

# SCHEDULE "B"



THE MUNICIPALITY OF THE COUNTY OF  
LA MUNICIPALITÉ DU COMTÉ DE  
**RICHMOND**

<b>OF THE COUNTY OF RICHMOND</b>	<b>MUNICIPALITY TRAVEL</b>
<b>EXPENSE CLAIM</b>	
<b>Name of Claimant:</b>	Chris Boudreau
<b>Destination:</b>	15 Commerce Court, Elmsdale
<b>Purpose of Travel:</b>	Nova Scotia Solid Waste Directors and Managers Meeting (NSSWMD)
<b>Departure Date/Time:</b>	April 13, 2018 - 6:30 AM
<b>Return Date/Time:</b>	April 13, 2018 - 4:30 PM
<b>Approval to Travel</b>	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">               _____              Supervisor           </div> <div style="text-align: right;">             Date: <u>Apr. 6/2018</u> </div> </div>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km	144	0	0	0	0	63.58
<b>Accommodation: Direct Bill</b>						
<b>Hotel Name:</b>						
<i>(Indicate if Direct Bill or Provide Receipt)</i>						
Meals: Breakfast \$20						0.00
Lunch \$25						0.00
Dinner \$30						0.00
Other Meals (Receipts Required)						0.00
Incidentals (\$10 per overnight stay)						0.00
Taxi/Parking/Tolls (Receipts Required)						0.00
<b>Total Amount Being Claimed</b>						<b>63.58</b>

**Written Travel Report - Policy Requirements (Section 1.3.ii)**

Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended: Initial CB N/A

Entered incorrect mileage on previous claim. This claim for the difference of the actual mileage (542 Km) less the mileage previously claimed (398 Kms) for a total claim of 144 Kms.

<b>All claims are to be submitted not later than 30 days after return.</b>	
Claimant Signature:	
Date:	<u>May 10 2018</u>
Travel Approved by Supervisor:	
GL Code:	10-242-3070-242110

Goods Rec'd. Date.....	Initial.....	<u>A</u>
Prices Checked.....		<u>A</u>
Add. & Ext. Checked.....		<u>A</u>
Approval for Payment.....		<u>A</u>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <u>10-242-3070-242110</u>		

15/3

**NOVA SCOTIA SOLID WASTE MANAGERS/DIRECTORS COMMITTEE**

**Friday, April 13<sup>th</sup>, 2018**  
**15 Commerce Court, Elmsdale**  
**Maitland Township Room 168**  
**10:00 a.m. - 2:00 p.m.**

**AGENDA**

1 Call to Order/Round Table Introductions

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2 Approval of the Agenda

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3 Priorities Group Committee (S. Rayworth/G. Green)  
Status Update - Study

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4 Regional Chairs Workshop - 5 Goals (discussion)

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5 Recycling Markets - Member Operations (status update)

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6 Divert NS Waste Audits - Status Update

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7 Datacall  
Divert NS Diversion Funding Smoothing  
Diversion Credit Formula

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8 C&D - Member Operations (status update)

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9 Outside NS Waste - Operations

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10 Other  
Divert NS Procurement Summit (Fall)  
SWANA Safety Showcase (October)

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11 Open Floor Round Table Operational Updates

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12 Next Meeting Date/Location (June)

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13 Adjournment

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**SCHEDULE "B"**



THE MUNICIPALITY OF THE COUNTY OF  
LA MUNICIPALITÉ DU COMTÉ DE  
**RICHMOND**

OF THE COUNTY OF RICHMOND						MUNICIPALITY TRAVEL
EXPENSE CLAIM						
Name of Claimant:	Chris Boudreau					
Destination:	Amherst, Nova Scotia					
Purpose of Travel:	Municipal Public Works Association of NS Spring Conference (MPWANS)					
Departure Date/Time:	May <del>16</del> <sup>24</sup> , 2018 - <del>7:00 AM</del> 6:15 AM					
Return Date/Time:	May <del>18</del> <sup>25</sup> , 2018 - <del>5:00 PM</del> 3:30 PM					
Approval to Travel						Date: March 20/2018
Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km	322	322	0	0	0	\$284.33
Accommodation: <del>Direct Bill</del> Hotel Name: Super 8 Amherst <small>(Indicate if Direct Bill or Provide Receipt)</small>						\$138.00
Meals: Breakfast \$20	20	20				\$40.00
Lunch \$25		25				\$25.00
Dinner \$30						0.00
Other Meals (Receipts Required)						0.00
Incidentals (\$10 per overnight stay)	10					10.00
Taxi/Parking/Tolls (Receipts Required)	4	4				\$8.00
<b>Total Amount Being Claimed</b>						<b>\$505.33</b>

**Written Travel Report - Policy Requirements (Section 1.3.ii)**

Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended: Initial CB N/A

**All claims are to be submitted not later than 30 days after return.**

Claimant Signature:	
Date:	May 28, 2018
Travel Approved by Supervisor:	
GL Code:	10.242.3070.242110

Goods Rec'd. Date.....	Initial.....	
Prices Checked.....		
Add. & Ext. Checked.....		
Approval for Payment.....		
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. 10.242.3070.2421		10

## Agenda: MPWANS Spring Conference 2018 - Community Credit Union Business Innovation Centre

<b>Wednesday, May 23<sup>rd</sup> 2018</b>		
11:15am to 11:30am	Transportation to GC	Meet at Super 8
12:00pm	Golf	Amherst GCC
1:00pm	WWTP / Reservoir Tour	Meet at Super 8
Supper on your own		
7:00pm - 12:00am	Networking - Super 8 Meeting Room	Sponsor: MacLennan Sales/ Soleno/Ipex/Clow
<b>Thursday, May 24<sup>th</sup>, 2018</b>		
8:30am to 9:30am	Registration	CCUBIC Lobby
9:30am to 9:45am	Welcome and Opening Remarks	Town of Amherst Mayor David Kogon
9:45am to 10:30am	Technical Session	Scott Hue - PMC Energy Performance Contracting
10:30am to 10:45am	Health Break	Sponsor: Industrial Hydrovac NB
10:45am to 11:30am	Technical Session	Derek Collins - Soleno Storm Water Solutions
11:30am to 12:15pm	Technical Session	John Gallant, Stantec - Conflict Reslution in Storm Water Design
12:15pm to 1:30pm	Lunch - CCUBIC	Catered by: Duncan's Pub
1:30pm to 2:15pm	Speaker	Jennifer Duncan - Nova Scotia Department of Municipal Affairs
2:15pm to 3:00pm	Speaker	CPWA
3:00pm to 3:15pm	Health Break	Sponsor: MacKenzie Septic Tank Service
3:15pm to 4:00pm	Equipment Display	Bruce Fraser - Macfarland Equipment - SpaceKap and Wacker Loaders
5:00pm to 7:30pm	Banquet Dinner with Live Music - CCUBIC	Hip of Beef / Turkey Buffet Dinner (Cash Bar)
7:30pm to 12:00am	Networking - Super 8 Meeting Room	Sponsor: Saunders Equipment
<b>Friday, May 25<sup>th</sup>, 2018</b>		
8:30am to 9:30am	Round Table Discussion	
9:30am to 10:15am	Business Meeting	
10:15am to 10:45am	Health Break	
10:45am to 11:30am	Technical Session	Syna Rasmuffon - Armtec
11:30am to 11:45am	Farewell and Safe travels. See you in the Fall !!	



**SUPER 8 AMHERST**

40 LORD AMHERST DRIVE  
AMHERST NS B4H -4W6 CA

Phone: 902-660-8888

Fax: 902-660-8000

Email: reservations@super8amherst.com

Printed: 25/05/2018 8:04:16 AM

**Folio (Detailed)**

Name:	BOUDREAU, CHRIS	Confirmation Number:	50583021
		Account Number:	733-880162
Address:	2357 HIGHWAY 206 ARICHAT, NS B0E1A0 CA		
Room:	313	Room Type:	NQQ1, 2QUEEN/NS/MIC/
Rate Plan:	SGS	Daily Rate:	FRDG
Arrival:	24/05/2018 (Thu)	Departure:	25/05/2018 (Fri)
		Nights:	1
		Guests:	1/0
		GTD:	SAT - CREDIT CARD TERMINAL

Room Rate:  
24/05/2018 (Thu) - 24/05/2018 (Thu)      \$120.00 + \$18.00 Tax per night.

Date	Code	Description	Amount	Balance
24/05/2018	100	ACCOMMODATIONS	\$120.00	\$120.00
24/05/2018	TAX1	HST TAX	\$18.00	\$138.00
25/05/2018	VISA	VISA - SAT	-\$138.00	\$0.00

**Summary**

Room	Tax	F&B	Other	CC	Cash	DB
\$120.00	\$18.00	\$0.00	\$0.00	-\$138.00	\$0.00	\$0.00

Wyndham Rewards members earn valuable points on qualifying stays at nearly 7,000 hotels around the world. Points can be redeemed for free nights, gift cards, merchandise and more. If you're not already a member, join at the front desk, visit us at [www.wyndhamrewards.com](http://www.wyndhamrewards.com) or call 1-866-WYN-RWDS.

Guest Signature:

(1) Regardless of charge instructions, the undersigned acknowledges the above as personal indebtedness. (2) This property is privately owned and management reserves the right to refuse services to any one, and will not be responsible for injury or accidents to guests or loss of money, jewelry or any personal valuables of any kind. "We or our affiliates may contact you about goods and services unless you call 888-946-4283 or write to Opt Out/ Privacy, Wyndham Hotel Group, LLC, 22 Sylvan Way, Parsippany, NJ 07054 to opt out. View our website about privacy."

SUPER 8 AMHERST  
40 LORD AMHERST DRIVE  
AMHERST NS

CARD 5446\*\*\*\*\*8133  
CARD TYPE MASTERCARD  
DATE 2018/05/25  
TIME 5776 08:04:40  
RECEIPT NUMBER  
C84035967-001-312-001-0

PRE-AUTH COMPLETION  
TOTAL

**\$138.00**

MasterCard  
A0000000041010

**APPROVED**

AUTH# 03166Z 01-027  
THANK YOU

MERCHANT COPY

COBEQUID PASS TOLL PLAZA  
P.O. BOX 158  
GREAT VILLAGE, N.S. BOM 1L0  
902-668-2211 or  
Toll Free 1-877-727-7104  
www.cobequidpass.com

Class 2		
Price	CAD	4.00
TOTAL	CAD	4.00
CASH	CAD	4.00

Truro  
25/05/2018 12:46:12 553120 1  
COB-LT04  
9719



051814512461255312000010000006

COBEQUID PASS TOLL PLAZA  
P.O. BOX 158  
GREAT VILLAGE, N.S. BOM 1L0  
902-668-2211 or  
Toll Free 1-877-727-7104  
www.cobequidpass.com

Class 2		
Price	CAD	4.00
TOTAL	CAD	4.00
CASH	CAD	4.00

Amherst  
24/05/2018 09:18:33 613654 1  
COB-LA03  
9713



051814409183361365400016000000



THE MUNICIPALITY OF THE COUNTY OF  
LA MUNICIPALITÉ DU COMTÉ DE  
**RICHMOND**

**TRAVEL EXPENSE CLAIM** Rate **\$0.4415**

Name of Claimant:	Yvonne Boudreau
Destination:	Port Hawkesbury
Purpose of Travel:	Chamber of Commerce AGM
Departure Date/Time:	May 23rd at 5 PM
Return Date/Time:	May 23rd at 9 PM

Approval to Travel *[Signature]* Date: *May 20/2018*

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): <b>90.00</b>	90.00					90.00
Total Cost of Mileage: <b>\$39.74</b>	\$39.74	\$0.00	\$0.00	\$0.00	\$0.00	\$39.74
Accommodation/Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						\$0.00
Meals: Breakfast \$20						\$0.00
Lunch \$25						\$0.00
Dinner \$30						\$0.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)						\$0.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
<b>Total Amount Being Claimed</b>	<b>\$39.74</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$39.74</b>

**Written Travel Report - Policy Requirements (Section 1.3.ii)**  
 Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met

I confirm that I attended 80% or more of the conference I attended: Initial *YB* N/A \_\_\_\_\_

**All claims are to be submitted not later than 60 days after return.**

Claimant Signature: *Yvonne Boudreau*

Date Submitted: *May 25, 2018*

Travel Approved by Supervisor: *[Signature]*

GL Code:

Goods Rec'd. Date.....	Initial.....	<i>A</i>
Prices Checked.....		<i>A</i>
Add. & Ext. Checked.....		<i>A</i>
Approval for Payment.....		<i>A</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No.....	<i>10 212 2120 21213</i>	<i>0</i>



THE MUNICIPALITY OF THE COUNTY OF RICHMOND  
LA MUNICIPALITÉ DU COMTE DE RICHMOND

**TRAVEL EXPENSE CLAIM**

Rate **\$0.4415**

Name of Claimant:	Yvonne Boudreau
Destination:	Antigonish
Purpose of Travel:	Cannabis Legalization Community Impact's Workshop
Departure Date/Time:	May 8th at 8:00 AM
Return Date/Time:	May 8th at 5:00 PM

Approval to Travel \_\_\_\_\_ Date: \_\_\_\_\_

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): <b>205.80</b>	205.80					205.80
Total Cost of Mileage: <b>\$90.86</b>	\$90.86	\$0.00	\$0.00	\$0.00	\$0.00	\$90.86
Accommodation/Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						\$0.00
Meals: Breakfast \$20						\$0.00
Lunch \$25	\$25.00	<i>- Dietary Restrictions</i>				\$25.00
Dinner \$30						\$0.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)						\$0.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
<b>Total Amount Being Claimed</b>	<b>\$115.86</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$115.86</b>

**Written Travel Report - Policy Requirements (Section 1.3.ii)**  
 Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended: Initial YB N/A \_\_\_\_\_

All claims are to be submitted not later than 60 days after return.

Claimant Signature: Yvonne Boudreau

Date Submitted: January 9/18

Travel Approved by Supervisor: KM [Signature]

GL Code: \_\_\_\_\_

Goods Rec'd. Date.....	A
Prices Checked.....	A
Add. & Ext. Checked.....	A
Approval for Payment.....	A
Discount Date.....	HST 3
Paid by Cheque No.....	
Distribution: Acc't. No.....	10 212 2120 2121 3



THE MUNICIPALITY OF THE COUNTY OF  
LA MUNICIPALITÉ DU COMTÉ DE  
**RICHMOND**

**TRAVEL EXPENSE CLAIM** Rate **\$0.4415**

<b>Name of Claimant:</b>	Yvonne Boudreau
<b>Destination:</b>	Antigonish, NS
<b>Purpose of Travel:</b>	Cannabis Legalization Community Impacts Workshop
<b>Departure Date/Time:</b>	8:00 AM <i>May 8/18</i>
<b>Return Date/Time:</b>	5:30 PM <i>May 8/18</i>
<b>Approval to Travel</b>	<i>[Signature]</i> Date: <i>April 9/2018</i>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
<b>Total Mileage (# of Km):</b>	0.00					0.00
<b>Total Cost of Mileage:</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Accommodation/Hotel Name:</b>						\$0.00
<i>(Indicate if Direct Bill or Provide Receipt)</i>						
<b>Meals:</b> Breakfast \$20						\$0.00
Lunch \$25						\$0.00
Dinner \$30						\$0.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)						\$0.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
<b>Total Amount Being Claimed</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Written Travel Report - Policy Requirements (Section 1.3.ii)**  
 Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met

I confirm that I attended 80% or more of the conference I attended: Initial \_\_\_\_\_ N/A \_\_\_\_\_

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<b>All claims are to be submitted not later than 60 days after return.</b>	
Claimant Signature:	_____
Date Submitted:	_____
Travel Approved by Supervisor:	_____
GL Code:	_____

May 8th, 2018  
10:00-3:30

Antigonish Legion  
Canadian  
Association for  
Community Living

# Cannabis Legalization

## Community Impacts Workshop

### You are Invited

Please join us as we learn more about cannabis legalization and hear from experts on how communities can prepare. We will have discussions about what opportunities exist for partnerships and what actions may be considered now and into the future. Participants will increase their understanding of legal, health and social impacts of non-medical cannabis legalization and the considerations for future municipal planning work.

Discussion topics  
will include:

Healthy and Safe  
communities

Provincial Cannabis  
legalization Update

Legal and Municipal  
Planning Landscape and  
Workplace Policy

This workshop is designed for:

Planners, Mayors, Wardens, councillors and municipal staff who play a role in working toward developing safe and healthy communities

Please RSVP by April 25th to:  
**Andrea Donovan**  
Health Promoter, Public Health  
[andrea.donovan@nshealth.ca](mailto:andrea.donovan@nshealth.ca)





## CANNABIS LEGALIZATION: COMMUNITY IMPACTS WORKSHOP



**DATE: May 8, 2018**

**10:00-3:00**

Antigonish Legion/CACL Workshop  
75 St. Ninian Street, Antigonish

### Agenda:

- |                       |   |
|-----------------------|---|
| <b>9:30-10:00am</b>   | <b>Coffee and registration</b>  |
| <b>10-10:15</b>       | <b>Nathan Rogers, President, LPPANS</b><br>Welcome and Greetings  |
| <b>10:15-10:55</b>    | <b>Dr. Ryan Sommers, Medical Officer of Health</b><br>Public Health Perspective on Cannabis Legalization  |
| <b>10:55-11:35</b>    | <b>Bob Purcell, NS Department of Justice</b><br>Provincial and Federal Cannabis Legalization Update   |
| <b>11:35-12:15pm</b>  | <b>Chief David MacNeil, Truro Police Service</b><br>A Law Enforcement Perspective   |
| <b>12:15 pm-12:45</b> | <b>Lunch – Provided</b>   |
| <b>12:45-1:25</b>     | <b>Nancy Rubin, Q.C., Stewart McKelvey</b><br>Federal/Provincial/Municipal roles and responsibilities in legalization<br>Zoning and Land Use<br>Cannabis in the Workplace |
| <b>1:25-2:00</b>      | <b>National Collaborating Centres for Environmental Health</b><br>Home Growing of Cannabis  |
| <b>2:00-2:45</b>      | <b>Reflection and Group Discussion</b><br>Opportunities for collaboration   |
| <b>2:45-3:00</b>      | <b>Wrap-Up</b>  |





THE MUNICIPALITY OF THE COUNTY OF RICHMOND  
LA MUNICIPALITÉ DU COMTE DE RICHMOND

**TRAVEL EXPENSE CLAIM**

Rate **\$0.4415**

Name of Claimant:	Kent MacIntyre
Destination:	Port Hawkesbury
Purpose of Travel:	Chamber of Commerce AGM
Departure Date/Time:	May 23rd at 5 PM
Return Date/Time:	May 23rd at 9 PM
Approval to Travel	<i>Grian Marchand</i> Date: <i>May 28/18</i>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	90.00					90.00
Total Cost of Mileage:	\$39.74	\$0.00	\$0.00	\$0.00	\$0.00	\$39.74
Accommodation/Hotel Name:						\$0.00
<i>(Indicate if Direct Bill or Provide Receipt)</i>						
Meals: Breakfast \$20						\$0.00
Lunch \$25						\$0.00
Dinner \$30						\$0.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)						\$0.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
<b>Total Amount Being Claimed</b>	<b>\$39.74</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$39.74</b>

**Written Travel Report - Policy Requirements (Section 1.3.ii)**  
 Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended: Initial *KM* N/A \_\_\_\_\_

All claims are to be submitted not later than 60 days after return.

Claimant Signature: *K MacIntyre*

Date Submitted: *May 25/2018*

Travel Approved by Supervisor: *Grian Marchand*

GL Code: \_\_\_\_\_

Goods Rec'd. Date.....	Initial.....	<i>P</i>
Prices Checked.....		<i>P</i>
Add. & Ext. Checked.....		<i>P</i>
Approval for Payment.....	<i>HST 3</i>	<i>P</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No.....	<i>10 212 2120 212</i>	<i>13</i>

# STRAIT AREA CHAMBER OF COMMERCE

## Annual General Meeting Dinner & Awards Night

MAY 23, 2018 | PORT HAWKESBURY CIVIC CENTRE  
5PM AGM | 5:30PM PRESIDENT'S RECEPTION  
6:15PM DINNER & AWARDS | 7:45PM DESSERT MIXER



HERMAN & NORMA BOUDREAU  
OH BOUDREAU FUNERAL HOME

Jack Hartery Memorial Lifetime  
Achievement Award for Business



BLAISE MACEACHERN  
CELTIC SHORES COASTAL TRAIL

Kevin Beaton  
Heart of the Community Award



SPECIAL PRESENTATION BY  
STEVEN GOOGOO  
BAND COUNCILLOR,  
WAYGOBAH FIRST NATION



DESSERT MIXER WITH  
ENTERTAINMENT BY  
BRETT PIERCE



## Congratulations!

LORETTA GOULD, WE'KOOQA'Q FIRST NATION  
Cultural Award of Merit

JEREMY MURRAY, NSCC  
Student Leadership Award

ALLANA RICHARDSON, RIVER DENYS  
President's Award



Tickets Available at: [www.straitareachamber.ca](http://www.straitareachamber.ca)

AGM Award Descriptions:

### JACK HARTERY LIFETIME ACHIEVEMENT IN BUSINESS AWARD

The Jack Hartery Memorial Lifetime Achievement in Business Award is presented annually and is the highest honour awarded by the Strait Area Chamber of Commerce. Recipients of this award are individuals with a long record of continuous business operations in the Strait Area (minimum of 20



MUNICIPALITY OF THE COUNTY OF RICHMOND  
TRAVEL EXPENSE CLAIM

Name of Claimant:	Brian Marchand
Destination:	Antigonish Council Chambers
Purpose of Travel:	Mayors & Wardens
Departure Date/Time:	May 9-2018 - 8:00 AM
Return Date/Time:	May 9-2018 - 2:00 PM
Approval to Travel	<i>[Signature]</i> Date: <i>May 8/2018</i>

Description	May 9-2018					Total
Mileage: # of Km 172 KM	\$ 75.94					\$ 75.94
Accommodation: Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						\$ -
Meals: Breakfast \$20						\$ -
Lunch \$25	\$ 25.00					\$ 25.00
Dinner \$30						\$ -
Other Meals (Receipts Required)						\$ -
Incidentals (\$10 per overnight stay)						\$ -
Taxi/Parking/Tolls (Receipts Required)						\$ -
Total Amount Being Claimed	\$ 100.94					\$ 100.94

Written Travel Report - Policy Requirements (Section 1.3.ii)

Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended: Initial BM N/A

All claims are to be submitted not later than 30 days after return.

Claimant Signature: *Brian Marchand*

Date: *May 10/2018*

Travel Approved by Supervisor: *[Signature]*

GL Code:

Goods Rec'd. Date.....	Initial.....	<i>P</i>
Prices Checked.....		<i>A</i>
Add. & Ext. Checked.....		<i>P</i>
Approval for Payment.....		<i>A</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <i>210 2100 210110</i>		

*151*  
*3*

Outlook Mail

Print Cancel  
Re: Mayors and Warden's Meeting

kmacintyre@richmondcounty.ca

Tue 2018-05-08 7:01 PM

To: Brian <brianmarchand@hotmail.com>;

Yes.

Kent

Sent from my iPhone using IBM Verse

---

On May 8, 2018, 5:59:43 PM, brianmarchand@hotmail.com wrote:

From: brianmarchand@hotmail.com  
To: kmacintyre@richmondcounty.ca  
Cc:  
Date: May 8, 2018, 5:59:43 PM  
Subject: Mayors and Warden's Meeting

Need permission to attend the Mayors and Wardens meeting in Antigonish on May 9th.  
Thanks.  
Brian

## **Strait Area Mayors' & Wardens Meeting**

**Date:** Wednesday, May 9, 2018  
**Time:** 10:00 AM  
**Location:** Town Council Chambers  
274 Main Street, Antigonish, NS

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### **AGENDA**

1. Meeting Call to Order
2. Welcome Guests
3. Strait Area Ground Search & Rescue (Presentation)
4. Approval of Minutes
  - Mayors and Wardens Meeting – October 12, 2017
5. Lack of Representation on the Provincial Health Board – Warden Vernon Pitts
6. Subcommittee Report Update
7. Port Development/Marketing (Update)
8. Emergency Measures Organization – Canso Causeway – Mayor Brenda Chisholm-Beaton
9. Cape Breton Regional Municipality (CBRM) Charter
10. Additions to Agenda
11. Municipal Updates
12. Adjournment



THE MUNICIPALITY OF THE COUNTY OF  
LA MUNICIPALITÉ DU COMTE DE  
**RICHMOND**

**MUNICIPALITY OF THE COUNTY OF RICHMOND  
TRAVEL EXPENSE CLAIM**

Name of Claimant:	Brian Marchand
Destination:	Port Hawkesbury Civic Center
Purpose of Travel:	Strait Area Chamber AGM
Departure Date/Time:	May 23-2018 - 4:30 PM
Return Date/Time:	May 23-2018 - 10:00 PM
Approval to Travel	<i>attached</i> Date:

Description	Day 1					Total
Mileage: # of Km      56 KM	\$ 24.72					\$ 24.72
Accommodation: Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						\$ -
Meals: Breakfast      \$20						\$ -
Lunch      \$25						\$ -
Dinner      \$30						\$ -
Other Meals (Receipts Required)						\$ -
Incidentals (\$10 per overnight stay)						\$ -
Taxi/Parking/Tolls (Receipts Required)						\$ -
<b>Total Amount Being Claimed</b>	<b>\$ 24.72</b>					<b>\$ 24.72</b>

**Written Travel Report - Policy Requirements (Section 1.3.ii)**

Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended:      Initial BM      N/A

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**All claims are to be submitted not later than 30 days after return.**

Claimant Signature: Brian Marchand

Date: May 28/2018

Travel Approved by Supervisor: [Signature]

GL Code: \_\_\_\_\_

Goods Rec'd. Date.....	Initial.....	
Prices Checked.....		
Add. & Ext. Checked.....		1156
Approval for Payment.....		3
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. 10... 210... 2100 2101 10		

## Re: Chamber Dinner

kmacintyre@richmondcounty.ca

Tue 2018-05-22 9:37 PM

To: Brian <brianmarchand@hotmail.com>;

Yes.  
I require permission as well.

Kent

Sent from my iPhone using IBM Verse

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On May 22, 2018, 9:35:54 PM, brianmarchand@hotmail.com wrote:

From: brianmarchand@hotmail.com  
To: kmacintyre@richmondcounty.ca  
Cc:  
Date: May 22, 2018, 9:35:54 PM  
Subject: Chamber Dinner

Need permission to go to the Chamber Dinner Wednesday evening in Port Hawkesbury.  
Thanks.  
Brian

--  
If this email is spam, please report it to  
[https://support.onlymyemail.com/view/report\\_spam/MjgwNzY1OjIwOTU1MzIzMjQ6a21hY2IudHlyZUByaWNobW9uZGNvdW50eS5jYTpkZWxpdmVyZWQ](https://support.onlymyemail.com/view/report_spam/MjgwNzY1OjIwOTU1MzIzMjQ6a21hY2IudHlyZUByaWNobW9uZGNvdW50eS5jYTpkZWxpdmVyZWQ)



# Annual General Meeting Dinner & Awards Night

**MAY 23, 2018 | PORT HAWKESBURY CIVIC CENTRE**  
5PM AGM | 5:30PM PRESIDENT'S RECEPTION  
6:15PM DINNER & AWARDS | 7:45PM DESSERT MIXER



**HERMAN & NORMA BOUDREAU**  
CH BOUDREAU FUNERAL HOME

Jack Hartery Memorial Lifetime  
Achievement Award for Business



**BLAISE MACEACHERN**  
CELTIC SHORES COASTAL TRAIL

Kevin Beaton  
Heart of the Community Award



**SPECIAL PRESENTATION BY  
STEVEN GOOGOO**  
BAND COUNCILLOR  
WAYCOBAH FIRST NATION



**DESSERT MIXER WITH  
ENTERTAINMENT BY  
BRETT PIERCE**



## Congratulations!

LORETTA GOULD, WE'KOOQA'O FIRST NATION  
Cultural Award of Merit

JEREMY MURRAY, NSCC  
Student Leadership Award

ALLANA RICHARDSON, RIVER DENYS  
President's Award





THE MUNICIPALITY OF THE COUNTY OF  
LA MUNICIPALITÉ DU COMTE DE  
**RICHMOND**

**MUNICIPALITY OF THE COUNTY OF RICHMOND  
TRAVEL EXPENSE CLAIM**

<b>Name of Claimant:</b>	Brian Marchand
<b>Destination:</b>	Port Hawkesbury PHCC
<b>Purpose of Travel:</b>	Meeting with Board/Staff- Organizational Structure
<b>Departure Date/Time:</b>	May 24-2018 - 9:00 AM
<b>Return Date/Time:</b>	May 24-2018 - 1:00 PM
<b>Approval to Travel</b>	<i>attached</i> <b>Date:</b>

Description	Day 1					Total
Mileage: # of Km    56 KM	\$ 24.72					\$ 24.72
Accommodation: Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						\$ -
Meals: Breakfast    \$20						\$ -
Lunch        \$25						\$ -
Dinner        \$30						\$ -
Other Meals (Receipts Required)						\$ -
Incidentals (\$10 per overnight stay)						\$ -
Taxi/Parking/Tolls (Receipts Required)						\$ -
<b>Total Amount Being Claimed</b>	\$ 24.72					\$ <u>24.72</u>

**Written Travel Report - Policy Requirements (Section 1.3.ii)**

Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended: Initial BM N/A

Meeting with Board & Staff to discuss new Organizational Structure

**All claims are to be submitted not later than 30 days after return.**

Claimant Signature:	<i>Brian Marchand</i>
Date:	<i>May 23/18</i>
Travel Approved by Supervisor:	<i>[Signature]</i>
GL Code:	

Goods Rec'd. Date.....	Initial.....	<i>A</i>
Prices Checked.....		<i>A</i>
Add. & Ext. Checked.....		<i>A</i>
Approval for Payment.....		<i>A</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <i>10 210 2100 2101</i>		<i>151 3</i>



Strait Area Transit AGM

May 24, 2018 – Civic Centre Boardroom

**Agenda**

- 1) Call to order
- 2) Approval of Agenda
- 3) Minutes
- 4) Business Arising from Minutes
- 5) Chair's Report
- 6) Manager's Report
- 7) Financial Report
- 8) Election of Officers
- 9) Additional items: a  
b  
c  
d
- 10) Adjournment

Next meeting:

From: kmacintyre@richmondcounty.ca  
Subject: Re: SAT AGM  
Date: May 23, 2018 at 12:00:47 AM  
To: Brian brianmarchand@hotmail.com

---

Yes.

Kent

Sent from my iPhone using IBM Verse

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On May 22, 2018, 11:32:26 PM, [brianmarchand@hotmail.com](mailto:brianmarchand@hotmail.com) wrote:

From: [brianmarchand@hotmail.com](mailto:brianmarchand@hotmail.com)  
To: [kmacintyre@richmondcounty.ca](mailto:kmacintyre@richmondcounty.ca)  
Cc:  
Date: May 22, 2018, 11:32:26 PM  
Subject: SAT AGM

Need permission to attend SAT AGM May 24-2018 in Port Hawkesbury.

Thanks.

Brian

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If this email is spam, please report it to

[https://support.onlymyemail.com/view/report\\_spam/](https://support.onlymyemail.com/view/report_spam/)

[MjgwNzY1OjIwOTU1NDIyMjU6a21hY2ludHlyZUByaWNobW9uZGNvdW50eS5jYTpkZWxpdmVyZWQ](https://support.onlymyemail.com/view/report_spam/MjgwNzY1OjIwOTU1NDIyMjU6a21hY2ludHlyZUByaWNobW9uZGNvdW50eS5jYTpkZWxpdmVyZWQ)



THE MUNICIPALITY OF THE COUNTY OF RICHMOND  
LA MUNICIPALITÉ DU COMTÉ DE RICHMOND

MUNICIPALITY OF THE COUNTY OF RICHMOND  
TRAVEL EXPENSE CLAIM

Name of Claimant:	Brian Marchand
Destination:	Port Hawkesbury Civic Center
Purpose of Travel:	Midway Meeting
Departure Date/Time:	May 18-2018 - 8:30 AM
Return Date/Time:	May 18-2018 - 1:30 PM
Approval to Travel	<i>attached</i> Date:

Description	Day 1					Total
Mileage: # of Km 56 KM	\$ 24.72					\$ 24.72
Accommodation: Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						\$ -
Meals: Breakfast \$20						\$ -
Lunch \$25						\$ -
Dinner \$30						\$ -
Other Meals (Receipts Required)						\$ -
Incidentals (\$10 per overnight stay)						\$ -
Taxi/Parking/Tolls (Receipts Required)						\$ -
Total Amount Being Claimed	\$ 24.72					\$ 24.72

Written Travel Report - Policy Requirements (Section 1.3.ii)

Please provide a copy of the agenda or briefly outline the time, location, duration, attendees and purpose of your travel.. Please indicate if the 80% attendance threshold has been met.

I confirm that I attended 80% or more of the conference I attended: Initial BM N/A

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All claims are to be submitted not later than 30 days after return.	
Claimant Signature:	<i>Brian Marchand</i>
Date:	<i>May 20/2018</i>
Travel Approved by Supervisor:	<i>[Signature]</i>
GL Code:	

Goods Rec'd. Date.....	Initial.....	<i>A</i>
Prices Checked.....		<i>A</i>
Add. & Ext. Checked.....		<i>A</i>
Approval for Payment.....		<i>A</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <i>10 210 2100 210 110</i>		



One Cape Breton

# Mid-Way Meeting

Port Hawkesbury - 18 May 2018

1. Welcome and introductions
2. Review agenda
3. Causeway "Welcome to Cape Breton Unama'ki" signage update
4. Community updates
  - a. Round table
  - b. CEPI Youth Conference
  - c. Potential Island-Wide Meeting June 16 (Doctor Shortage)
5. Next One CB gathering – Host community
6. Next steps
7. Lunch and continued discussion

From: kmacintyre@richmondcounty.ca  
Subject: Re: Midway session  
Date: May 16, 2018 at 5:28:14 PM  
To: Brian [brianmarchand@hotmail.com](mailto:brianmarchand@hotmail.com)

Yes.

Kent

Sent from my iPhone using IBM Verse

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On May 16, 2018, 5:27:02 PM, [brianmarchand@hotmail.com](mailto:brianmarchand@hotmail.com) wrote:

From: [brianmarchand@hotmail.com](mailto:brianmarchand@hotmail.com)  
To: [kmacintyre@richmondcounty.ca](mailto:kmacintyre@richmondcounty.ca)  
Cc:  
Date: May 16, 2018, 5:27:02 PM  
Subject: Midway session

Need permission to attend Midway Session in Port Hawkesbury on Friday morning?

Thanks.

Brian