



Statement

Account Name: BOUDREAU, RAYMOND
Company Name: CAPE BRETON REGIONAL
MUNICIPALITY
Employee ID:
Statement Date (MM/DD/YYYY): 09/15/2025

Statement Summary:

Report any items which do not agree with your records within 30 days of the statement date.

For your records only. No payment required.

Transaction Summary:

Trans Date	Posting Date Trans ID	Description	Pre-Tax Amount Auth #	Total Tax	Trans Amount
09/05	09/08 610726954	WWW.AMANS. REG5YN9H4T HAMMONDS PLAI NS	\$ 146.40 042440	\$ 20.50 (e)	\$ 166.90