

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: ANTHONY HEINRICH MONTH ENDED: MAR 18/09 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	Worburg Seed Plant Mtg	1/2									135	26					
" 18	ASB	1/2				135						81					
" 24	Council	1	215									81					
MAR 4	PSAMS Mtg	1/2								135		81					
" 11	Mtg with 3 Soil Co Council	1/2	135									81					
" 16	Fish Risk Analysis Mtg	1/2	135									81					
" 5	Council Special Mtg	1/2	135									81					
" 17	Council	1 1/2	340									81					
" 18	ASB	1/2				135						81					
	Communication Allowance/month																75.00
	Preparation/Rate Payers Concerns x 2 days/month		430									81					
TOTAL			960	430		270					270	674					

TOTAL HONORARIA 1930 TOTAL A/P 412  
 674 kms x .45 = 337  
 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: Mar 22/09 TOTAL CLAIM: 2342.00