LAC STE. ANNE COUNTY

Councillor Expense Form

Legislative

Councillor Name: Lloyd Giebelhaus **Month of:** - December **Year:** 2024

Date	Nature of Duties	Mileage	Meals	Hotel	Other
Dec 2/24	Budget Mtg @ Sangudo	12			
Dec 4/24	MPC @ Sangudo	12			
Dec 13/24	County Council @ Sangudo	12			
Dec 16/24	ASB @ Sangudo	12			
Dec 20/24	Budget Mtg @ Sangudo	12			
	TOTALS	60.00	$ 0.00	$ 0.00	$ 0.00

ALL APPLICABLE RECEIPTS MUST BE ATTACHED WITH CLAIM

Invoice No.: Dec 2024 M

Description: Mileage

Codes:

T	F	SF	T/O	LOC		
2	11	00	240	00	Ex 38.40 Inc	
					Ex Inc	
					Ex Inc	

Total # km: 0 60 @ .64 38.40

CR.

Total Meals: $ 0.00

Total Hotels: $ 0.00

Total Other: $ 0.00

Total Claim: $ 38.40

Lloyd

Councillor Signature

Councillor Signature

January 9/25

Date Submitted

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