MUNICIPALITY OF THE COUNTY OF VICTORIA COUNCILLOR EXPENSE CLAIM

IAME:	Paul Mac	Neil (Councillor District 1)			DATE RANGE:	(FACTOR)	Nov-23	-	1000 E 2000 2000 C	eb-24	<u>.</u>					
Date Expense Incurred 27-Nov-23	Type of expense ¹	Purpose of expense ² and description	Expense amount (DO NOT incid mileage and meals) (\$)	From	То	kms driven	Mileage calculated \$ 0.577	Meal per diems Breakfast Lunch Dinner Incidentale I				Paid by MOVC	нѕт	GL account		
	Travei							\$ 13.00	Lunch \$ 20.00	Dinner \$ 30,00	incidentals \$ 10.00	Total Meals				
-Dec-23	en e			iona	Baddeck	106	\$61.16					\$0.00		\$7.98		
3-Jan-24	amerika pik Kalendari kalen	Council - In Camera Meetings		Iona	Baddeck	106	\$61.16					\$0.00		\$7.98		
San		VCT, Council, Hospital Board		Iona	Baddeck	106	\$61.16					\$0.00		\$7.98		
-Feb-24	Travel	Committee of the Whole - Budget		lona	Baddeck	106	\$61.16					\$0.00		\$7.98		
-Feb-24	Travel	Alderwood, Meeting with MP Battiste and Councul		lona	Baddeck	106	\$61.16					\$0.00		\$7.98		
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ients:			\$0.00	9	The additional and red from the	16 9500 0 0 500	\$305.81					\$0.00	\$0.00	\$0.00		
J17528.										TOTA	AL CLAIM:	****				
							LESS AMO	UNT PAID	DIRECTLY		CIPALITY: _	\$305.81 \$0.00				
				 							(OWED):					
fy that the a ipai busine	amounts clai ss.	med in this request are accurate, in accordance	se with municipal policies,	and were incurr	ed while conducting	_	E	By approving	and signing t	his expense	claim Smarte	Sting that the o	aim ahidas			
aui MacNeil Palm Tel							By approving and signing this expense claim, I are attesting that the claim abides by municipal expense policies to the best of my knowledge									
mant's na	t's name Signed 20+85-24 Date						Approver's name Signed Date									