LAC STE. ANNE COUNTY

Councillor Expense Form

Legislative

Councillor Name: Lloyd Giebelhaus **Month of:** SEPTEMBER **Year:** 2024

Date	Nature of Duties	Mileage	Meals	Hotel	Other
Sept 04	MPC @ Sangudo	12			
Sept 05	PW Mtg @ Sangudo	12			
Sept 12	County Council	12			
Sept 13	West End Bus/FRC mtg @ Mayerthorpe	40			
Sept 26	County Council	12			
	TOTALS	88	$ 0.00	$ 0.00	$ 0.00

ALL APPLICABLE RECEIPTS MUST BE ATTACHED WITH CLAIM

Invoice No.: Sept 2024 M

Description: Mileage

Codes:

T	F	SF	T/O	LOC		
2	11	00	2101	00	Ex 56.32	Inc
					Ex	Inc
					Ex	Inc

Total # km: 88 @ .64 56.32

Total Meals: $ 0.00

Total Hotels: $ 0.00

Total Other: $ 0.00

Total Claim: $ ~~0.00~~ 56.32

Councillor Signature

Councillor Signature

Oct 3/24

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.