

ELECTED OFFICIALS/BOARD - HONORARIA/EXPENSE - CLAIM FORM

NAME: ANTHONY HEINRICH

MONTH ENDED: MAR 31/20

APPROVED BY: 

DATE	DETAILS	TIME	CONVENT.	ASB	MPC	SDAB	OTHER	KM'S	MEALS				HOTEL	OTHER
									B	L	D	\$ AMT		
MAR 2	ASB Town Comm. Mtg	1/2		195				90						
" 3	Council	1		296				90						
" 4	MPC	1/2			195			90						
" 9	mtg with ratepayers	M/C						-						
" 17	Council update on Covid-19 ^{by} phone	1/2		195				-						
" 19	" " " " " " " "	1/2		195				-						
" 20	Webinar/Brownlee	1/2		195				-						
" 27	" 1 alto Council	1/2		195				-						
" 23	Council mtg.	1/2		195				-						
	Prep. + Ratepayer Allowance			1595										communicator 200
TOTAL				2671	195	195		270						200

270 kms x .54 = 129.60

TOTAL HONORARIA

3061

TOTAL EXPENSES

329.60

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: Mar 31/20

TOTAL CLAIM: 3390.60