LAC STE. ANNE COUNTY

Councillor Expense Form

Legislative

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

Date	Nature of Duties	Mileage	Meals	Hotel	Other
01-Aug-24	Planning Meeting Sangudo	60			
15-Aug-24	Council Meeting Sangudo	60			
	TOTALS:	**120**	**$0.00**	**$0.00**	**$0.00**

ALL APPLICABLE RECEIPTS MUST BE ATTACHED WITH CLAIM

ACCOUNTS PAYABLE USE ONLY

Invoice No: Aug 2024 M

Description: Mileage

Codes	T	F	SF	T/O	LOC	Ex Inc	
	2	11	00	2101	0000	Ex	**$76.80**
						Ex. Inc.	
						Ex. Inc.	

# km	120	@	$0.64	$76.80
		Total Meals:	$0.00
		Total Hotels:	$0.00
		Total Other:	$0.00
		TOTAL CLAIM:	**$76.80**

Ross Bohnet (Aug 29, 2024 07:40 MDT)

Councillor Signature

Joe Bokenan (Aug 29, 2024 08:26 MDT)

Councillor Signature

Date Submitted

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