

Municipality of the District of Barrington Expense Claim

Claimant's Name: Shaun Hatfield

Claimant's Title: Councillor

Date Expense Incurred	Business Purpose of Expense: must include (if applicable): Date of travel & Destination	Professional Development Expense Type	Travel Expense Type	Travel/Prof Dev Cost (\$)	kms Driven	Mileage Calculated @ 0.4585	Breakfast	Lunch	Dinner	Other	Total
24-Sep-19	Yarmouth Hospital Foundation	Meeting	Mileage		140	64.19					64.19
				-		64	-	-	-	-	64.19