

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: WES TWEEDLE

MONTH ENDED: OCT 15/2010

APPROVED BY: 

DATE	DETAILS	TIME	COUNCIL	ADMIN	CONVENT.	ASB	LARB/ CARB	MPC	DAB	OTHER	KM'S	MEALS				HOTEL	OTHER	
												B	L	D	\$ AMT			
SEPT 17	GAER EDSON	1 1/2									380	320					118.81	
21	REGULAR COUNCIL	1 1/2	380									70						
22	TOWN COUNCIL (ANNEXATION)	1/2									165	70						
23	MAYORS GALA	NC																
27	MEET WITH CORVUS (FIRE)	1/2		165								70						
28	RCMP CONFERENCE	1/2		165								70						
29	COUNCIL LUNCH WITH M.L.A.	1/2		165								70						
OCT 9	COOMA'S BIRTHDAY	NC																
12	REGULAR COUNCIL	1	270									70						
15	TWP RD 494 SITE MEETING	1/2		165														
4	AA MDYC ZONE	1									270	235						
	REEVES PAY			260														
	Communication Allowance/month																	75.00
	Preparation/Rate Payers Concerns x 2 days/month	2		540														
TOTAL		9 1/2	650	1460							545	975						193.81
											815							

975 kms x .50= 487.50

\$ 2925.00

TOTAL EXPENSES \$ 681.31

TOTAL HONORARIA

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: OCT 18/2010

TOTAL CLAIM: \$ 3606.31