TRAVEL CLAIM MUNICIPALITY OF THE DISTRICT OF GUYSBOROUGH

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

CLAIMANT	Janet Peitzsche
RATE	$0.610
TITLE	Deputy Warden

Period Covered by This Report: 01-Mar-26 to 31-Mar-26

MONTH/DATE	DETAILS OF TRAVEL	GL#	MEALS B	MEALS L	MEALS D	MEALS Day	MEALS TOTAL	HOTEL OR LODGING	OTHER	KILOMETERS TRAVELLED	MILEAGE	TOTAL
Mar 4	COW	10 211 1132 200160								102.00	$62.22	$62.22
Mar 10	Budget Session	10 211 1132 200160								102.00	$62.22	$62.22
Mar 18	Regular Monthly Council	10 211 1132 200160								102.00	$62.22	$62.22
		10 211 1132 200160										
		10 211 1132 200160										
		10 211 1132 200160										
		10 211 1132 200160										
		10 211 1132 200160										
		10 211 1132 200160										
COLUMN TOTALS										306.00	$186.66	**$186.66**

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

Municipality of the District of Guysborough

REQUIRED ADMINISTRATIVE APPROVALS

I ACKNOWLEDGE RESPONSIBILITY THAT AL EXPENDITURES ARE VALID, IN COMPLIANC WITH THE POLICIES OF THE MUNICIPALITY THAT SUFFICIENT FUNDS ARE AVAILABLE COVER THE EXPENDITURES.

Director/CAO Date

Director of Finance Date

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	$0.610
TITLE	Councillor

Period Covered by This Report	01-Mar-26	to	31-Mar-26

MONTH/DATE	DETAILS OF TRAVEL	GL#	MEALS B	MEALS L	MEALS D	MEALS Day	MEALS TOTAL	HOTEL OR LODGING	OTHER	KILOMETERS TRAVELLED	MILEAGE	TOTAL
Mar 4	Budget & COW	10-211-1132-200140								38	$23.18	$23.18
Mar 10	Budget Session	10-211-1132-200140								38	$23.18	$23.18
Mar 18	Regular Monthly Council	10-211-1132-200140								38	$23.18	$23.18
Mar 26	ERSWM	10-211-1132-200140								38	$23.18	$23.18
Mar 31	PHPWind CLC, Lincolnville	10-211-1132-200140								46	$28.06	$28.06
		10-211-1132-200140										
		10-211-1132-200140										
COLUMN TOTALS										198.00	$120.78	**$120.78**

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Signature of Claimant

Municipality of the District of Guysborough

REQUIRED ADMINISTRATIVE APPROVALS

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THAT SUFFICIENT FUNDS ARE AVAILABLE T
COVER THE EXPENDITURES.

Director/CAO Date

Director of Finance Date

TRAVEL CLAIM MUNICIPALITY OF THE DISTRICT OF GUYSBOROUGH

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CLAIMANT	Susan Cashin
$/Km Rate	0.610
TITLE	Councillor

Period Covered by This Report: 01-Mar-26 to 31-Mar-26

MONTH/DATE	DETAILS OF TRAVEL	GL#	MEALS B	MEALS L	MEALS D	MEALS Day	MEALS TOTAL	HOTEL OR LODGING	OTHER	KILOMETERS TRAVELLED	MILEAGE	TOTAL
Mar 4	COW	10 211 1132 200170								90.00	$54.90	$54.90
Mar 14	Endometriosis Presentation, CLC	10 211 1132 200170								90.00	$54.90	$54.90
Mar 17	Housing First Meeting, Guysborough	10 211 1112 200170								90.00	$54.90	$54.90
Mar 18	Regular Monthly Council	10 211 1112 200170								90.00	$54.90	$54.90
Mar 24	Meeting, Guysborough	10 211 1112 200170								90.00	$54.90	$54.90
		10 211 1112 200170										
		10 211 1112 200170										
		10 211 1112 200170										
		10 211 1112 200170										
COLUMN TOTALS										450.00	$274.50	**$274.50**

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

Municipality of the District of Guysborough

REQUIRED ADMINISTRATIVE APPROVALS

I ACKNOWLEDGE RESPONSIBILITY THAT AL EXPENDITURES ARE VALID, IN COMPLIANC WITH THE POLICIES OF THE MUNICIPALITY, THAT SUFFICIENT FUNDS ARE AVAILABLE T COVER THE EXPENDITURES.

Director/CAO Date

Director of Finance Date

TRAVEL CLAIM MUNICIPALITY OF THE DISTRICT OF GUYSBOROUGH

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

CLAIMANT: Hudson MacLeod

RATE: **0.610**

TITLE: Councillor

Period Covered by This Report: 01-Mar-26 to 31-Mar-26

MONTH/DATE	DETAILS OF TRAVEL	GL#	MEALS B	MEALS L	MEALS D	MEALS Day	MEALS TOTAL	HOTEL OR LODGING	OTHER	KILOMETERS TRAVELLED	MILEAGE	TOTAL
Mar 4	COW	10-211-1132-200180								124.00	$75.64	$75.64
Mar 10	Budget Meeting	10-211-1132-200180								124.00	$75.64	$75.64
		10-211-1132-200180										
		10-211-1132-200180										
COLUMN TOTALS										248.00	$151.28	**$151.28**

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Signature of Claimant

Municipality of the District of Guysborough

REQUIRED ADMINISTRATIVE APPROVALS

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COVER THE EXPENDITURES.

Director/CAO Date

Director of Finance Date