

TRAVEL CLAIM MUNICIPALITY OF THE DISTRICT OF GUYSBOROUGH

THE INFORMATION REQUIRED IN BLOCKS MUST BE COMPLETED. DO NOT COMPLETE SHADED AREAS.

CLAIMANT Neil Decoff

RATE _____

TITLE Councillor

Period Covered
by This Report _____ to _____

MONTH/DATE	DETAILS OF TRAVEL	GL#	MEALS				MEALS TOTAL	HOTEL OR LODGING	OTHER	'KILOMETERS' TRAVELLED	MILEAGE	TOTAL
			B	L	D	Dry						
	<i>No Expenses for August</i>											
COLUMN TOTALS												

I hereby certify that the whole of the expenditure stated in the foregoing account was actually and necessarily incurred on Municipal business and that these expenses comply with Municipal expense guidelines published as Policy C-10 and that none of these expenses have been or will be reimbursed from any other sources of funds.


Signature of Claimant



REQUIRED ADMINISTRATIVE APPROVALS

I ACKNOWLEDGE RESPONSIBILITY THAT ALL EXPENDITURES ARE VALID, IN COMPLIANCE WITH THE POLICIES OF THE MUNICIPALITY / THAT SUFFICIENT FUNDS ARE AVAILABLE TO COVER THE EXPENDITURE.

Director/CAO _____ Date _____

Director of Finance _____ Date _____

TRAVEL CLAIM MUNICIPALITY OF THE DISTRICT OF GUYSBOROUGH

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CLAIMANT	Vernon Pitts
\$/Km Rate	0.590
TITLE	Warden

Period Covered by This Report	01-Aug-24	to	31-Aug-24
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MONTH/DATE	DETAILS OF TRAVEL	GL#	MEALS				MEALS TOTAL	HOTEL OR LODGING	OTHER	KILOMETERS TRAVELLED	MILEAGE	TOTAL
			B	L	D	Day						
August 1	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 2	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 6	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 7	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 8	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 9	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 12	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 13	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 14	Larry's River & Office	10 211 1112 200120							57.00	\$33.63	\$33.63	
August 15	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 16	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 20	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 21	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 27	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
August 28	Office	10 211 1112 200120							27.00	\$15.93	\$15.93	
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		10 211 1112 200120										
COLUMN TOTALS										435.00	\$256.65	\$256.65

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Signature of Claimant



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Director/CAO Date

Director of Finance Date