928490

HONORARIA/EXPENSE CLAIM

Claimant's Name: Rubi Shirley **Position:** Trustee **Claim No.** #03112020

Address: **Date:** Mar 11, 2020

Date	Depart From	Depart Time	Arrival to	Arrival Time	Details	Total Hours	Total Kms	Meals B	Meals L	Meals D	Other Expenses Lodging	Other Expenses Other (need receipts)	Honoraria
Feb 29 2020	Fort Chipewyan, AB	7:00 AM	Edmonton, AB	5:00 PM	Travel to Edmonton for Rural Conference	10	719	1	1	1			$ 281.25
Mar 1 2020		5:00 PM		10:00 PM	Rural Conference	5			1	1			$ 225.00
Mar 2,2020		7:45 AM		4:15 PM	Rural Conference	8.5				1			$ 281.25
Mar 3,2020		7:45 AM		1:00 PM	Rural Conference	5.25				1			$ 225.00
Mar 7,2020	Edmonton, AB	7:00 AM	Fort Chipewyan, AB	5:00 PM	Travel to Fort Chipewyan, AB	10	719	1	1	~~1~~			$ 281.25
					Sub-total	38.75	1,438	2	3	5	0.00	0.00	$1,293.75
					Rates			15	20	30			
							$ -	$30.00	$60.00	$ 150.00	$ -	$ -	
					Total Travel and Subsistence							$ 240.00	

VISA Deductions		
Date	Description	Amount
	Total	$

SAKESKANIP, RUBI
Vendor:10292 / Invoice:928490
202007INV06001

EXPENSES						
Kilometers	1,438	at	$0.51	=	$	733.38
Meals						
Breakfast	2	at	$15.00	=	$	30.00
Lunch	3	at	$20.00	=	$	60.00
Dinner	4 ~~5~~	at	$30.00	=	$	~~150.00~~ 120.00
				Subtotal	$	240.00
Accommodations & Other Expenses						
Lodging					$	-
Other					$	-
				Expenses Sub Total	$	973.38
				Less: VISA Deductions	$	-
				Expenses Total	$	~~973.38~~ 943.38

HONORARIA		
Honoraria - Rates		
Chair - 1.0 Day (4-8 hours)	$	275.00
Chair - .5 Day (2-4 hours)	$	137.50
Chair - .25 Day (less than 2 hours)	$	68.75
Trustee - 1.0 Day (4-8 hours)	$	225.00
Trustee - .5 Day (2-4 hours)	$	112.50
Trustee - .25 Day (less than 2 hours)	$	56.25
Honoraria Sub Total	$	1,293.75
Less: 30% Payroll Deductions	$	388.13
Honoraria Total	$	905.63

TOTAL CLAIM	~~$ 1,879.01~~

1849.00

Robin mar 11/20

NOTES:
Sent to Robin for approval
J Duchame

Office Use Only:

T & S	1	461	07	70	082	90	~~$973.38~~	Ward09
Visa Deduct	1	039					$0.00	9
Honoraria	1	072					~~$1,293.75~~	9

943.38 I

405.63 E

Rubi Shirley
Signature of Claimant

3·11·2020
Date

Robin Guild Email attached
Approved By

3·11·2020

RECEIVED
MAR 11 2020
Date
PAYROLL
ACCOUNTS PAYABLE

E490-10-17 Direct Deposit to Account on File in Accounts Payable YES / NO

#928609

HONORARIA/EXPENSE CLAIM

Claimant's Name: Rubi Shirley **Position:** Trustee **Claim No.** #03252020

Address: **Date:** Mar 25, 2020

Date	Depart From	Depart Time	Arrival to	Arrival Time	Details	Total Hours	Total Kms	Meals B	Meals L	Meals D	Other Expenses Lodging	Other Expenses Other (need receipts)	Honoraria
Mar 16 2020		7:00 PM		8:00 PM	Teleconference Meeting COVID-19 Update	1							$ 56.25
Mar 20 2020		9:00 AM		12:00 PM	Virtual Board Meeting	3							$ 112.50
					Trustee Days (2)								$ 450.00
					Sub-total	4	0	0	0	0	0.00	0.00	$ 618.75
					Rates			25	20	30			
							$ -	$ -	$ -	$ -	$ -	$ -	
					Total Travel and Subsistence							$ -	

VISA Deductions

Date	Description	Amount
Total		$ -

EXPENSES					
Kilometers	0	at	$0.51	=	$ -
Meals					
Breakfast	0	at	$15.00	=	$ -
Lunch	0	at	$20.00	=	$ -
Dinner	0	at	$30.00	=	$ -
				Subtotal	$ -
Accommodations & Other Expenses					
Lodging					$ -
Other					$ -
				Expenses Sub Total	$ -
				Less: VISA Deductions	$ -
				Expenses Total	$ -

HONORARIA	
Honoraria - Rates	
Chair - 1.0 Day (4-8 hours)	$ 275.00
Chair - .5 Day (2-4 hours)	$ 137.50
Chair - .25 Day (less than 2 hours)	$ 68.75
Trustee - 1.0 Day (4-8 hours)	$ 225.00
Trustee - .5 Day (2-4 hours)	$ 112.50
Trustee - .25 Day (less than 2 hours)	$ 56.25
Honoraria Sub Total	$ 618.75
Less: 30% Payroll Deductions	$ 185.63
Honoraria Total	$ 433.13

TOTAL CLAIM	$ 433.13

NOTES:

Emailed to Robin 2:40 pm 3.25.2020

March 25 2020

Office Use Only:

G/L Code	F	OBJ	FS	P	SP	FA	Amount	Ward
T & S	1	461	07	70	082	90	$0.00	Ward09
Visa Deduct	1	039					$0.00	9
Honoraria	1	072					$433.13	9

E

Rubi Shirley
Signature of Claimant

Mar 24,2020
Date

Robin Guild Email attached
Approved By

Date

E490-10-17 Direct Deposit to Account on File in Accounts Payable YES / NO