MUNICIPALITY OF THE COUNTY OF VICTORIA COUNCILLOR EXPENSE CLAIM

NAME:	Norman MacDonald D 8 DATE RANGE: 2023-09-01(month of september)												
Date Expense Incurred	Type of expense ¹	Purpose of expense ² and description	Expense amount (DO NOT incid mileage and meals) (\$)	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		
Sep 8th/23		joint Boards of nursing Homes meeting		236	136.17							17.76	
sep 12th/23		council		274	158.10							20.62	
sep 21st/23		board meeting at firehall neils harbour		42	24.23					Zolania (*		3,16	
sept 28th/23		COW meet and environment		274	158.10							20.62	
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					0 90 E 6-0								
			-		476.60	j		<u> </u>		-		62.17	
Comments:								TOT	AL CLAIM:	476.60			
					LESS AMO	OUNT PAID		Y BY MUN	CIPALITY:	-			
							BAL	ANCE DU	E (OWED):	476.60			
I certify that th municipal poli	e amounts cla cies, and were	aimed in this request are accurate, in accorda e incurred while conducting municipal busines	nce with ss.			By approving abides by mu	and signing nicipal expe	this expensense	e claim, I am at to the best of r	testing that the ny knowledge	claim		
Claimant's nai	me	Signed	***************************************			Approver's na	me	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.