



Month Ended September 30, 2015
 Name Bart Guyon

Council - Honoraria/Expense - Claim Form



Approved by: 
 Approved by: 


Date	Details	Time	Honoraria	Mileage (km's)	Other Expenses		MEALS			
					Hotel	Other	B	L	D	\$ Amt
sept 1	council	Over 8 Hrs.	\$480	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
sept 3	quarter report	1/2 Day	\$207	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
sept 11	solar presentation devon	Full Day	\$340	240			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
sept 15	council	Over 8 Hrs.	\$480	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
sept 17	mayors gala	n/a		55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
sept 18	Rocky Rapids water treatment opening	1/2 Day	\$207	45			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
sept 20	WCAS AND MEETINGS WITH MARCO	Full Day	\$340	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SEPT 28	MANAGEMENT MEETING PRE AND POST JOINT COUNCIL	Full Day	\$340	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Resident Concerns		\$1,360.00							
	Reeve Pay		\$360.00							
	Communication Allowance (Other)						\$250.00			
TOTALS			\$4,114.00	615			\$250.00			

IF AMOUNTS DO NOT CALCULATE
PRESS F9

Notes

(Empty box for notes)

Total Honoraria	\$4,114.00
Total Expenses	\$250.00
Total Mileage	\$301.35
TOTAL CLAIM AMT:	\$4,665.35

Date: Oct 6 2015
 Signature: 

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.