date							By approving abides by many Approver			e claim 1 am a to the boar of Signed	attesting that the my knowledge	Date	v3da	3

Type 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.

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				From			T	0							
NAME:	Leanne M	acEachen	DATE RANGE:	1-1	lov-23		30-N	ov-23							
Date Expense Incurred	Type of expense ¹	Purpose of expense ² and description	Expense amount (DO NOT incid mileage and meals) (\$)	From	То	kms driven	Mileage calculated	Breakfast				Paid by MOVC	HST	for office use GL account	
Nov 3/23	Travel	Strait IT Board		Port Hood	Port Hawkesbury	110	\$ 0.58 \$63.47	\$ 13.00	\$ 20.00	\$ 30.00	\$ 10.00	\$20.00		\$10.89	
Nov 7/23 -	Travel	Policing meeting		Port Hood	HALIFAX	600	2306.78	O\$13.00	\$20.00			\$33.00		\$44.32	
Nov 9/23	Travel	Meeting with Minister Rushton DNRR		Port Hood	HALIFAX	600	\$346.20	\$13.00	\$20.00	\$30.00		\$63.00		\$53.37	
Nov 24/23*	Travel	Strait IT Board meeting		Port Hood	Port Hawkesbury	110	\$63.47					\$0.00		\$8.28	
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												\$0.00		\$0.00	
												\$0.00		\$0.00	
												\$0.00		\$0.00	
												\$0.00		\$0.00	
			\$33.00									\$0.00		\$0.00	
Comments:			819			тот	AL CLAIM:	\$116.00 \$928.92	\$0.00	\$121.16					
		-	LESS AMOUNT PAID DIRECTLY BY MUNICIPALITY:S0.00							34					
				-	LESS AMOUNT PAID DIRECTLY BY MUNICIPALITY:										
I certify that the amounts claimed in this request are accurate, in accordance with municipal policies, and were incurrent municipal business. Claimant's name Signed						_		By approvin abides by m	ne ME	this expensense policies	se daim lam a to the best of Signed	attesting that the		0531	123

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