

COUNCIL AND CHIEF ADMINISTRATIVE OFFICER EXPENSE REPORTING FORM

Claimant's Name Ben Cleveland
 Title Mayor
 Date 1/31/2018

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 Calculated @ \$0.4289	Meals			Hotel	Other Expenses	Total Expense (\$)
					Breakfast	Lunch	Dinner			
1/30/2018	UNSM Meeting - Halifax	Meal/Hotel			\$ 24.28		\$ 50.20	\$ 159.84		\$ 234.32
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TOTAL										\$ 234.32

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