

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: ROBERT L. KITCHING

MONTH ENDED: MARCH 15/11

APPROVED BY:

DATE	DETAILS	TIME	Payroll								Accounts Payable							
			COUNCIL	ADMIN	CONVENT.	ASB	WOODLOT	MPC	DAB	OTHER	KM'S	MEALS				HOTEL	OTHER	
			02-11-00-151	02-11-00-152	02-11-00-154	02-62-00-151	02-6-3-08-151	02-66-01-151	02-66-02-151	02-11-00-153		B	L	D	\$ AMT			
Feb 16	NSWA BOD MTG EDM	8										218	320					
24	COUNCIL MTG	8	218*										53					
25	MTG MP ROB MERRIFIELD	3										137	53					
28	LGST COMM MTG	NC											-					
March 2	TRAIL NET SEM/OH - EDISON <sup>(ECDEX)</sup>	4										137*	240					
7	MTG WRSDIV	3										137	53					
8	COUNCIL MTG	8	218*										53					
9	MTG TDV ON GREEN ENERGY	3										137	53					
10	GREEN ENERGY CONF - DV <sup>(ECDEX)</sup>	7										218*	53					
11	Jr MTG TDV COUNCIL	7 1/2		218*									53					
15	APEA FORUM NISKU	8			218*								87					
15	MTG TDV + RAPP REP	3										137	27					
	Communication Allowance/month																	175.00 ✓
	Preparation/Rate Payers Concerns x 2 days/month	10		435*														
TOTAL			436	654	218							1121	1045					175.

#2429.<sup>00</sup> 1045<sup>50</sup> kms x .75 = 522.50  
 TOTAL A/P 697.50

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: March 16/11

TOTAL CLAIM: 3126.50