

**TRAVEL EXPENSE CLAIM FORM
MUNICIPALITY OF THE DISTRICT OF ARGYLE**

Name: Akin Muse Travel Dates: May 8/19.
 Telephone: _____ Function: meeting with AGN Band

1) KILOMETRES: (44.15 cents per kilometer) as of April 1, 2018

DATE	FROM	TO	#KILOMETRES
TOTAL			\$ _____

2) MEALS: (no receipts necessary)
 (Meals = \$60.00/day Breakfast \$15.00 Lunch \$20.00 Supper \$25.00)

 \$ _____
 \$ _____
 \$ _____

3) LODGING: (attach receipts)

POSTED
PC 170464

 \$ _____
 \$ _____

4) TAXIS, BUSES, PARKING, ETC. (attach receipts)

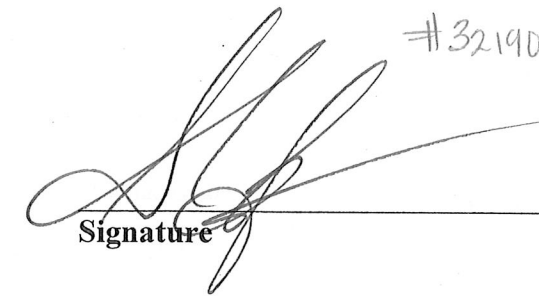
 \$ _____
 \$ _____

5) OTHER: (attach receipts)

Meal paid for 6 - to resill to Yarmouth
Airport
 \$ _____
 \$ 135.13 (NOHST)

#32190-006 = 135.13

Subtotal: \$ 135.13
Less Advance \$ _____
TOTAL \$ 135.13

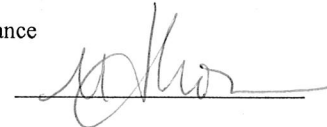

 Signature _____

May 13/19
 Date _____

R
A
D
P

Reserved for Finance Office:

Authorized by: Chief Administrative Officer Director of Finance

Date: May 14/19 Signature: 

Posted on municipal website: