LAC STE. ANNE COUNTY

Councillor Expense Form

Legislative

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

Date	Nature of Duties	Mileage	Meals	Hotel	Other
03-Oct-24	Planning Meeting Sangudo	60			
15-Oct-24	ICF Meeting Mayerthorpe	22			
	TOTALS:	**82**	**$0.00**	**$0.00**	**$0.00**

ALL APPLICABLE RECEIPTS MUST BE ATTACHED WITH CLAIM

ACCOUNTS PAYABLE USE ONLY

Invoice No: Oct 2024 M

Description: Mileage

Codes	T	F	SF	T/O	LOC		
	2	11	00	2101	0000	Ex Inc	**$52.48**
						Ex. Inc.	
						Ex. Inc.	

km 82 @ $0.64 $52.48

Total Meals: $0.00

Total Hotels: $0.00

Total Other: $0.00

TOTAL CLAIM: **$52.48**

Ross Bohnet (Nov 5, 2024 10:03 MST)

Councillor Signature

Joe Blakeman (Nov 5, 2024 10:19 MST)

Councillor Signature

Date Submitted

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