Council Monthly Meeting Claim Form

To be submitted at the monthly Council Meeting. Expenses received after the Council meeting will be included in the next months expenses.
This form is to be completed for **all** meetings **attended** at the representative of the Village of Longview

NAME LEN KIRK
(Please Print)

MONTH ~~July~~ AUG. ~~Dec.~~ NOV 2018

Date (MM/DD)	Meeting/Other	Purpose	Location or Misc. Costs	kms @ .55	# of Hrs. @ meeting	Meeting Fees	Declined Pay to attend	Per Diem 1/3 Day up to 2 hours $45	Per Diem 1/2 Day up to 4 hours $90	Per Diem Full Day $150	Totals
AUG. 14	SPECIAL MEETING				4.30-5:30	45					45.00
SEPT. 5	C.O.W.				2	45					45.00
SEPT. 18	COUNCIL				3	90					90.00
OCT. 4	C.O.W					90					90.00
OCT. 16	COUNCIL					90					90.00
OCT.	INTERMUNICIPAL DINNER		HIGH RIDGE	78	~~7.5~~	45					~~87.12~~
NOV. 7	C.O.W.				2.5	90					90.00
NOV 19	SPECIAL				3.5	90					90.00
NOV 20	COUNCIL				2.5	90					90.00
TOTALS				42.12		675					~~717.12~~ 717.12

Date Submitted

Len Kirk
Signature

ENTERED DEC 31 2018
ADMIN
COUNCIL

PLEASE NOTE: The above hours do not reflect the preparation time (reading and investigation) which is required to perform Council duties.

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NAME LEN KIRK (Please Print)

MONTH DECEMBER 2018

ate (MM/DD)	Meeting/Other	Purpose	Location or Misc. Costs	kms @ .53$	# of Hrs. @ meeting	Meeting Fees	Declined Pay to attend	Per Diem 1/3 Day up to 2 hours $45	Per Diem 1/2 Day up to 4 hours $90	Per Diem Full Day $150	Totals 717.12 ~~716.34~~
DEC. 5	C.O.W				2.5	90					90.00
DEC. 10	BY LAW				6:00 6:30	90					
DEC. 18	COUNCIL										90.00
TOTALS											~~716.34~~ 897.12

Date Submitted

Signature

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