



Month Ended June 30, 2016  
 Elected Official Bart Guyon

Honoraria/Expense - Claim Form

Approved by:   
 Approved by: 

Date	Details	Time	Honoraria	Mileage Km's	Other Expenses		MEALS			
					Hotel	Other	B	L	D	\$ Amt
	Mileage carried over from previous month			6435						
June 2nd	FCM TRAVEL TO EDMONTON , WINNIPEG, TRADES SHOW PARTICIPATION	Conference	\$410	320			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE 3RD	FCM	Conference	\$410				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE4TH	FCM	Conference	\$410				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNESTH	FCM	Conference	\$410				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE6	FCM	Full Day	\$340				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE7	COUNCIL	Full Day	\$340				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE9	WCAS IN LEDUC	Full Day	\$340	300			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE10	SPEEKING TO GRADS FMHS	1/2 Day	\$207	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE 20	QUARTERLY UPDATE WITH STAFF AND MTG WITH BRETON	1/2 Day	\$207	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE21	COUNCIL	Over 8 Hrs.	\$480	55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE22	MAYORS AND REEVES MEETING	Full Day	\$340	950			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE23	MAYORS AND REEVES MEETING	Full Day	\$340				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE28	SPEEKING TO GRADS IN BRETON	1/2 Day	\$207	160			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JUNE29	KARENS RETIREMENT	n/a		55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Communication Allowance		\$250.00	1950			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Resident Concerns		\$1,360.00				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Reeve Pay		360				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			\$6,161.00				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>ATTACH ALL ORIGINAL RECIEPTS</b>										
					<b>Notes</b>	<b>YTD Mileage</b>	<b>8385</b>			
							<b>Total Honoraria</b>		<b>\$6,161.00</b>	
							<b>Total Expenses</b>		<b>\$250.00</b>	
							<b>Total Mileage</b>		<b>\$936.00</b>	
							<b>TOTAL CLAIM AMT:</b>		<b>\$7,347.00</b>	

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. Prices are in accordance with County Policy.

Date: July 13th  
 Signature: 