

Municipality of the District of Barrington Expense Claim

Claimant's Name: Amy Mackinnon

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 @ 0.5838	Breakfast	Lunch	Dinner	Other
	No expenses to report for April,									
	May, June 2026									
				-		-	-	-	-	-

[illegible]