ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: Dawn Konelsky MONTH ENDED: June 15/08 (A) APPROVED BY: [redacted]

DATE	DETAILS	TIME	Payroll: COUNCIL 02-11-00-151	ADMIN 02-11-00-152	CONVENT. 02-11-00-154	ASB 02-62-00-151	WOODLOT 02-6 3-08-151	MPC 02-66-01-151	DAB 02-66-02-151	OTHER 02-11-00-153	Accounts Payable: KM'S	MEALS B	L	D	$ AMT	HOTEL	OTHER
MAY 20	Council Mtg		210								10						
MAY 21	FIRE DEPT MTG									130	10						
MAY 27	FLIGHT RETURN FCM														27.40 1.37	448.00 + 86.59	GST 26.66 561.18
MAY 29	FCM TRAVEL DAY				330.							✓		✓	28.77	171.09 + 8.55 154.64	TAXI 25.-
MAY 30	FCM				330.									✓	21.68 + 1.01 25.69	+3.00 tip	TAXI 17.70
MAY 30	FCM - SPOUSAL REGISTRATION																NO GST 225.-
MAY 31	FCM				330.							✓	✓	✓	30.04 1.60 31.54		TAXI 19.05 20.- .95
June 1	FCM				330.							✓			10.75 + .54 11.29		TAXI 38.10 40.- 1.90
June 2	FCM				330.									✓	18.22 + .91 19.13		
June 3	FCM (Westjet SOLD OUT NO RETURN FLIGHTS)				330.							✓	✓	✓	52.35 + 2.62 54.97		
June 4	FCM - TRAVEL DAY				330.							✓	✓	✓	68.96 3.45 72.41		TAXI 38.10 40.- 1.90
June 4	FCM HOTEL & DINNERS FOR 31, 2, & 3															1524.84 + 76.31 1755.97	GST 152.80
June 4	FCM - RETURN MILAGE & MISC PER DIEM										261						66.67 70.-
	Communication Allowance/month																3.33 75.00
	Preparation/Rate Payers Concerns x 2 days/month																
TOTAL	02-11-00-217 - 71.43 + 3.57 2 2 02-11-00-211 - 2552.13 + 133.84 + 24 3.34		210		2310					130	281				243.80 224.67	1910.61	1073.88
	02-11-00-212 - 291 Km @ 50¢ 138.57 + 6.93 02-11-00-214 - 225.00 02-66-01-212 - 10 Km @ 50 = 4.76 + .24		+ 330 540	+420 420	~~420~~ ~~2730~~				+210 210	130	301 281				kms x .50 =		150.50 140.50
TOTAL HONORARIA					2650.					-960	3610	TOTAL A/P			3349.66		3378.79

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: [redacted] DATE: June 15/08 TOTAL CLAIM: 5999.66

BK PDT REF# R2401

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: DAWN Konelsky MONTH ENDED: June 15/08 (B) APPROVED BY:

DATE	DETAILS	TIME	Payroll COUNCIL 02-11-00-151	ADMIN 02-11-00-152	CONVENT. 02-11-00-154	ASB 02-62-00-151	WOODLOT 02-6 3-08-151	MPC 02-66-01-151	DAB 02-66-02-151	OTHER 02-11-00-153	KM'S	Accounts Payable MEALS B	L	D	$ AMT	HOTEL	OTHER
June 5	MPC							210			10						
June 10	Council mtg		330								10						
	Communication Allowance/month																75.00
	Preparation/Rate Payers Concerns x 2 days/month			420													
TOTAL			330	420				210			20						

20 kms x .50= 10.-

TOTAL HONORARIA 960

TOTAL A/P 10.-

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: [redacted] DATE: June 15/08 TOTAL CLAIM: 970.-