

Trustee Compensation and Expense Claim



Name: Kissel, Garry

November 2024

MONTHLY HONORARIUM	Trustee										
MONTHLY BENEFIT ALLOWANCE	208.00										
SUB-TOTAL	1008.00										
				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
Caucus Meeting - Bonnyville	13-Nov-2024	Full Day	<input checked="" type="checkbox"/> 109.00	65		<input type="checkbox"/> 15.00	<input type="checkbox"/> 20.00	<input type="checkbox"/> 30.00	<input type="checkbox"/> 75.00		
Board Meeting - Bonnyville	27-Nov-2024	Full Day	<input checked="" type="checkbox"/> 109.00	65		<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		436.00									
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
School Council supper and meeting - Glendon	13-Nov-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		
Student Advisory Council meeting - Bonnyville	28-Nov-2024	Full Day	<input type="checkbox"/> 29.00	65		<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"/>		
			<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SUB-TOTAL		327.00									
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
						<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"/>	<input type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SUB-TOTAL		0.00									
COMMUNICATION ALLOWANCE	Meeting Date(s)	Allowance									
	November	Trustee									
SUB-TOTAL		75.00									
OTHER EXPENSES	Expense Date										
SUBTOTALS		838.00	218.00	136.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Total Claim 2200.50