

REMUNERATION FOR CONFERENCES ATTENDED

I, Lyanne Almborg do declare that

I attended RMA Fall Conference Conference

on Nov 6-9

at Edmonton and travelled 520 Kms.

I, request to be paid for 4 Days and 3 Nights.

Lyanne Almborg
(Signature)

(Please attach hotel receipts)

10065 100 Street NW
Edmonton, AB, T5J 0N6
Tel: 780-424-5181
Fax: 780-429-6481
G.S.T. Registration # 846543619

Ms. Lyanne Almberg
Canada

ALL Membership # :
Group Name : RMA Fall Convention 2023
Company Name : Rural Municipalities of Alberta (RMA)

Room : 0201
Folio # : 26473
Cashier # : 442
Page # : 2 of 2

Arrival : 11-06-23
Departure : 11-09-23

GST Summary
Room 33.24
F&B 0.00
Other 0.00
Total 33.24

Total Charges 724.80
Total Credits 724.80

Balance 0.00

Thank you for choosing Fairmont Hotel Macdonald.
To provide feedback about your stay, please contact Cole Millen, General Manager, at Cole.MillenGM@fairmont.com

Municipal District of Provost No. 52
Councillor Committee Expense Sheet

In Account with:

Name: Lyanne Almberg
 Address: _____

<u>Date</u>	<u>Committee</u>	<u>Hours @ \$40.00/hr</u>	<u>Mileage @ \$0.59/km</u>
Oct 30	Joint flagstaff	3	124
Nov 20	cheques	2	94
Dec 21	Cheques	2	94
Jan 19	Cheques	2	94
Jan 18	West Fire	2	30
Jan 12	Joint meet with MLA Jean virtual from chambers	3	94
Total			

I hereby certify that the whole of this expenditure was incurred on Municipal business, and that each item is correctly given.

Digital Signature: *Lyanne Almberg*

Payment Authorized by Council:
 Date: _____