



Trustee Compensation and Expense Claim

Name: Edwards, Cheryl

October 2024

MONTHLY HONORARIUM		Vice-Chair													
MONTHLY BENEFIT ALLOWANCE		153.00													
SUB-TOTAL		1153.00													
					TRAVEL		SUBSISTENCE ALLOWANCE Please select all that apply			LODGING					
REGULAR BOARD MEETINGS	Meeting Date(s)	Allowance/Portion of Day	Prep Time	Full Rate	Reduced Rate	Breakfast	Lunch	Supper	Lodging Self	Hotel Receipt Total	Hotel Receipt GST				
Public LLB	02-Oct-2024	Extended Day	<input checked="" type="checkbox"/> 109.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Public BV	23-Oct-2024	Full Day	<input checked="" type="checkbox"/> 109.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
			<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
SUB-TOTAL		545.00													
COMMITTEE MEETINGS	Meeting Date(s)	Allowance/Portion of Day	Committee Chair	Full Rate	Reduced Rate	Breakfast	Lunch	Supper	Lodging Self	Hotel Receipt Total	Hotel Receipt GST				
Communication and Recognition	03-Oct-2024	Half Day	<input checked="" type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Political Advocacy	08-Oct-2024	Half Day	<input type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Board Policy	09-Oct-2024	Half Day	<input checked="" type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Board Policy	30-Oct-2024	Half Day	<input checked="" type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Support Staff Liaison	31-Oct-2024	Half Day	<input checked="" type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Communications and recognition	31-Oct-2024	Half Day	<input checked="" type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Interview Panel	29-Oct-2024	Extended Day	<input type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Planning meeting	30-Oct-2024	Half Day	<input type="checkbox"/> 29.00			<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
SUB-TOTAL		1090.00													
PROFESSIONAL DEVELOPMENT/CONFERENCES	Meeting Date(s)	Allowance/Portion of Day		Full Rate	Reduced Rate	Breakfast	Lunch	Supper	Lodging Self	Hotel Receipt Total	Hotel Receipt GST				
PSBAA Fall Conference	16-Oct-2024	Full Day				<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
PSBAA Fall Conference	17-Oct-2024	Extended Day				<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
PSBAA Fall Conference	18-Oct-2024	Full Day				<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
Ignite CL	28-Oct-2024	Full Day				<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00						
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
SUB-TOTAL		981.00													
COMMUNICATION ALLOWANCE	Meeting Date(s)	Allowance													
	October	Trustee													
SUB-TOTAL		75.00													
OTHER EXPENSES	Expense Date														
		<table border="1" style="float: right; margin-left: auto;"> <tr> <td style="width: 50px;">Total Receipt</td> <td style="width: 50px;">GST on Receipt</td> </tr> <tr> <td style="text-align: center;">0.00</td> <td style="text-align: center;">0.00</td> </tr> </table>										Total Receipt	GST on Receipt	0.00	0.00
Total Receipt	GST on Receipt														
0.00	0.00														

SUBTOTALS 2691.00 363.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

Total Claim 4207.00