

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: WES TWEEDLE

MONTH ENDED: JAN 15/2010

APPROVED BY:

DATE	DETAILS	TIME	Payroll							KM'S	Accounts Payable				HOTEL	OTHER		
			COUNCIL	ADMIN	CONVENT.	ASB	WOODLOT	MPC	DAB		OTHER	MEALS						
			02-11-00-151	02-11-00-152	02-11-00-154	02-02-00-151	02-6-3-08-151	02-66-01-151	02-66-02-151		02-11-00-151	B	L	D			\$ AMT	
JAN 12	REGULAR COUNCIL	1	270									70						
13	G.A.E.R. JASPER	1/2										165		✓		16.48		
14	" "	1 1/2										380		✓		16.70		
15	" "	1										270	660	✓		16.70	197.57	
	REEVES PAY			130														
	Communication Allowance/month																	37.50
	Preparation/Rate Payers Concerns x 2 days/month	1		270														75.00
TOTAL			270	400								815	730			33.18	197.57	37.50

MILECO 730 Kms
GST 730 Kms
MEALCO 15.79 + 0.69
MEALCO 16.00 + 0.70

MEALCO \$ 188.58 + 8.99
PHONE \$ 35.71 + 1.79

1485.00

1487.50

730 kms x $\frac{50}{45}$ = 365.00

TOTAL A/P 633.25

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: JAN 18/2010

TOTAL CLAIM: 2120.75

2118.25