



Trustee Compensation and Expense Claim

Name: Edwards, Cheryl
August 2025

| | | | | | | | | | | | | | |
|--|------------------------|---------------------------------|--|------------------|---------------------|--|--------------------------------|--------------------------------|--------------------------------|----------------------------|--------------------------|----------------------|-----------------------|
| MONTHLY HONORARIUM | Trustee | | | | | | | | | | | | |
| MONTHLY BENEFIT ALLOWANCE | 208.00 | | | | | | | | | | | | |
| SUB-TOTAL | 1008.00 | | | | | | | | | | | | |
| | | | | TRAVEL | | SUBSISTENCE ALLOWANCE Please select all that apply | | | LODGING | | | | |
| REGULAR BOARD MEETINGS | MeetingDate(s) | Allowance/Portion of Day | Prep Time | Full Rate | Reduced Rate | Breakfast | Lunch | Supper | Lodging Self | Hotel Receipt Total | Hotel Receipt GST | | |
| Public BV | 25-Aug-2025 | 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 | | | | |
| | | | <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 | | | | | | | | | | |
| 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 | | |
| | | | <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"/> | | | | |
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| | | | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| SUB-TOTAL | | | 0.00 | | | | | | | | | | |
| 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"/> | | | | |
| SUB-TOTAL | | | 0.00 | | | | | | | | | | |
| COMMUNICATION ALLOWANCE | Meeting Date(s) | Allowance | | | | | | | | | | | |
| | August | Trustee | | | | | | | | | | | |
| SUB-TOTAL | | 75.00 | | | | | | | | | | | |
| OTHER EXPENSES | Expense Date | | | | | | | | | | | | |
| <div style="float: right;"> <table border="1"> <tr> <td>Total Receipt</td> <td>GST on Receipt</td> </tr> </table> </div> | | | | | | | | | | | | Total Receipt | GST on Receipt |
| Total Receipt | GST on Receipt | | | | | | | | | | | | |

SUBTOTALS 402.00 109.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

Total Claim 1519.00