

**TOWN OF FORT FRANCES - SCHEDULE "B"
TRAVEL EXPENSE STATEMENT**

1.	Attendee	<i>Ken Perry</i>						
2.	Conference/Seminar Attended	<i>RBC</i>						
	Location (Facility and City)	<i>EMO LBGION</i>						
	Dates	<i>June 3/15</i>						

3.		Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Total
	Accommodation								
	Transportation				27.26				
	Breakfast								
	Lunch								
	Dinner								
	Per Diem				75.00				
	Other								

4. Prepaid Expenses	Registration	Air Travel	Other	Total

5. Town Used Vehicle	Yes	No	Reason	Total
Mileage Claimed	<i>58</i>	<i>58</i>	<i>KM x \$0.47 = 27.26</i>	

6.	Approved	Total Expenses	102.26
		Advance Received	
		Balance Claimed	102.26
		Balance Refunded	

Transfered to Sch. 'F'

27.26 km

27.26 km

The agenda must be attached to process payment

In claiming the above amounts, I certify that the expenses have been incurred on behalf of the Town, that the means of transportation were the most economical, with due regard to convenience, and that the expenditures were made in the exercise of my duties. NB – a valid and detailed receipt must accompany hotel Visa slips.

Date *June 8/15*

Ken Perry
Employee Signature

Date _____

Supervisor Signature

Date _____

Division Manager Signature

Date	Treasurer	A / P	Cashier

TOWN OF FORT FRANCES - SCHEDULE "F"
TRAVEL STATEMENT – MAYOR / COUNCIL HONORARIUM

Attendee	Ken Perry
Conference / Seminar Attended	Regional Economic Development Committee (REDC) Meeting
Location	Emo Legion
Dates	June 3, 2015

Details of Per Diem

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
Date			June 3/15					
Amount			75.00					\$75.00

Name (Please Print)	Signature
Approved	Date

To be submitted to Payroll for processing when approved by Council