

# COUNCIL AND CHIEF ADMINISTRATIVE OFFICER EXPENSE REPORTING FORM

Claimant's Name Shane Weir  
 Title Councillor  
 Date Apr-25

**\*\*NO EXPENSES TO REPORT\*\***

Date Expenses Incurred	Business Purpose of Expense (must include (if applicable) date of travel & destination)	EXPENSE TYPE i.e. Meals, Hotel, Mileage, Conference Registration, Training Course Fee, Parking, Other - Specify	KMS Driven	Milage \$0.5838/k m (\$)	Meals			Hotel	Other Expenses	Total Expense (\$)
					Breakfast	Lunch	Dinner			
										-
										-
										-
<b>TOTAL</b>									<b>\$</b>	<b>-</b>

**\*\*Alcohol cannot be expenses by an individual to the Town of Digby**