

## **Trustee Compensation and Expense Claim**

Name: Phillips, Lois February 2025

MONTHLY HONORARIUM	Trustee										
MONTHLY BENEFIT	208.00										
ALLOWANCE	1008.00										
SUB-TOTAL	1008.00	I	I			CUB	CICTEM	<u> </u>	I		
				П	TRAVEL SUBSISTI ALLOWA Please select all		OWANG	ICE L		ODGING.	
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
February 5th board meeting	05-Feb-2025	Extended Day	▼ 109.00	265		<b>15.00</b>	20.00	30.00	75.00		
February 26 board meeting	26-Feb-2025	Full Day	▼ 109.00			<b>15.00</b>	20.00	30.00	75.00		
	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
VMW Replacement Design Meeting	11-Feb-2025	Half Day	29.00			<b>15.00</b>	20.00	30.00	75.00		
VMW Replacement Design Meeting	25-Feb-2025	Half Day	29.00			<b>15.00</b>	20.00	30.00	75.00		
VMW Replacement in person meeting	18-Feb-2025	Half Day	29.00			<b>15.00</b>	20.00	30.00	75.00		
Meeting with Buffalo Lake MS	04-Feb-2025	Half Day	29.00			<b>15.00</b>	20.00	30.00	75.00		
	CUD TOTAL	436.00									
	SUB-TOTAL			1			<u> </u>		Г	Hotal	Hotal
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
Teacher's Convention	12-Feb-2025	Half Day	<u>I</u>		460	T 15.00	20.00	₹ 30.00	75.00	408.79	18.86
Teacher's Convention	13-Feb-2025	Full Day				▼ 15.00	₹ 20.00	₹ 30.00	75.00		
Teacher's Convention	14-Feb-2025	Full Day				<b>15.00</b>	₹ 20.00	30.00	75.00		
	SUB-TOTAL	545.00									
COMMUNICATION ALLOWANCE	Meeting Date(s)	Allowance									
	February	Trustee	•								
	SUB-TOTAL	75.00									
OTHER EXPENSES	Expense Date									Total Receipt	GST on Receipt
	SUBTOTALS	1601.00	218.00	185.50	156.40	30.00	40.00	60.00	0.00	408.79	18.86
							٦	<b>Total</b>	Claim	3707	7.69



## INFORMATION INVOICE

Miss Lois Phillips

Canada

Room No. Arrival Departure : 1107 : 02-12-25 : 02-14-25

Page No. : 1 of 2

Folio No.

Conf. No. : 340267133

Cashier No. : 7
Custom Ref. :

Company Name Group Name Guest Name

Date	Description		Charges	Credits
	Accommodation		149.00	
02-12-25	ERDMF 3%		4.47	
02-12-25	Tourism LÉVY 4%		6.14	
02-12-25	Room / GST 5%		7.67	
02-12-25	Guest Self Parking		30.00	2
02-12-25	Parking GST		1.50	
02-12-25	Accommodation		159.00	
02-13-25	ERDMF 3%		4.77	
02-13-25	Tourism LEVY 4%		6.55	
02-13-25	Room / GST 5%		8.19	
02-13-25	Guest Self Parking		30.00	
02-13-25			1.50	
	Parking GST		1.00	408.79
02-14-25	xxxxxxxxx			400.79
	***************************************			
		Total Charges	408.79	
		Total Credits		408.79
		Balance		0.00

I have received the goods and / or services in the amount shown heron. 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 associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer. (Hotel GST#816322242RT0001)

Chateau Lacombe Hotel | 10111 Bellamy Hill | Edmonton AB, T5J 1N7

Toll Free: 1.800.661.8801 | Telephone: 780.428.6611 | Fax: 780.425.6564 | Email: reservations@chateaulacombe.com

www.chateaulacombe.com