

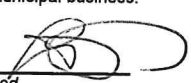
Municipality of the District of Digby Expense Claim

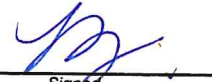
JUN 28 2019

Claimant's Name: Linda Gregory
 Claimant's Title: DEPUTY WARDEN
 Date expense report posted: MAY 25--JUNE

Date Expenses 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	Meals			Other Expenses		Credit Card	Invoice
							Breakfast	Lunch	Dinner	Description	Amount		
05/19/28	FCM		VEHICLE		496.00	227.42	\$20	\$20	\$45				
									45.00	INCIDENTALS	10.00		
05/19/29							20.00	20.00	45.00	HOTEL	163.05		
										TAXI	40.00		
05/19/30							20.00	20.00	45.00	INC.	10.00		
										INC.	10.00		
05/19/31										INC.	10.00		
06/19/01									45.00	INC.	10.00		
05/19/02										INC.	10.00		
05/19/03										HOTEL	1,455.75		
										TAXI	40.00		
05/19/03							20.00	20.00	45.00		10.00		
										HOTEL	163.05		
06/19/08	FIRE ASSOC. RECOGNIZING 2 FIRE FIGHTERS								15.00	FERRY	7.00		
06/19/15	FRESH FOOD BOX OPENING					20.00							
06/19/16	CBRA—CLIMATE CHANGE				600.00	275.10							
06/19/17									45.00	INC.	10.00		
05/19/18							20.00	20.00		INC.	10.00		
06/19/19										INC.	10.00		
06/19/20										INC.	10.00		
06/19/21										INC.	10.00		
06/19/22							20.00			INC.	10.00		
										hotels			
										HOTEL			
						522.52							
						48.68							
							100.00	80.00	285.00		1,998.85		

I certify that the amounts claimed in this request are accurate, in accordance with municipal policy, and were incurred while conducting municipal business.

Linda Gregory 
 Print name and position Signed

*APPROVED by: Deputy Warden
L Fraser CAO 
 Print name and position Signed

Notes: Travel expenses include, but are not limited to accommodations, transportation and incidentals. Professional development expenses include, but are limited to course registration fees. Business purpose of an expense include, but are not limited to: conferences, meetings, municipal events, professional development. Alcohol cannot be expensed by an individual to a municipality. * Municipalities are required by the MGA to report, meals and professional development expenses. Municipalities may choose to report other expenses.

Total Claim: 2,986.37
 Less amount paid directly by municipality: -
 2,986.37
 Balance Due (Owed): 2,986.37

TAXI COOP
QUÉBEC

- Courrier / Livraison
- Gros et petits colis
- Commission
- Survolage / Déverrouillage



496, 2^e Avenue, Québec
taxiscoop-quebec.com



Date 03-06-2019

Montant 40,00 \$

[Signature]
signature chauffeur

CHAUFFEUR No.

321

SERVICE 7 JOURS / 24 HEURES



TAXI • COOP

Sainte-Foy • Sillery • Ancienne-Lorette • Cap-Rouge • Saint-Augustin

6 5 3 - 7 7 7 7

Date 3-06-2019

\$ 40.00

Reçu tx incl.

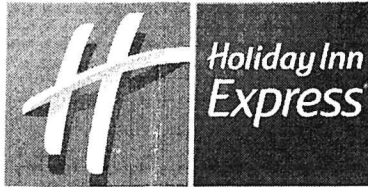
Votre chauffeur / N° de taxi [Signature]

45

2631, BOUL. DU VERSANT-NORD, QUÉBEC (QUÉBEC) G1V 1A3

TÉLÉPHONE : 418 658-5333 FAX : 418 653-1490

info@taxiscoop-quebec.com



05-29-19

Linda Gregory 1619 Culloden Rd Digby NS B0V 1A0 Canada	Folio No. :		Room No. :	202
	A/R Number :		Arrival :	05-28-19
	Group Code :		Departure :	05-29-19
	Company :	Stopover Inc	Conf. No. :	24243154
	Membership No. :	PC 391495306	Rate Code :	IL6UW
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-28-19	Package Rate	139.00	
05-28-19	Market Levy - 2%	2.78	
05-28-19	HST - 15%	21.27	
05-28-19	American Express		163.05
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews . We look forward to welcoming you back soon.		Total	163.05
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express Halifax Airport
 180 Pratt & Whitney Drive
 Enfield B2T 0C8 Canada
 HST# 869085407RT0002
 Telephone: (902) 576-7600 Fax: (902) 576-7601

15.19



Hilton Québec
1100, boulevard René-Lévesque Est, C.P. 157
Québec (Québec) G1R 4P3
Téléphone : 418 647-2411
Télécopieur : 418 647-6488

Linda Gregory
1619 Culloden Road,Rr3
Digby NS B0V1A
Canada

Membership No. : HH 749030579
A/R Number :
Company Name : FCM
Group Name : FCM -
Client Reference :

Rate Code. : GFEDR
Room No. : 1129
Arrival : 29.05.19
Departure : 03.06.19
No of Pax : 1 / 0
Page No. : 1 of 2
Folio No. :
Conf. No. : 3516310710
User Name : SAMI,F

03-JUN-19 00:30:08

Date	Description	Charges	Credits
29.05.19	Deposit Transferred at Check In		291.15
29.05.19	Room	245.00	
29.05.19	Occupancy tax	8.23	
29.05.19	GST	12.66	
29.05.19	PST	25.26	
30.05.19	Room	245.00	
30.05.19	Occupancy tax	8.23	
30.05.19	GST	12.66	
30.05.19	PST	25.26	
31.05.19	Room	245.00	
31.05.19	Occupancy tax	8.23	
31.05.19	GST	12.66	
31.05.19	PST	25.26	
01.06.19	Room	245.00	
01.06.19	Occupancy tax	8.23	
01.06.19	GST	12.66	
01.06.19	PST	25.26	
02.06.19	Room	245.00	
02.06.19	Occupancy tax	8.23	
02.06.19	GST	12.66	
02.06.19	PST	25.26	
02.06.19	American Express		1,164.60



AMÉRIQUES • EUROPE • MOYEN-ORIENT • AFRIQUE • ASIE • AUSTRALASIE



Hilton Québec
 1100, boulevard René-Lévesque Est, C.P. 157
 Québec (Québec) G1R 4P3
 Téléphone : 418 647-2411
 Télécopieur : 418 647-6488

Linda Gregory
 1619 Culloden Road,Rr3
 Digby NS B0V1A
 Canada

Rate Code. : GFEDR
 Room No. : 1129
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 Page No. : 2 of 2
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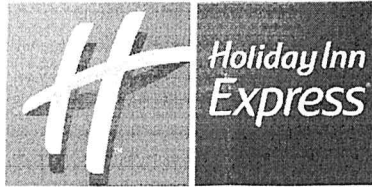
03-JUN-19 00:30:08

Date	Description	Charges	Credits
Tax Summary		Total	1,455.75
	GST PST OCC		1,455.75
RM Tax:	63.30 126.30 41.15	Total Balance	0.00
	GST PST		
F&B Tax:	0.00 0.00		
	GST PST		
Misc Tax:	0.00 0.00		
Total: 230.75			

Guest Signature

GST# 86054 9062 RT0097
 PST# 120 210 9108 TQ 0043

135.47



06-04-19

Linda Gregory 1619 Culloden Rd Digby NS B0V 1A0 Canada	Folio No. :	Room No. : 221
	A/R Number :	Arrival : 06-03-19
	Group Code :	Departure : 06-04-19
	Company : Stopover Inc	Conf. No. : 42200409
	Membership No. : PC 391495306	Rate Code : IL6UW
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
06-03-19	Package Rate	139.00	
06-03-19	Market Levy - 2%	2.78	
06-03-19	HST - 15%	21.27	
06-03-19	American Express		163.05
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews . We look forward to welcoming you back soon.		Total	163.05
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express Halifax Airport
 180 Pratt & Whitney Drive
 Enfield B2T 0C8 Canada
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 Telephone: (902) 576-7600 Fax: (902) 576-7601

15.19



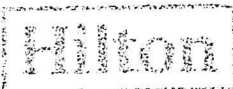
Hampton Inn - Sydney
 60 Maillard Street • Membertou, NS B1S 3W3
 Phone (902) 564-6555 • Fax (902) 564-5959

GREGORY, LINDA ***** ***** *****	name address	room number: 515/SXCP arrival date: 6/17/2019 4:57:00 PM departure date: 6/18/2019	If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.
		adult/child: 0/0 room rate: 149.00	
Confirmation Number: ***** 6/18/2019		Rate Plan: CBA HH #: 749***** BLUE AL: Car:	
		Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. I have requested weekday delivery of the Chronicle Herald. If refused, a credit of \$0.50 will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation due to a physical disability. Please indicate yes by checking here: <input type="checkbox"/>	
		signature:	

date	reference	description	amount
6/17/2019	627254	GUEST ROOM	\$149.00
6/17/2019	627254	MUNICIPAL MARKETING LEVY	\$2.98
6/17/2019	627254	RM & LEVY - HST	\$22.80
		WILL BE SETTLED TO AX*1008	\$174.78
		EFFECTIVE BALANCE OF	\$0.00

EXPENSE REPORT SUMMARY

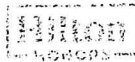
	6/17/2019	STAY TOTAL	
ROOM AND TAX	\$174.78	\$174.78	
DAILY TOTAL	\$174.78	\$174.78	



Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit Honors.com

Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.

Total Invoice Amount \$149.00 \$25.78



Man. 34.78

CBRA covered \$140 per night

for reservations call 1.800.hampton or visit us online at hampton.com

thanks.

account no.	date of charge	folio/check no.
		212664 A
card member name	authorization	initial
establishment no. and location HST#835360116RT0001	purchases & services	
	taxes	
	tips & misc.	
signature of card member	total amount	
X		

Inverary Resort & Ceilidh Country Lodge
P.O. Box 190
369 Shore Road
Baddeck, Nova Scotia
B0E 1B0
Telephone: 902 295 3500 Fax: 902-295-3527

Linda Gregory
1619 Culloden Road
Digby
Nova Scotia
B0V 1A0

Page # 1
Res. # 381214
Checked in Tue Jun 18/19 - 4:52pm
Checked out Fri Jun 21/19 - 8:01am
Nights 3
Room Rate 150.00
Promo Code
Room 064

Group: Bras D'Or Biosphere Associatio

Date	Description	Reference	Charges	Credits
May13	PAID BY AMEX L - Thank you	Gregory * 1008		175.95
Jun18	Group Individual Rooms		150.00	
Jun18	CB Island Marketing Levy		3.00	
Jun18	HST		22.95	
Jun19	Group Individual Rooms		150.00	
Jun19	CB Island Marketing Levy		3.00	
Jun19	HST		22.95	
Jun20	Group Individual Rooms		150.00	
Jun20	CB Island Marketing Levy		3.00	
Jun20	HST		22.95	
Jun21	PAID BY AMEX L - Thank you	*1008		351.90
			0.00	527.85
				527.85

For your convenience we have provided a copy of your invoice. Please see our Front Desk team for clarity on any and all charges, and please dial 0 when departing your room. Thank you for staying with us and please visit again!

Our H.S.T. # is 102520731

Charge Summary:

HST 68.85

CBRA covered
\$140 per night
x 3
\$420
Municipality
107.85

Best Western Truro - Glengarry

150 Willow Street
Truro, NS B2N 4Z6

(902) 893-4311

reservations@bwglengarry.com

HST @720 514 280

C/O 06/22/2019 08:42 AM EW

Loyalty Club: 6006637363007006 PLATINUM

Room # 270-A

Registered To:

Gregory, Linda
R.R. # 3, 1619 Culloden Road
Digby, NS B0V1A0
CANADA

Conf # 200885
Arrival 06/21/19
Departure 06/22/19

(902) 245-3005

Room Type INQQ-2 QUEEN BEDS
Guests 2 / 0

Payment Acct Amex
XXXX-XXXXXX-X1008

Posting Date	Oper	AcctCode	Description	From	Reference	Amount
06/21/19	EW	RC	ROOM CHRG REVENUE			\$113.99
06/21/19	EW	9	HST			\$17.10
06/22/19	EW	AX	PAYMENT AMEX			(\$131.09)

Balance Due	\$0.00
--------------------	---------------

*CBRTA
did not
cover.*

For future reservations please call 800-567-4276

Each best Western branded hotel is independently owned and operated

We look forward to seeing you again ! " Like " us on Facebook !

12.21

Signature