





Councillor Name: Joe Blakeman Month of: March Year: 2022

Date	Nature of Duties	Mileage	Meals	Hotel	Other
March 1st	DARwell Lagoon	100			
3rd	Pub	100			
7th	Edmonton Education	100			
8th	Edmonton Education	100			
10th	CC	100			
11th	SU Sandy Sunrise	110			
13th	RMA	100			
16th	RMA	100			
18th	Office	100			
21st	Office	100			
23rd	Budget	100			
24th	CC	100			
<b>TOTALS</b>					

**ALL APPLICABLE RECEIPTS MUST BE ATTACHED WITH CLAIM**

ACCOUNTS PAYABLE USE ONLY											
Invoice No.:	_____										
Description:	_____										
Codes:	_____										
<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td> </tr> <tr> <td>T</td><td>F</td><td>SF</td><td>T/O</td><td>LOC</td> </tr> </table>						T	F	SF	T/O	LOC	Ex _____ Inc _____
T	F	SF	T/O	LOC							
<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td> </tr> <tr> <td>T</td><td>F</td><td>SF</td><td>T/O</td><td>LOC</td> </tr> </table>						T	F	SF	T/O	LOC	Ex _____ Inc _____
T	F	SF	T/O	LOC							
<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td> </tr> <tr> <td>T</td><td>F</td><td>SF</td><td>T/O</td><td>LOC</td> </tr> </table>						T	F	SF	T/O	LOC	Ex _____ Inc _____
T	F	SF	T/O	LOC							

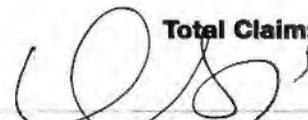
Total # km: \_\_\_\_\_ @ \$0.59 \$ \_\_\_\_\_

Total Meals: \$ \_\_\_\_\_

Total Hotels: \$ \_\_\_\_\_

Total Other: \$ \_\_\_\_\_

Total Claim: \$ \_\_\_\_\_

  
Councillor Signature

\_\_\_\_\_  
Councillor Signature

\_\_\_\_\_  
Date Submitted

The information collected in this document will be used for the purpose allowed under the authority of the *Municipal Government Act*. The personal information that you provide may be made public, subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. If you require further information regarding the collection or use of this information, please contact Lac Ste. Anne County Administration 780-785-3411.