## MUNICIPALITY OF THE COUNTY OF VICTORIA COUNCILLOR EXPENSE CLAIM

From

To

NAME:	Jackie Or	gan	Sept 28/23			Dec.	11/23								
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) (\$)	From	То	kms driven	Mileage calculated	Meal per diems				Paid by MOVC	нѕт	for office use  GL account	
								Breakfast \$ 13.00	Lunch \$ 20.00	Dinner \$ 30.00	Incidentals \$ 10.00	Total Meals	MOVC		
Sept 28/23	Travel	cow		Neil's Hbr	Baddeck	246	\$141,94					\$0.00		\$18.51	
Oct 4/28	Travel	public meeting		Neil's Hbr	Cape North	60	\$34.62					\$0.00		\$4.52	
Oct 10/23	Travel	public meeting		Neil's Hbr	Ingonish	67	\$38.66	ile tiek				\$0.00		\$5.04	
Oct23/23	Travel	cow		Neil's Hbr	Baddeck	246	\$141.94					\$0.00		\$18.51	
Nov 14/23	Travel	council		Neil's Hbr	Baddeck	246	\$141.94					\$0.00		\$18.51	
Nov 27/23	Travel	cow		Neil's Hbr	Baddeck	246	\$141.94					\$0.00		\$18.51	
Dec 11/23	Travel	Council		Neil's Hbr	Baddeck	246	\$141.94					\$0.00		\$18.51	
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Name of the last o			\$0.00			1351	\$782.99		Keenen			\$0.00	\$0.00	\$102.13	
Comments:										тот	AL CLAIM:	\$782.99			
						_	LESS AMO	OUNT PAID			ICIPALITY:				
									BAI	LANCE DU	E (OWED):	\$782.99			
I certify that the municipal busin	amounts clai	imed in this request are accurate, in accordance	ce with municipal policies	, and were incur	red while conducting	_		By approving	g and signing	this expense	e claim, I am a	testing that the o	claim abides		
Claimant's n	ame	Signed	_		Date	_	£	Approver	CAA	MAL	Signed	166	Date	1	. ,
		essional development (includes course/confer	rence registration) travel	(includes accord		tion mileage	narking) meals or		o name	2	//	( /	, Date C		
		e and location of conference, meeting, municip		indudes accom	miodauoria, u ariaporta	non, mieage	o, parking), meals or	Ou 101		/	14//	17/2	33		