

**MUNICIPALITY OF THE COUNTY OF VICTORIA  
COUNCILLOR EXPENSE CLAIM**

NAME: Norman MacDonald D 8 DATE RANGE: 2023- October

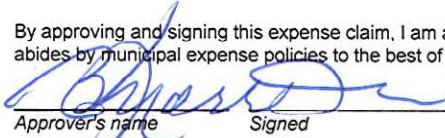
Date Expense Incurred	Type of expense <sup>1</sup>	Purpose of expense <sup>2</sup> and description	Expense amount (DO NOT incld mileage and meals) (\$)	kms driven	Mileage calculated	Meal per diems					Paid by MOVC	for office use	
						Breakfast	Lunch	Dinner	Incidentals	Total Meals		HST	GL account
						\$ 13.00	\$ 20.00	\$ 30.00	\$ 10.00				
oct 10/23		council/LIC public hearing		87	50.20							6.55	
Oct 23/23		COW meeting		274	158.10							20.62	
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			-		208.30							-	

Comments:  
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TOTAL CLAIM: 208.30  
 LESS AMOUNT PAID DIRECTLY BY MUNICIPALITY: -  
**BALANCE DUE (OWED): 208.30**

I certify that the amounts claimed in this request are accurate, in accordance with municipal policies, and were incurred while conducting municipal business.

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 \_\_\_\_\_

Claimant's name \_\_\_\_\_ Signed \_\_\_\_\_

<sup>1</sup>Type of expense: PD = professional development (includes course/conference registration), travel (includes accommodations, transportation, mileage, parking), meals or other  
<sup>2</sup>Purpose of expense = name and location of conference, meeting, municipal event, etc.