

Municipal Expense Claim

MAY 18 2018

Claimant's Name: Linda Fraser
 Claimant's Title: CAO
 Date expense report posted: _____

Date Expenses Incurred	Business Purpose of Expense: must include (if applicable): date of travel & destination	Professional Development Expense Type	Travel Expense Type	Travel/Prof Dev Cost (\$)	kms driven	Mileage calculated @ 0.4415	Meals				Other Expenses	Credit Card	Invoice
							Breakfast	Lunch	Dinner	Other			
05-10-18	Rural Internet Joint Council Yarmouth				210.00	\$92.72	\$15.00	\$20.00	\$35.00				
				-		\$92.72	-	-	-			-	-

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

Linda Fraser, CAO
 Print name and position [Signature]
Signed

*APPROVED by:
Jimmy MacAuliffe
 Print name and position [Signature]
Signed

 Print name and position Signed

Total Claim:	92.72
Less amount paid directly by municipality:	-
	92.72
	-
Balance Due (Owed):	92.72