



Request and Approval to Incur Hospitality Event Expenses Form

All hospitality-related expenses require prior authorization. All hospitality expenses incurred must be supported by itemized receipts. Refer to the Hospitality Policy for further information.

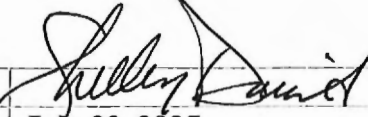
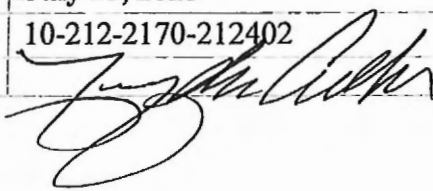
Destination and Purpose

Date of Request	July 23, 2025
Department	Administration
Employee Name	Shelley David
Title	Municipal Clerk
Location	Louisdale Lions Club Hall, Louisdale
Date Of Event	July 25, 2025
Purpose Of Event Or Activity	Housing Forum

✕ Estimated Hospitality Expense Details

Number of Attendees	Approx. 25
Meal Costs	\$200.00 – Morning Break – Tea/Coffee/Cookies
Meeting Space Costs	\$150.00 – Hall Rental
Gratuities	\$30.60
Gift Costs	
Other expenses	\$ 25.00 – Technology Fee
Total Expenses	\$405.60

Approval

Claimant Signature	
Date Submitted	July 23, 2025
GL Code	10-212-2170-212402
CAO Approval	

LOUISDALE LIONS CLUB COMMUNITY CENTRE

3128 WHITESIDE ROAD, PO BOX 686

LOUISDALE , NS B0E1V0

JULY 25TH, 2025

INVOICE # 9034

MUNICIPALITY OF THE COUNTY OF RICHMOND

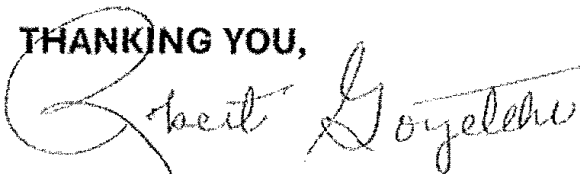
% LOIS LANDRY

**- RENTAL OF LOUISDALE LIONS COMMUNITY CENTRE FRIDAY JULY 25TH,
2025 (HOUSING MEETING).....\$75.00**

- TECHNOLOGY FEE.....\$25.00

TOTAL INVOICE:..... **\$100.00**

THANKING YOU,



ROBERT GOYETCHE (DEN RENTAL CHAIR)

**PLEASE MAKE CHEQUE PAYABLE TO LOUISDALE LIONS CLUB AT THE
ABOVE ADDRESS OR E-TRANSFER louisdalelionsclub2024@outlook.com**

Goods Rec'd. Date.....	Initial <i>MA</i>
Prices Checked.....	<i>S</i>
Add. & Ext. Checked.....	<i>S</i>
Approval for Payment.....	<i>a</i>
Discount Date.....	
Paid by Cheque No.....	
Distribution: Acc't. No. <i>10-212-2170-212402</i>	✓

HST 2



Request and Approval to Incur Hospitality Event Expenses Form

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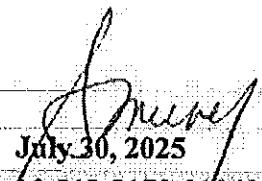
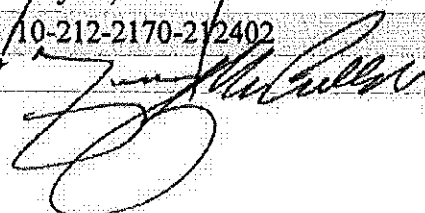
Destination and Purpose

Date of Request	July 30, 2025
Department	Community Development & Recreation/Council
Employee Name	Shannon Mury
Title	Director of Comm Devel & Recreation
Location	Council Chambers
Date Of Event	August 5, 2025
Purpose Of Event Or Activity	Funding Contributions – Cheque Presentation

Estimated Hospitality Expense Details

Number of Attendees	30	<table border="1"> <tr> <td>Goods Rec'd. Date.....</td> <td>Initial.....</td> </tr> <tr> <td>Prices Checked.....</td> <td></td> </tr> <tr> <td>Add. & Ext. Checked.....</td> <td></td> </tr> <tr> <td>Approval for Payment.....</td> <td></td> </tr> <tr> <td>Discount Date.....</td> <td></td> </tr> <tr> <td>Paid by Cheque No.....</td> <td></td> </tr> <tr> <td>Distribution: Acc't. No.....</td> <td></td> </tr> </table>	Goods Rec'd. Date.....	Initial.....	Prices Checked.....		Add. & Ext. Checked.....		Approval for Payment.....		Discount Date.....		Paid by Cheque No.....		Distribution: Acc't. No.....	
Goods Rec'd. Date.....	Initial.....															
Prices Checked.....																
Add. & Ext. Checked.....																
Approval for Payment.....																
Discount Date.....																
Paid by Cheque No.....																
Distribution: Acc't. No.....																
Meal Costs (light refreshments)	\$150															
Meeting space Costs	\$0															
Gratuities	\$0															
Gift Costs	\$0															
Other expenses	\$0															
Total Expenses	\$150															

Approval

Claimant Signature	
Date Submitted	July 30, 2025
GL Code	10-212-2170-212402
CAO Approval	



***** STORE COPY *****

Charles Forest CO-OP
2743 HIGH ROAD
ARICHAT, NS
BOE 1A0

Served by: SHEILA TYRRELL

Member card number: ****438

Take a Break Large \$39.99 10

SUBTOTAL \$39.99
HST 1 14% \$5.60
TOTAL \$45.59
Charge Account TENDER \$45.59
Cash CHANGE \$0.00

NUMBER OF ITEMS 1

Name

Signature

Term Tran Store Oper 08/05/25
1 6540 9277 110 08:14:26

Thank You for Shopping
Charles Forest CO-OP
HST #102924792RT

SHARE YOUR THOUGHTS
FOR A CHANCE TO WIN \$500
IN FOODLAND GIFT CARDS!

Hold on to this receipt and
complete our short online
Customer Survey by visiting:

<http://Atlantic.Foodland.ca/MyFoodland>

NO PURCHASE NECESSARY.

Rules on Contest website. Eligible for
residents over the age of majority of
New Brunswick; Newfoundland and
Nova Scotia and Prince Edward Island.
Contest ends Nov 1 2025.

Skill testing question to be correctly
answered to win.

Odds of winning depend on number
of entries received.



Charles Forest CO-OP
2743 HIGH ROAD
ARICHAT, NS
BOE 1A0

Served by: SHEILA TYRRELL

Member card number: ****438

Take a Break Large \$39.99 10
Tray Cookie \$34.99 10

SUBTOTAL \$74.98
HST 1 14% \$10.50
TOTAL \$85.48
Charge Account TENDER \$85.48
Cash CHANGE \$0.00

NUMBER OF ITEMS 2

Name

Signature

Term Tran Store Oper 08/05/25
1 6539 9277 110 08:13:10

Thank You for Shopping
Charles Forest CO-OP
HST #102924792RT

SHARE YOUR THOUGHTS
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**DEPARTMENT OF COMMUNITY DEVELOPMENT & RECREATION
AUTHORIZATION OF PAYMENTS**

DATE: August 6, 2025

PLEASE MAKE PAYABLE TO:

NAME: Coop

ADDRESS: 2743 High Road
Arichat, NS B0E 1A0

AMOUNT: \$131.04

DETAILS OF PAYMENT:

Ligh refreshments for funding contributions, cheque presentation

TOTAL \$131.07

Goods Rec'd.	Date	Initial
Prices Checked		JS
Add. & Ext. Checked		JS
Approval for Payment		JS
Discount Date		
Paid by Cheque No.		
Distribution Acct. No.	10-212 2170 212402	

115.3

SHANNON MURY
DIRECTOR