

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

1.	Attendee	June Caul							
2.	Conference/Seminar Attended	NOMA Annual General Meeting + Conference							
	Location (Facility and City)	Victoria Inn, Thunder Bay, ON							
	Dates	April 22, 23, 24, 2015							
3.		Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Total
	Accommodation								
	Transportation								
	Breakfast								
	Lunch								
	Dinner								
	Per Diem								
	Other								
4.	Prepaid Expenses	Registration		Air Travel		Other		Total	
5.	Town Used Vehicle	Yes	No <input checked="" type="checkbox"/>	Reason	Already Taken				Total
	Mileage Claimed	KM x \$0.47 =							
		2 Gas Invoices			*30.01 + 38.01				68.02
6.	Approved				Total Expenses				
					Advance Received				
					Balance Claimed				68.02
					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.

May 11, 2015  
Date

June Caul  
Employee Signature

Date

Supervisor Signature

Date

Division Manager Signature

Date	Treasurer	A / P	Cashier

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

00303214

VRN:R120985767

04/24/2015 2:19:29 PM

Register: 1 Trans #: 2435 Op ID: 6456

Your cashier: Meghan

REGLR CA PUMP# 4  
35.560 L @ \$ 1.069/L \$38.01 101  
HST Incl In Fuel \$4.37

Subtotal = \$38.01

Total = \$38.01

Change Due = \$0.00

Interac \$38.01

TYPE: PURCHASE  
ACCOUNT: INTERAC CHEQUING \$38.01  
AUTH: 152310-F INVOICE: PAD06755  
CARD NUMBER: C \*\*\*\*\*6087  
DATE/TIME: 2015/04/24 14:19:47  
REFERENCE: 61024888-001-220-055-0 C  
OO APPROVED - THANK YOU 001  
A- Interac  
B- A0000002771010  
LOYALTY: NO

Customer Copy

Thank You

04/20/15 12:34:11  
REG# 0001 CSH# 003 DR# 01 TRANS 11185  
THANKS, COME AGAIN  
CASH \$ 30.01  
TOTAL 30.01  
Tax 00.00  
Sub Total 30.01  
@ 2.249/6 13.3426 UNLD CA #03  
amount qty Descr.

FORESTLAND SALES  
AND SERVICE  
WELCOME  
FORE000101



# VICTORIA INN

Victoria Inn Thunder Bay  
555 W. Arthur St  
Thunder Bay, ON  
P7E 5R5

Telephone: 807-577-8481 Fax: 807-475-8961

June Caul  
320 Portage Ave  
Fort Frances, On

P9A 3P9

Page # 1  
Res. # 436614  
Checked in Wed Apr 22/15 - 3:38pm  
Checked out Fri Apr 24/15 - 10:49am  
Nights 2  
Room Rate 115.99  
Room 152

Group: Noma\*

Date	Description	Reference	Charges	Credits
Apr22	PAID BY VISA - Th auth #048272	*****8250		262.14
Apr22	Room - Best Available Rate		115.99	
Apr22	HST		15.08	
Apr23	Room - Best Available Rate		115.99	
Apr23	HST		15.08	
			0.00	
			262.14	262.14

N.O.M.A.  
Attn: Kristen Oliver  
P.O. Box 10308  
Thunder Bay, On. (NOMA01)  
P7B 6T8

Thank you for staying with us, Please visit our sister hotels  
Located in Brandon, Winnipeg, Flin Flon & Owen Sound  
Call 1-877-VIC-INNS or reserve online at WWW.VICINN.COM

Our H.S.T. # is 835058603

Charge Summary:  
HST

30.16



**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) <i>June Caul</i>	Signature <i>June Caul</i>
Approved	Date

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

Attendee	June Caul
Conference / Seminar Attended	NOMA Annual General Meeting + Conference
Location	Thunder Bay, ON (Victoria Inn)
Dates	April 22, 23, 24, 2015

**Details of Per Diem**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total
Date			Apr. 22/15	Apr. 23/15	Apr. 24/15			3
Amount			\$ 150.00	150.00	150.00			\$ 450.00

Name (Please Print)	Signature
June Caul	June Caul
Approved	Date
	May 11, 2015

To be submitted to Payroll for processing when approved by Council