

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: Duane Movald

MONTH ENDED: Jan. 18/17

APPROVED BY: 

DATE	DETAILS	TIME	COUNCIL	ADMIN	CONVENT.	Payroll				OTHER	KM'S	MEALS				HOTEL	OTHER
						ASB	LARB/ CARB	MPC	DAB			B	L	D	\$ AMT		
Jan. 18/17	ASB Meeting	2 Day				\$170					88						
	Communication Allowance/month																75.00
	Preparation/Rate Payers Concerns x 2 days/month																
TOTAL																	

ENTERED

88 <sup>0.54</sup> kms x .50 = \$47.52

TOTAL EXPENSES \$217.52

TOTAL HONORARIA

I HEREBY CERTIFY THAT THE WHOLE OF THE EXPENDITURE WAS INCURRED ON COUNTY BUSINESS, THAT EACH ITEM GIVEN IS CORRECT, AND THAT AMOUNTS CLAIMED HAVE NOT PREVIOUSLY BEEN PAID TO ME OR ON MY BEHALF.

SIGNATURE: 

DATE: Jan 18/2017

TOTAL CLAIM: \$ 217.52

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: Allan Goddard

MONTH ENDED: Jan 2017

APPROVED BY: 

DATE	DETAILS	TIME	Payroll							KM'S	Accounts Payable				HOTEL	OTHER		
			COUNCIL	ADMIN	CONVENT.	ASB	WOODLOT	MPC	DAB		OTHER	MEALS						
			02-11-00-151	02-11-00-152	02-11-00-154	02-02-00-151	02-06-3-08-151	02-06-01-151	02-06-02-151		02-11-00-153	B	L	D			\$ AMT	
Jan 18 2017	Regular ASB Meeting					170.00												
	Communication Allowance/month																	75.00
	Preparation/Rate Payers Concerns x 2 days/month																	
TOTAL							170.00											

ENTERED

60 kms x  $\frac{.54}{.40}$  = 32.40

TOTAL A/P 32.40

TOTAL HONORARIA  
 I HEREBY CERTIFY THAT THE WHOLE OF THE EXPENDITURE WAS INCURRED ON MD BUSINESS, THAT EACH ITEM GIVEN IS CORRECT, AND THAT AMOUNTS CLAIMED HAVE NOT PREVIOUSLY BEEN PAID TO ME OR ON MY BEHALF.

SIGNATURE: 

DATE: Jan 18, 2016

TOTAL CLAIM: 202.40

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: Sam Wheale

MONTH ENDED: January

APPROVED BY:

DATE	DETAILS	TIME	Payroll							KM'S	Accounts Payable				HOTEL	OTHER		
			COUNCIL 02-11-00-151	ADMIN 02-11-00-152	CONVENT. 02-11-00-154	ASB 02-62-00-151	WOODLOT 02-6 3-08-151	MPC 02-66-01-151	DAB 02-66-02-151		OTHER 02-11-00-153	B	L	D			\$ AMT	
<u>Jan 18</u>	<u>ASB</u>	<u>1/2 day</u>				<u>170</u>					<u>70</u>							
	Communication Allowance/month																	<u>75.00</u>
	Preparation/Rate Payers Concerns x 2 days/month																	
<b>TOTAL</b>																		

ENTERED

70 kms x  $.40 =$  28.00

TOTAL A/P 204.80

TOTAL HONORARIA

I HEREBY CERTIFY THAT THE WHOLE OF THE EXPENDITURE WAS INCURRED ON MD BUSINESS, THAT EACH ITEM GIVEN IS CORRECT, AND THAT AMOUNTS CLAIMED HAVE NOT PREVIOUSLY BEEN PAID TO ME OR ON MY BEHALF.

SIGNATURE:

DATE: Jan 18/17

TOTAL CLAIM: