

# COUNCIL AND CHIEF ADMINISTRATIVE OFFICER EXPENSE REPORTING FORM

Claimant's Name Ben Cleveland  
 Title Mayor  
 Date Jan-20

| Date Expenses Incurred | Business Purpose of Expense (must include (if applicable) date of travel & destination) | EXPENSE TYPE<br>i.e.<br>Meals, Hotel, Mileage,<br>Conference Registration,<br>Training Course Fee, Parking,<br>Other - Specify | KMS Driven | Milage Calculated @ \$0.4415 | Meals     |          |        | Hotel | Other Expenses  | Total Expense (\$) |
|------------------------|---|--|------------|------------------------------|-----------|----------|--------|-------|-----------------|--------------------|
|                        |   |  |            |                              | Breakfast | Lunch    | Dinner |       |                 |                    |
| 31-Jan-20              | Meeting with Municipal Rep  | Meal   |            |                              |           | \$ 46.09 |        |       | \$ 46.09        |                    |
|                        |   |  |            |                              |           |          |        |       | -               |                    |
| <b>TOTAL</b>           |   |  |            |                              |           |          |        |       | <b>\$ 46.09</b> |                    |

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