

17/17

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

1.	Attendee	Roy Avis							
2.	Conference/Seminar Attended	MEETING WITH M.P.A.C.							
	Location (Facility and City)	THUNDER BAY ONT.							
	Dates	WEDNESDAY JANUARY 25 2017							
3.		Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Total
	Accommodation								
	Transportation				109.19				109.19
	Breakfast								
	Lunch								
	Dinner								
	Per Diem								
	Other								
4.	Prepaid Expenses	Registration		Air Travel		Other		Total	
5.	Town Used Vehicle	Yes	No	Reason					Total
	Mileage Claimed	KM x \$0.47 =							
6.	Approved				Total Expenses				109.19
					Advance Received				
					Balance Claimed				
					Balance Refunded				

**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.

JANUARY 27 2017  
 Date

  
 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	<i>Roy Avis</i>
Conference / Seminar Attended	<i>M.P.A.C. MEETING</i>
Location	<i>THUNDER Bay Ont.</i>
Dates	<i>JANUARY 25 2017</i>

**Details of Per Diem**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
Date			<i>Jan 25/17</i>					
Amount			<i>160.00</i>					<i>\$160.00</i>

Name (Please Print)	Signature
<i>Roy Avis</i>	<i>[Signature]</i>
Approved	Date
	<i>JANUARY 27 2017</i>

To be submitted to Payroll for processing when approved by Council

Safeway  
417 Scott Street  
Fort Frances, ON  
P9A1H3

STORE NO: 4809  
GST/HST: 831536503

Inv#: 9022956  
Trans: Pre-Auth  
Completion  
\*\*\*\*\*8498

\*\*/\*\*

PROXIMITY

VISA  
AID: A0000000031010  
Seq#: 529001001005  
Terminal ID: S4809C08  
Auth No: 039620  
ACI/ISO: 001/00  
Date: 26/01/2017  
Time: 3:31:33 PM  
APPROVED  
Pump #: 8-Regular  
Vol: 50.140 L  
Price/L: \$1.069  
Total: \$53.60

Includes:  
T(13%): \$6.17

33.60  
11.59

10919

WEST ARTHUR ESSO  
645 ARTHUR ST. W.  
THUNDER BAY, ON P7E 5R6

00303214

VRN:R120985767

01/25/2017 2:56:58 PM

Register: 1 Trans #: 9379 Op ID: 6455  
Your cashier: Alex

REGLR CA PUMP# 4  
48.804 L @ \$ 1.139/L \$55.59 101  
HST Incl In Fuel \$6.40

Subtotal = \$55.59

Total = \$55.59

Change Due = \$0.00

Credit \$55.59

TYPE: PURCHASE  
ACCOUNT: VISA \$55.59  
AUTH: 087033-F INVOICE: PAD02913  
CARD NUMBER: C \*\*\*\* \* 8498  
A- VISA CREDIT  
B- A0000000031010

01 Approved - Thank You 027

LOYALTY: NO

IMPORTANT - retain this copy for your  
records

Customer Copy

Thank You