MUNICIPALITY OF THE COUNTY OF VICTORIA COUNCILLOR EXPENSE CLAIM

Date Expense Incurred	Type of expense ¹	Purpose of expense ² and description	Expense amount (DO NOT incld mileage and meals) (\$)	kms	Mileage calculated	Meal per diems					D.:41	CESSAIF OSCRIPTION AND	for office use
						Breakfast	Lunch	Dinner	Incidentals	Total Meals	Paid by MOVC	HST	GL account
Dec.01/23		EDP St Peters		240	138.48	\$ 13.00	\$ 20.00	\$ 30.00	\$ 10.00				
ec.06/23		Mtg D of PW Meadow Road		100	57.70					a			
ec.14/23		Baddeck to Dartmouth		360	205.20			30.00	acc. \$50.00	80.00			
ec.15/23		Dartmouth, Halifax and Baddeck		380	216.60	13.00			Park 12.00	25.00			
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mments:				L	617.98				L	105.00	-	-	
14-15 Service	e Exchange	Meeting		1	LESS AMO	UNT PAID	DIRECTLY BAL	BY MUNIC	AL CLAIM: CIPALITY: E (OWED):	722.98 - 722.98			
rtify that the nicipal polici	amounts cla es, and were	imed in this request are accurate, in accordan incurred while conducting municipal business	ce with			By approving abides by mu	and signing nicipal exper	ise policies to	claim, I am atte	esting that the o	laim 1/24		

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.