



Councillor Name: Joe Blakeman

MONTH OF: August

YEAR: 2023

Date	Nature of Duties	Mileage	Meals	Hotel	Other
Aug 3	Pw	100			
8	A.S.B	100			
9	onway	40			
11	OFFICE	100			
15	DLC	100			
21	OFFICE	100			
TOTALS:					

ALL APPLICABLE RECEIPTS MUST BE ATTACHED WITH CLAIM

ACCOUNTS PAYABLE USE ONLY					
Invoice No:	<u>Aug 2023 M</u>				
Description:	<u>Mileage</u>				
Codes:	<u>2</u>	<u>11</u>	<u>00</u>	<u>2101</u>	<u>00</u>
	T	F	SF	T/O	LOC
					Ex. <u>334.80</u>
					Inc.
					Ex.
					Inc.
					Ex.
					Inc.

km 540 @ \$0.62 334.80

Total Meals: _____

Total Hotels: _____

Total Other: _____

TOTAL CLAIM: 334.80

→ [Signature]
Councillor Signature

→ [Signature]
Councillor Signature

04/6/23
Date Submitted

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