


**TOWN OF FORT FRANCES - SCHEDULE "C"  
TRAVEL ADVANCE REQUEST**

Name	Purpose of Travel
Location of Event <i>Business</i>	Dates
Signature of Division Manager	
Amount of Travel Advance	
Treasurer Signature	G.L. Code

Agenda Must be Attached to Process Payment of Advance  
Please include completed Travel expense statement (schedule B) so as to properly account for the HST

**TOWN OF FORT FRANCES - SCHEDULE "D"  
ENTERTAINMENT EXPENSE REIMBURSEMENT FORM**

Name <i>Mayor Roy Avis</i>	Date <i>November 7, 2016</i>
Names, Position, and Organization of Individuals Being Entertained <i>Mayor Avis</i>	
1. <i>Honourable Bill Mauro, Minister of Municipal Affairs</i>	
2. <i>Doug Brown, CAO</i>	
3. <i>Tannis Drysdale, Consultant, RRFDC</i>	
4. <i>Sharla Knapton, Ministry of Municipal Affairs</i>	
Purpose of Entertainment <i>Meeting with Honourable Minister Mauro to discuss various issues.</i>	
Amount Claimed <i>\$57.95</i>	
Treasurer Signature	Date <i>Nov. 7, 2016</i>

An itemized receipt must be attached to process payment

COPPER RIVER INN AND C  
700 STEWART ST  
FORT FRANCES, ON P9A 2Y

Merchant ID: 000000003652685  
Term ID: 07577665  
11404980013

### Purchase

VISA CREDIT

XXXXXXXXXXXX8498

AID: A0000000031010

Entry Method: Chip

Batch#: 000388

11/07/16

09:38:23

Ref#:000042086479

Inv #: 003577 Appr Code: 017383

Amount: \$ 50.39

Tip: \$ 7.56

Total: \$ 57.95

Customer Copy

### Bistro North

700 Stewart St.  
Fort Frances, ON P9A 2Y2  
807-274-1161

2008 BRENDA G

Tbl T13/1 Chk 8415 Gst 5  
Nov07'16 07:46AM

1 JUICE	2.99
4 COFFEE @ 2.15	8.60
2 Yogurt Parfait @ 8.00	16.00
1 Toast	4.00
1 Oatmeal	13.00

Subtotal	44.59
Tax	5.80
Amount Due	50.39

Thanks for Dining With Us!

Tip: \_\_\_\_\_ Total: \_\_\_\_\_

Room: \_\_\_\_\_

Name (Print): \_\_\_\_\_

Sign: \_\_\_\_\_