

COUNCIL AND CHIEF ADMINISTRATIVE OFFICER EXPENSE REPORTING FORM

Claimant's Name Ben Cleveland
Title Mayor
Date Mar-19

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 @ \$0.4415	Meals			Hotel	Other Expenses	Total Expense (\$)
					Breakfast	Lunch	Dinner			
3/25/2019	Volunteer Awards -Halifax	Parking		\$ -					\$ 12.00	\$ 12.00
3/25/2019	Volunteer Awards -Halifax	Mileage	470	207.51						207.51
										-
TOTAL									\$	219.51

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