

MUNICIPALITY OF THE COUNTY OF VICTORIA
COUNCILLOR EXPENSE CLAIM

NAME: Bruce Morrison DATE RANGE: From 09/07/23 To 09/21/23

| Date Expense Incurred | Type of expense ¹ | Purpose of expense ² and description | Expense amount (DO NOT inclid mileage and meals) (\$) | From | To | kms driven | Mileage calculated | Meal per diems | | | | | Paid by MOVC | for office use | |
|-----------------------|------------------------------|-------------------------------------------------|-------------------------------------------------------|------|----|------------|--------------------|----------------|----------|----------|-------------|-------------|--------------|----------------|------------|
| | | | | | | | | Breakfast | Lunch | Dinner | Incidentals | Total Meals | | HST | GL account |
| | | | | | | | | \$ 0.58 | \$ 13.00 | \$ 20.00 | \$ 30.00 | \$ 10.00 | | | |
| 2023-09-07 | Travel | Baddeck to Little Narrows | | | | 50 | \$25.57 | | \$20.00 | | | \$20.00 | | \$5.94 | |
| 2023-09-21 | Travel | Baddeck to South Haven | | | | 35 | \$17.90 | | | | | \$0.00 | | \$2.33 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | | | | | | | | | | \$0.00 | | \$0.00 | |
| | | | \$0.00 | | | | \$43.46 | | | | \$20.00 | \$0.00 | \$6.28 | | |

Comments:

TOTAL CLAIM: \$63.46
LESS AMOUNT PAID DIRECTLY BY MUNICIPALITY: \$0.00
BALANCE DUE (OWED): \$63.46

I certify that the amounts claimed in this request are accurate, in accordance with municipal policies, and were incurred while conducting municipal business.
Bruce S. Morrison Oct 20/23
Claimant's name Signed Date

By approving and signing this expense claim, I am attesting that the claim abides by municipal expense policies to the best of my knowledge.
[Signature] Leanne McIsaac Oct 24/23
Approver's name Signed Date

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.