

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: ANTHONY HEINRICH MONTH ENDED: NOV 15/10 APPROVED BY: \_\_\_\_\_

DATE	DETAILS	TIME	COUNCIL	ADMIN	CONVENT.	Payroll					KM'S	MEALS				HOTEL	OTHER
						ASB	LARB/CARB	MPC	DAB	OTHER		B	L	D	\$ AMT		
Oct 20	ASB	1/2				135					81						
" 25	Attend Cuff Orientation at Yellowhead			215							-						
" 26	Organizational Mtg	1/2	135	135							81						
Nov 2	Council	1	215								81						
Nov 5	Strategic Planning Session	1	215	215							142						
" 8	PSAMS	1/2									81						
" 10	Annunciation Mtg	1	215								81						
	Communication Allowance/month															75.00	
	Preparation/Rate Payers Concerns x 2 days/month			430													
TOTAL			430	1995		135				135	547						

HDNE (02-11-00-217) 71.43 + 3.57 GST  
 ASB MILEAGE (02-62-00-212) 38.10 + 1.90 GST  
 COUNCIL MILEAGE (02-11-00-212) 222.39 + 11.11 GST  
 TOTAL HONORARIA 1695

**\$1695**

547  
 627  
 275.50  
 313.50  
 348.50  
 TOTAL EXPENSES 388.50

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: Nov 18/10

TOTAL CLAIM: 2083.50