

TO: Mayor Avis & Members of Council
FROM: Laurie Witherspoon, Treasurer
DATE: September 6, 2016
SUBJECT: Mayor Roy Avis – AMO Conference Travel & Per Diem Claims

BACKGROUND

Attached is a copy of the Travel Statement – Mayor/Council Honorarium per diem in the amount of \$675.00 and Schedule “B” Travel Expenses of \$1,302.72 to attend the AMO Conference held in Windsor, Ontario from August 13 - 17, 2016 as submitted by Mayor Roy Avis.

Conference Expenses

1. Meals	\$315.00
2. Ground Transportation	338.40
3. Airfare (In-Lieu)	490.00
4. Hotel Accommodations	159.32
5. Per Diem (4 ½ days)	<u>675.00</u>
Total Per Diem & Travel Claims	<u>\$1,977.72</u>

The registration fee of \$791.00 and hotel accommodations of \$610.20 were paid by the Town resulting in the total cost of \$3,378.92 to attend the AMO Conference as authorised by Council.

The travel expenses and per diem claim is in compliance with Town of Fort Frances Travel Policy Number 3.11 and By-Law 02/10-B Schedule ‘A’.

RECOMMENDATION

The Administration & Finance Executive Committee recommends approval of the Travel Statement – Mayor/Council Honorarium per diem and Travel Expense claim in the total amount of \$1,977.72 as submitted by Mayor Roy Avis for his attendance at the AMO Conference held in Windsor, Ontario.

Council Approval of this Report Will Agree to the Administration & Finance Executive Committee recommendation to approve the Travel Statement – Mayor/Council Honorarium per diem and Travel Expense claim in the total amount of \$1,977.72 as submitted by Mayor Roy Avis for his attendance at the AMO Conference held in Windsor, Ontario from August 13 - 17, 2016.

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

1.	Attendee	<i>Roy Avis</i>							
2.	Conference/Seminar Attended	<i>AMO CONFERENCE</i>							
	Location (Facility and City)	<i>WINDSOR ONTARIO</i>							
	Dates	<i>AUGUST 13, 14, 15, 16, 17</i>							
3.		<i>14th</i> Sun.	<i>15th</i> Mon.	<i>16th</i> Tues.	<i>17th</i> Wed.	<i>18th</i> Thurs.	<i>19th</i> Fri.	<i>20th</i> Sat.	Total
	Accommodation							<i>159.32</i>	<i>159.32</i>
	Transportation								
	Breakfast	<i>15.00</i>	<i>15.00</i>	<i>15.00</i>	<i>15.00</i>				<i>60.00</i>
	Lunch	<i>20.00</i>	<i>20.00</i>		<i>20.00</i>				<i>60.00</i>
	Dinner	<i>40.00</i>	<i>40.00</i>	<i>40.00</i>	<i>35.00</i>			<i>40.00</i>	<i>195.00</i>
	Per Diem								
	Other	<i>AIRFARE (IN LIEU OF)</i>							<i>490.00</i>
4.	Prepaid Expenses	Registration		Air Travel		Other		Total	
5.	Town Used Vehicle	Yes	<input checked="" type="radio"/> No	Reason <i>BEING USED</i>					Total
	Mileage Claimed	<i>720 KM</i> x \$0.47 =			<i>TO THUNDER BAY</i>				<i>338.40</i>
6.	Approved						<i>1302.72</i>	<i>1143.40</i>	

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.

August 22 2016
Date

[Signature]
Employee Signature

Date

Supervisor Signature

Date

Division Manager Signature

Date	Treasurer	A / P	Cashier



P.O. BOX 351 W399 US 2 & 41 • Harris, Michigan 49845
(906) 466-2941

Avis, Roy

FOLIO NO.: 12I8JL
ROOM NO.: H3324 CLERK: AS
ARRIVE: 08/13/16
DEPART: 08/14/16
RATE/PACKAGE: 112.75
RATE/PACKAGE DESCRIPTION: HRRD
NO. IN PARTY: 2
DEPOSIT REC'D: 122.56

DATE	DESCRIPTION	CHARGES	PAYMENTS
08/13/16 PVI	1 XXXX7084 AS		122.56
	Subtotals	\$ 0.00	122.56
			122.56

YCHANGE RATE : 1.3258

CND - \$159.32

I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any or the full amount of these charges.

THANK YOU! WE HOPE YOU ENJOYED YOUR STAY!

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

Attendee	ROY AUK
Conference / Seminar Attended	AMO CONFERENCE
Location	WINDSOR ONTARIO
Dates	AUGUST 13, 14, 15, 16, 17

Details of Per Diem

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
Date	AUG 15	AUG 16	AUG 17			AUGUST 13	AUG 14	
Amount	150.00	150.00	150.00			75.00	150.00	675.00

Name (Please Print)	Signature
ROY AUK	
Approved	Date
	AUGUST 22 2016



To be submitted to Payroll for processing when approved by Council

TOWN OF FORT FRANCES - SCHEDULE "E"
TRAVEL WAIVER OF LIABILITY FORM

The Town of Fort Frances carries "Non-Owned Automobile" coverage for liability only. This coverage is for the situation where a liability claim exceeds the vehicle owner's liability insurance and does not include coverage for damages to the individual's vehicle.

Therefore, the undersigned acknowledges that:

- They have read and understood the above particularly with regards to insurance.
- The Town and its insurers will not be responsible for any damages, claims, deductibles or expenses (other than mileage or fuel costs as provided for in the Travel Policy) resulting from the use of one's own vehicle other than that provided for by the Non-Owned Automobile coverage.
- The Town will not be responsible for any additional insurance cost resulting from any claim(s) submitted to an individual's insurers.

Name (Please Print) 	Signature 
Approved	Date August 13, 2016