

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: WES TWEEDLE

MONTH ENDED: JUNE 15/11

APPROVED BY: 

DATE	DETAILS	TIME	COUNCIL	ADMIN	CONVENT.	Payroll					KM'S	MEALS				HOTEL	OTHER
						ASB	LARB/ CARB	MPC	DAB	OTHER		B	L	D	\$ AMT		
MAY 16	ECON. DEV. D.V.	1									274	70					
17	COUNTY A.G.M R.R.	1/2									167	80					
27	WEST CENTRAL AIRSHED	1									274	70					
30	4.H. BEEF SHOW + SALE	NC										70					
31	REG. COUNCIL	1	274									70					
JUNE 2	ELKS REGIONAL CONF.	NC										70					
7	MUSEUM REGIONAL MEETING	NC										70					
10	C.A.D. EVALUATION *																
	SEVERE WEATHER PRESENTAT <sup>ION</sup>	1		274								70					
13	JOINT RETREAT WITH D.V.	1									274	70					
14	JOINT COUNCIL MEETING D.V.	1	274									70					
	REEVES PAY.			260													
	Communication Allowance/month	2		548													175.00
	Preparation/Rate Payers Concerns x 2 days/month																
TOTAL		8 1/2	548	1082							989	710					175

710 kms x .50 = 355.00

2619.00

TOTAL EXPENSES 530.00

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: JUNE 15/11

TOTAL CLAIM: 3149.00