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 LENARD KIRK (Please Print)

MONTH NOVEMBER 2020

Date (MM/DD)	Meeting/Other	Purpose	Location or Misc. Costs	kms @ ~~.515~~ .58	# 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
11/04	C.O.W				6:30-7.18	45					45
11/17	Council				6:30-10.04	90					90
TOTALS						135					135 XX OO

11/24/20
Date Submitted

Lenard Kirk
Signature

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 LENARD KIRK (Please Print)

MONTH DECEMBER 2020

Date (MM/DD) ~~12-09-20~~	Meeting/Other	Purpose	Location or Misc. Costs	kms @ ~~.545~~ .58	# 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
12-09	C.O.W				2.5				90		90
12-15	COUNCIL				3.25				90		90
TOTALS											180 XX

~~JEN~~ LK 14/21
Date Submitted

Lenard Kirk
Signature

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