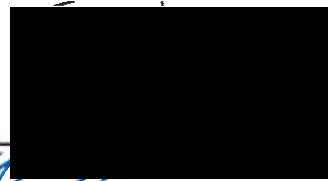


ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM



NAME: ANTHONY HEINRICH

MONTH ENDED: SEPT 30/16 APPROVED BY:

DATE	DETAILS	TIME	COUNCIL	ADMIN	CONVENT.	ASB	LARB/CARB	MPC	DAB	OTHER	KMS	MEALS				HOTEL	OTHER
												B	L	D	\$ AMT		
SEPT 6	Council	1	271								90						
" 7	AGM at County	1/2	170								90						
" 8	AGM at Buck Creek	1/2	170								74						
" 12	EPBR	1/2								170	81						
" 20	Council	1	271								90						
" 21	ASB	1/2				170					90						
" 22	MPC	1/2						170			90						
" 22	Pembin Area Synergy	1/2								170	-						
" 26	Strategy Mtg	1/2		170							90						
" 26	joint mtg with DU	1/2	170								-						
" 27	Recreation Strategy	1		170							90						
	Deputy Reeve		155														
	Communication Allowance/month																200 75.00
	Preparation/Rate Payers Concerns x 2 days/month		1084														
TOTAL			3156 340			170		170		340	785						

2291
~~3156~~ 3311.00
 785 kms x .48 = 376.80
 TOTAL EXPENSES 576.80

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: Oct 1/16

TOTAL CLAIM: 3887.80