LAC STE. ANNE COUNTY

# Councillor Expense Form

Legislative

Councillor Name: **Ross Bohnet** MONTH OF: **July** YEAR: **2024**

| Date | Nature of Duties | Mileage | Meals | Hotel | Other |
|---|---|---|---|---|---|
| 04-Jul-24 | Planning Meeting Sangudo | 60 | | | |
| 16-Jul-24 | ASB Meeting Sangudo | 60 | | | |
| 18-Jul-24 | Council Meeting Sangudo | 60 | | | |
| 22-Jul-24 | Zone Meeting Edmonton | 280 | | | |
| | **TOTALS:** | **460** | **$0.00** | **$0.00** | **$0.00** |

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

**ACCOUNTS PAYABLE USE ONLY**

Invoice No: July 2024 M

Description: Mileage

Codes

| T | F | SF | T/O | LOC | | |
|---|---|---|---|---|---|---|
| 2 | 11 | 00 | 2101 | 0000 | Ex. Inc. | 294.40 |
| | | | | | Ex. Inc. | |
| | | | | | Ex. Inc. | |

# km 460 @ $0.64 $294.40

✓ CK

| | |
|---|---|
| Total Meals: | $0.00 |
| Total Hotels: | $0.00 |
| Total Other: | $0.00 |
| TOTAL CLAIM: | **$294.40** |

*Councillor Signature*

*Councillor Signature*

August 1/24

*Date Submitted*

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