

Municipality of the County of Richmond - August 2018		
Meetings Held:		67 kms
Date:	Meeting:	Gilbert Boucher
August-01-18	Special Council	1
August-29-18	Special Council	1
Total # of Meetings Attended:		2
x kms/trip (return):		67
Total Mileage (kms):		134
Rate		0.4415
Total Owed		\$59.16

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Goods Rec'd. Date.....	Initial.....	P
Prices Checked.....		P
Add. & Ext. Checked.....		P
Approval for Payment.....		P
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No.	10 210 2110 210 130	

HST 3



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

NAME: Chris Boudreau

PERIOD COVERED: August 1, 2018 to August 31, 2018

DATE:	PARTICULARS:	MILEAGE (KM):	OTHER EXPENSES:
08-Aug-18	Travel to D'Escousse / Martinique to inspect on-site sewer installations	38	
23-Aug-18	Travel to Poulamon to assess issue with on-site septic system	24	
29-Aug-18	Travel to office for special council meeting	28	

Totals: 90.00 \$0.00

Rate: \$0.4415

Total Mileage (\$): \$39.74

Total Expenses Claimed: **\$39.74**

ACCOUNT #:	10-242-3070-242110	CHEQUE #:	
SIGNATURE:	<i>Chris Boudreau</i>	AMOUNT:	
APPROVED:	<i>[Signature]</i>	DATE PAID:	
DATE SUBMITTED:	Sept. 4/18	INITIAL:	

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

HST 3

SCHEDULE "B"



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

OF THE COUNTY OF RICHMOND	EXPENSE CLAIM					MUNICIPALITY TRAVEL
Name of Claimant:	Chris Boudreau					
Destination:	Port Hawkesbury Civic Centre					
Purpose of Travel:	Meeting with Town and Province Regarding Landrie Lake					
Departure Date/Time:	August 16, 2018 - 11:00 AM					
Return Date/Time:	August 16, 2018 - 1:00 PM					
Approval to Travel	<input checked="" type="checkbox"/> <i>[Signature]</i>					Date: August 16/18
Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km	86	0	0	0	0	37.97
Accommodation: Direct Bill						
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
Total Amount Being Claimed						37.97

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

No formal agenda. Meeting notes confidential.

All claims are to be submitted not later than 30 days after return.	
Claimant Signature:	<i>[Signature]</i>
Date:	Aug 20/18
Travel Approved by Supervisor:	<input checked="" type="checkbox"/> <i>[Signature]</i>
GL Code:	10-242-3070-242110

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

1435
3

SCHEDULE "B"



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

OF THE COUNTY OF RICHMOND	MUNICIPALITY TRAVEL
EXPENSE CLAIM	

Name of Claimant:	Chris Boudreau
Destination:	Whycocomagh Fire Hall - 9519 Trans-Canada Highway
Purpose of Travel:	Community Engagement Session
Departure Date/Time:	August 9, 2018 - 11:00 AM
Return Date/Time:	August 9, 2018 - 1:00 PM
Approval to Travel	x Date: July 23, 2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km	162	0	0	0	0	71.52
Accommodation: Direct Bill 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
Total Amount Being Claimed						71.52

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:	09-Aug-18
Travel Approved by Supervisor:	
GL Code:	10-242-3070-242110

Goods Rec'd. Date.....	Initial.....	<u>D</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.....	10 242 3070 242110	

MS/ 3

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Develop Nova Scotia

Jennifer Angel, President and CEO of Develop Nova Scotia, invites you to participate in a community engagement session to learn more about the vision for Develop Nova Scotia as well as an update and discussion on the provincial rural internet strategy.

Please see below a schedule of events. Kindly RSVP at rsvp.atlantic@national.ca with the specific event location you will attend.

Schedule of events:

Antigonish St. FX Charles Keating Centre - 1100 Convocation Boulevard

Wednesday, August 8th, 11:00 am – 1:00 pm

Whycocomagh Fire Hall - 9519 Trans-Canada Hwy

Thursday, August 9th, 11:00 am – 1:00 pm

Yarmouth Mariner's Centre

Tuesday, August 14th, 11:00 am – 1:00 pm

Kentville NSCC - 236 Belcher Street

Wednesday, August 15th, 11:00 am – 1:00 pm

Lunenburg Fire Hall – 25 Medway Street

Thursday, August 16th, 11:00 am – 1:00 pm

Truro NSCC - 36 Arthur Street

Tuesday, August 21st, 11:00 am – 1:00 pm

NSCC Ivany Campus – 80 Mawiomi Place, Dartmouth

Wednesday, August 22nd, 11:00 am – 1:00 pm

R S V P

Light lunch will be provided. We look forward to seeing you.

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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:	Moncton, NB
Purpose of Travel:	2018 Atlantic Asset Management Conference
Departure Date/Time:	September 5, 2018 - 5:00 PM
Return Date/Time:	September 7, 2018 - 5:00 PM
Approval to Travel	<i>[Signature]</i> Date: April 6/2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km ↓	383.0	0	383.0	0	0	\$ 338.19
Accommodation: Direct Bill Hotel Name: <i>Crowne Plaza</i> <small>(Indicate if Direct Bill or Provide Receipt)</small>						160.35
Meals: Breakfast \$20	/	/	/			0.00
Lunch \$25	/	/	/			0.00
Dinner \$30	/	30	/			\$ 30.00
Other Meals (Receipts Required)						0.00
Incidentals (\$10 per overnight stay)	10	10				\$ 20.00
Taxi/Parking/Tolls (Receipts Required)	4.00		4.00			\$ 8.00
Total Amount Being Claimed						\$ 556.54

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:	<i>Chris Boudreau</i>
Date:	<i>Sept 10, 2018</i>
Travel Approved by Supervisor:	<i>[Signature]</i>
GL Code:	<i>10.242.3070.242110</i>

2018 ATLANTIC ASSET MANAGEMENT CONFERENCE | September 6 -7, Moncton, New Brunswick

Shared challenges, shared solutions



THURSDAY, SEPTEMBER 6TH		FRIDAY, SEPTEMBER 7TH	
Time	Topic / Activity	Topic / Activity	Location
8:00	Registration and Breakfast - Sponsored by Hatch, (Kent Room)	Stream 1 (Westmorland Room)	Stream 2 (Carleton Room)
8:30	Opening Remarks: Daisy Foster, Managing Director & Janet Bradshaw, Chair AIM Network; Greg Turner, Deputy Mayor, City of Moncton	Breakfast - sponsored by CBCL Limited (Kent Room)	
8:50	Municipal Infrastructure: Infrastructure Canada Approaches & Perspectives Maurice Poulin, Manager, Program Integration Infrastructure Canada	Climate Change and Asset Management Valuing Natural Assets: James Bornemann MNAI, Smart Prosperity Institute & SE Regional Service Commission NB Asset Management Climate Change Considerations: Jeff Hoyt, Ex. Dir. NB Climate Change Secretariat Sea Level Rise, Iles de la Madeleine: Serge Bourgeois, Director of Land and Urban Planning Assessing Vulnerability & Climate Change Impacts: Youssef Habboush, Program Engineer, HRM Protecting our Town Assets - Dykes and More: Dwayne Acton, Town Engineer, Sackville, NB Panel Discussion - Q & A	
9:10	Municipal Asset Management Program (MAIMP) Kate Fleming Project Director, MAIMP, Federation of Canadian Municipalities		
9:30	Provincial Approaches to Municipal Asset Management: Alex Dalzell, Province of PEI, Jennifer Duncan, Province of NS, Scott Lloy, Province of NB		
10:30	Nutrition Break - Sponsored by Crandall Engineering	Nutrition Break - Sponsored by TransAqua	
11:00	Road Assets for a Municipality: Where to Start? Edmonton Case Study: Daniel Arseneault, GIS Coordinator, City of Edmonton	Small Community Collaboration in NL Neil Daws, Tract Consulting, Andre Vandenberg, LandInfo Technologies, Tanya Osmond, Wopay Point, NL	Managing Assets - Before, During & After Emergencies Doug Macdonald, Rothesay, NB, Scott Hatcher, Town of Sussex, NB, Dylan Heide, Town of Shelburne, NS, Mike Carr, City of Saint John, NB,
11:30	Keeping up With Your Infrastructure Data: Ian Tennant, Hatch	The Asset Management Journey for the City of Moncton's Linear Assets René Lagacé, Project Engineer, City of Moncton	
12:00	Lunch Sponsored by Lucyty (Kent Room)	Lunch Sponsored by Dillon Consulting (Kent Room)	
1:00	Workshop: Transitioning from Data to Decision-making Thara Van den Berg, LandInfo Technologies & Matt Delorme, Hatch	Facilitated Round-table Discussions Asset Management Topics	Facilitated Round-table Discussions Asset Management Topics
3:00	Nutrition Break - Sponsored by LandInfo Technologies		
3:30	Our Asset Management Journey: Samir Yammine, City of Saint John	Facilitated Round-table Discussions Asset Management Topics	
4:00	Risk Assessment & Climate Change: Town of Grand Bay Westfield Darla Campbell, Dillon Engineering	Facilitated Round-table Discussions Asset Management Topics	
4:30	Implementing Asset Management at Town of Stratford, PEI Robert Hughes, CAO	Facilitated Round-table Discussions Asset Management Topics	
Closing Remarks: Daisy Foster, AIM Network			

Lucyty
canada

Watson
& Associates

New Brunswick

assecic

CBCL HATCH

TransAqua

MONCTON

DILLON
CONSULTING

LandInfo
Technologies Inc



CROWNE PLAZA®

MONCTON DOWNTOWN

9

09-06-18

Chris Boudreau 619 Capland Rd D-Escousse B0E-1K0 Canada	Folio No. :		Room No. : 217
	A/R Number. :		Arrival : 09-05-18
	Group Code : R4H		Departure : 09-06-18
	Company : AIM Network Conference		Conf. No. : 23386184
	Membership No. : PC 256499477		Rate Code :
	Invoice No. :		Page No. : 1 of 1

Date	Description	Charges	Credits
09-05-18	*Accommodation	129.00	
09-05-18	HST Tax	19.35	
09-05-18	Parking	12.00	
09-06-18	MasterCard XXXXXXXXXXXXXXX8286		160.35
		Total	160.35
		Balance	0.00

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Guest Signature: _____

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.

Goods Rec'd. Date	Initial CB
Prices Checked	
Add. & Ext. Checked	
Approval for Payment	
Discount Date	
Paid by Cheque No. 10242307024210	
Distribution Acc't. No.	

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
07/09/2018 13:49:10 246476 1
COB-LT06
9704



051825013491024647600013000006

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
05/09/2018 20:20:31 117034 1
COB-LA01
9719



051824820203111703400014000004



CHEQUE PAYMENT FORM

Name of Event: Atlantic Asset Management Conference

Municipality/Company or Employer's Name:

Contact for this Registration:

Name: Chris Boudreau
 Email: cboudreau@richmondcounty.ca Phone: 902-226-3988
 Mailing Address: 2357 Highway 200e, Arichat, NS, B0E 1A0
P.O. Box 120

List Names of All Registrants including on this payment:

1. Chris Boudreau
2. _____
3. _____
4. _____
5. _____
6. _____

Goods Rec'd. Date.....	Initial.....	<u>CB</u>
Prices Checked.....		<u>0</u>
Add. & Ext. Checked.....		<u>0</u>
Approval for Payment.....		<u>0</u>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No.....		<u>10242307024211</u>

HST
3

Amount of Cheque Enclosed: _____

Terms and Conditions:

- Registration is only confirmed when full payment is received before the event.
- Cancellation/Refund Policy: Substitutions accepted at any time; For Cancellations received up to 7 days prior to event - Full Registration Fee less \$50 administration fee will be refunded; For Cancellations received less than 7 days prior to event: No refund.
- Cheques are payable to: Atlantic Infrastructure Management Network
- Mailing Address: 204 Shore Drive, Conquerall Bank, NS B4V 0J1.
- For events with an early registration fee, only registrations and payments received prior to the specified cut-off date, will receive the reduced rate.

I accept the terms and conditions

Official Receipt Required: Yes No

Note: Receipts requested will be sent by email following the event.

Signature: Chris Boudreau Print Name: Chris Boudreau

For additional information about this event please go to www.aimnetwork.ca or email: info@aimnetwork.ca

Attendee No 2

Attendee No 2: Attending what day?

Select a day

Attendee No 3

Attendee No 3: Attending what day?

Select a day

Attendee No 4

Attendee No 4: Attending what day?

Select a day

Attendee No 5

Attendee No 5: Attending what day?

Select a day

Attendee No 6

Attendee No 6: Attending what day?

Select a day

Required

- I accept the terms and conditions

Order

Product	Qty	Unit Price	Price
Attendants ()	1	CAD\$ 0.00 CAD	CAD\$ 0.00 CAD
Attendants (1 Person)	1	CAD\$ 661.25 CAD	CAD\$ 661.25 CAD
Total:			CAD\$ 661.25 CAD



Registration and Payment by Cheque Confirmation
info@aimnetwork.ca

to:
caboudreau
30/07/2018 08:37 AM

Hide Details

From: "info@aimnetwork.ca" <info@aimnetwork.ca>

To: caboudreau@richmondcounty.ca

Please respond to info@aimnetwork.ca

Security:

To ensure privacy, images from remote sites were prevented from downloading. Show Images

aimlogo

Your Registration was Successful!

Please forward a copy of this email to all attendees listed below.

Thank you for Registering for:

Atlantic Asset Management Conference

Note: Please Download the Cheque Payment Form [here](#), and attach completed form to cheque. Payment instructions are included on the Cheque Payment Form.

First Name and Last Name

Chris Boudreau

Email Address

caboudreau@richmondcounty.ca

Phone Number

(902) 226-3988

Municipality or Organization

Municipality of the County of Richmond

Job title

Director of Public Works / Municipal Engineer

Attending what day?

Both Days

SCHEDULE "B"



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

EXPENSE CLAIM						MUNICIPALITY TRAVEL
OF THE COUNTY OF RICHMOND						
Name of Claimant:	Chris Boudreau					
Destination:	Sydney, Nova Scotia					
Purpose of Travel:	ACWWA Annual Conference					
Departure Date/Time:	September 17, 2018 - 6:00 AM					
Return Date/Time:	September 17, 2018 - 6:00 PM					
Approval to Travel						Date: June 26/2018
Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km	242.0	0	0	0	0	\$ 106.84 0.00
Accommodation: Direct Bill						
Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						0.00
Meals: Breakfast \$20	/					0.00
Lunch \$25	/					0.00
Dinner \$30	30					\$ 30.00 0.00
Other Meals (Receipts Required)						0.00
Incidentals (\$10 per overnight stay)						0.00
Taxi/Parking/Tolls (Receipts Required)						0.00
Total Amount Being Claimed						\$ 136.84 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 CB N/A

All claims are to be submitted not later than 30 days after return.	
Claimant Signature:	
Date:	Sept 18, 2018
Travel Approved by Supervisor:	
GL Code:	10-242-3070-242110

Goods Rec'd. Date.....	Initial.....	CB
Prices Checked.....		CB
Add. & Ext. Checked.....		CB
Approval for Payment.....		CB
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. 10-242-3070-242110		HSR 3

Conference Highlights

DAY 1 9.16.18 SUNDAY

- 10:00 am - 03:30 pm** ABEA Golf Tournament at The Lakes Golf Club
- 01:00 pm - 03:00 pm** Technical Tour - 'Turning the Tides on the Tar Ponds'
- 01:00 pm - 04:30 pm** Young Professionals Technical Session
- 05:00 pm - 07:00 pm** Young Professionals Mixer
Membertou Trade and Convention Centre
- 07:30 pm - 10:00 pm** Meet & Greet Reception,
including Water Tower Building Competition

DAY 2 9.17.18 MONDAY

- 07:30 am - 08:30 am** Pick up breakfast
- 08:30 am - 10:00 am** Conference Opening, including Awards Ceremony
and Keynote Speaker Jeremy White
- 09:30 am** Companions Program - meet in Membertou Trade
and Convention Centre reception area
- 10:00 am - 12:00 pm** ABEA Annual General Meeting
- 10:15 am - 11:45 am** Technical Sessions
- 12:00 pm - 01:30 pm** ACWWA Annual General Meeting Luncheon
- 01:30 pm - 04:45 pm** Technical Sessions
- 05:00 pm - 06:00 pm** Water for People 5km Fun Run/Walk
- 06:00 pm - 09:00 pm** Dine on your own - Enjoy all that Sydney has to offer
- 06:00 pm - 09:00 pm** CB Tavern Tour -
The Old Triangle/Crown & Moose/Governors
- 09:00 pm - 01:00 am** ABEA Hospitality Night at The Big Fiddle
with the Andrew Doyle Band

DAY 3 9.18.18 TUESDAY

- 07:45 am - 09:00 am** Awards Breakfast
- 09:15 am - 10:00 am** 'Best of the Best' Water Taste Test
- 10:00 am - 02:00 pm** ACWWA/ABEA Tradeshow
- 02:00 pm - 05:15 pm** Technical Sessions
- 06:30 pm** Down East Feast and Entertainment



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

NAME: Chris Boudreau

PERIOD COVERED: September 1, 2018 to September 31, 2018

DATE:	PARTICULARS:	MILEAGE (KM):	OTHER EXPENSES:
18-Sep-18	Home to Arichat and return for Strategic Planning - Arichat	28	
20-Sep-18	Home to Arichat to pick up meeting supplies and to Strategic Planning in Louisdale and return	57	
24-Sep-18	Home to Arichat and return for Regular Council Meeting	28	
26-Sep-18	Travel to St. Peter's for strategic planning session.	72	
27-Sep-18	Travel to River Bourgeois for strategic planning session.	64	

Goods Rec'd. Date..... Initial.....
 Prices Checked.....
 Add. & Ext. Checked.....
 Approval for Payment.....
 Discount Date.....
 Paid by Cheque No. 10242 3070 242110
 Distribution: Acc't. No.

Totals: 249.00 \$0.00
 Rate: \$0.4415
 Total Mileage (\$): \$109.93

Total Expenses Claimed: \$109.93

ACCOUNT #:	10-242-3070-242110	CHEQUE #:	
SIGNATURE:	<i>Chris Boudreau</i>	AMOUNT:	
APPROVED:	<i>[Signature]</i>	DATE PAID:	
DATE SUBMITTED:		INITIAL:	

SCHEDULE "B"



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

OF THE COUNTY OF RICHMOND	MUNICIPALITY TRAVEL
EXPENSE CLAIM	

Name of Claimant:	Chris Boudreau
Destination:	Cheticamp, Nova Scotia
Purpose of Travel:	Tour of Cape Breton Communities to investigate Tourism / Economic Dev.
Departure Date/Time:	September 21, 2018 - 6:45 AM
Return Date/Time:	September 21, 2018 - 4:00 PM
Approval to Travel	<input checked="" type="checkbox"/> <i>[Signature]</i> Date: <u>Sept 20/18</u>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km	376	0	0	0	0	166.00
Accommodation: Direct Bill Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						0.00
Meals: Breakfast \$20	20					20.00
Lunch \$25	25					25.00
Dinner \$30	0					0.00
Other Meals (Receipts Required)						0.00
Incidentals (\$10 per overnight stay)						0.00
Taxi/Parking/Tolls (Receipts Required)						0.00
Total Amount Being Claimed						211.00

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

All claims are to be submitted not later than 30 days after return.	
Claimant Signature:	<i>Chris Boudreau</i>
Date:	<u>Sept 25/18</u>
Travel Approved by Supervisor:	<input checked="" type="checkbox"/> <i>[Signature]</i>
GL Code:	10-242-3070-242110

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



THE MUNICIPALITY
OF THE COUNTY OF

LA MUNICIPALITÉ
DU COMTÉ DE

RICHMOND

Tourism Field Trip and Research August-September 2018

Purpose: To travel/explore a designated route within Cape Breton to determine the extent of tourism offerings, innovative tourism related infrastructure and activities as well as economic development activity.

Research: Discovering and recording (notes/photos);

- tourism best practices
- unique concepts that can be replicated in Richmond
- distinctive retail – displays/merchandizing techniques, locations, décor, products
- roadside signage (directional, destination, color schemes, unique format/design
- new ideas which can add value to existing Richmond retail businesses and/or the tourism sector in Richmond County.

Route #1: From Arichat to Baddeck, St. Ann's, Ingonish, and return to Arichat.
(2hrs. 55 min; 222km).

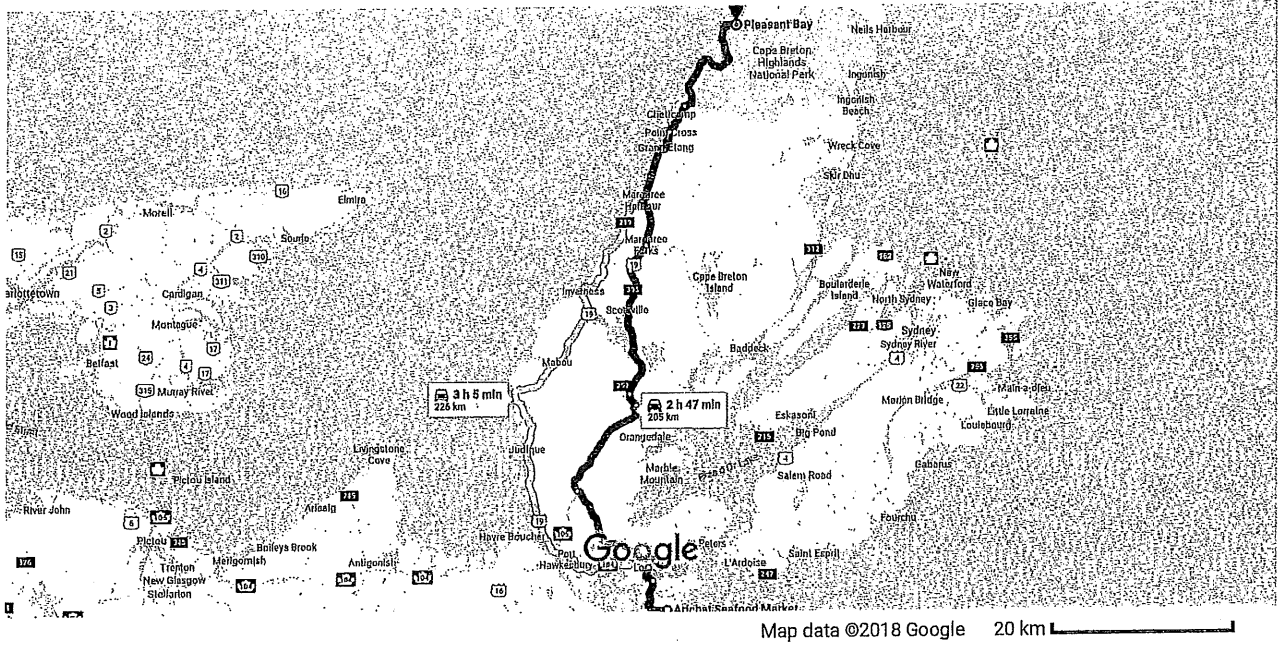
Route #2: From Arichat to Port Hood, Inverness, Margaree Harbour, Cheticamp, Pleasant Bay and return to Arichat. (3hrs. 5 min; 226km)

- The field trips will be conducted between August 1st and September 14th, 2018.
- The final report will consist of photos and bullet points regarding findings.
- The final report (power point) to the Executive Team will be on September 26th.
- All related expenses will be covered by the municipality.

Google Maps

Arichat Seafood Market to Pleasant Bay, NS

Drive 205 km, 2 h 47 min



via Cabot Trail
Fastest route

2 h 47 min
205 km

via Nova Scotia Trunk 19 N and Cabot Trail

3 h 5 min
226 km



TRAVEL EXPENSE CLAIM Rate **\$0.4415**

Name of Claimant:	Ronalda Boudreau
Destination:	Port Hawkesbury, NS
Purpose of Travel:	To purchase supplies at Dollarama for Summer Program
Departure Date/Time:	August 1, 2018/11:00 AM
Return Date/Time:	August 1, 2018/1:30 PM

Approval to Travel Date: July 26, 2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): 84.00	84.00					84.00
Total Cost of Mileage: \$37.09	\$37.09	\$0.00	\$0.00	\$0.00	\$0.00	\$37.09
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
Total Amount Being Claimed	\$37.09	\$0.00	\$0.00	\$0.00	\$0.00	\$37.09

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%

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

Needed to purchase supplies for Pop Recreation program

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

Claimant Signature: Ronalda Boudreau

Date Submitted: Aug 1 / 18

Travel Approved by Supervisor: 10 270 4120 270180

GL Code:

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>10 270 4120 270180</u>		<u>0</u>



TRAVEL EXPENSE CLAIM

Rate **\$0.4415**

Name of Claimant:	Yvonne Boudreau
Destination:	Baddeck
Purpose of Travel:	AMA Conference Planning Committee
Departure Date/Time:	11:30 AM - August 29th
Return Date/Time:	5:00 PM - August 29th
Approval to Travel	<i>[Signature]</i> Date: <i>Aug. 28/2018</i>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): 240.00	240.00					240.00
Total Cost of Mileage: \$105.96	\$105.96	\$0.00	\$0.00	\$0.00	\$0.00	\$105.96
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
Total Amount Being Claimed	\$105.96	\$0.00	\$0.00	\$0.00	\$0.00	\$105.96

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: *August 30/18*

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>10212 2120 212130</i>		

HSR 3



AMANS Fall Conference Committee Meeting Agenda

Thursday August 30th, 2018
1:00PM – 2:30 PM

Glasgow Meeting Room 1 – Inverary Inn

Don't think there's teleconferencing available (due to Inverary Fire)

1. Welcome

2. Baddeck Lobster Suppers

Has cancelled our event, due to an unforeseen supply issue at that time. We could explore an alternative at the Yacht Club, or a seafood dinner at the Inverary. People have already begun paying for this event. We would need to make sure people who are on the sailing tour can still access the meal, which would have to be around 6 / 6:30.

3. Programming Updates

a. Addressing the Housing Shortage

We will be joined by Dan McDougall and Stephan Richard from Housing NS, Colleen Cameron from Antigonish Housing Society and Patrick Austin from Cape Breton Partnership.

b. Managing Your Message now Accessibility Framework

Ian McNeill was no longer able to present due to starting a new career in the city. A plenary session around Accessibility was thought to be a better alternative for folks. Gerry Post, Executive Director with the Province will be joining us for an update on the Accessibility Framework.

c. Awareness and Importance of Eating Local

Finally heard from Jeremy White, last week, he is not able to attend. Have a call out to the Cape Breton Brewery and will follow up with them about their attendance. The girl who took the message seemed interested but couldn't confirm their attendance.

d. Unconscious Bias in the Workplace

We wanted Awareness and Importance of Eating Local to be a plenary because of Jeremy, because he was not able to join us we thought the topic Of

unconscious bias would be a good fit. We'll be joined by Barbara Miller-Nix and Anne Divine who have been speaking on this topic for a number of years

e. Managing Your Message

Spoke with Rob Batherson, communications person for Jon Hamm. He would be willing to deliver on engaging media, protocols to communication and getting your message out, along with things to include in a communication's policy. Could run concurrently on Friday morning.

f. Kitchen Party Crawl

CBRM was unable to get a room secluded / cottage and weren't able to get cottages from elsewhere. Did we want to look at adding this after the supper on Wednesday?

g. Provincial Update

4. Sponsorship Update

5. Registration Update

6. Volunteers

a. Early Bird Draws

Just have to call out names of winners in amp & mic. We will have the Early Bird Prizes organized at the station prior to you arriving.

b. Registration

There will be registration on 3 days (Tuesday night, Wednesday Morning and Thursday Morning). All we'll have to do is provide them with the big program that may contain coupons / papers from the sponsors.

c. Chair Sessions

We will write all chair notes prior to the session. These will include bios and session logistics. Copies will be provided to you prior to the session. Speaking in front of a crowd will be required, and keeping the session on time. A moderation of Q & A may also be required.

7. Speaker Gifts

That's a Wrap!



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, Ross Screen Print
Purpose of Travel:	Product drop off and pick up
Departure Date/Time:	7:15 AM <u>Sept 12/18</u>
Return Date/Time:	January 0, 1900 <u>Sept 12/18 11am</u>
Approval to Travel	<u>[Signature]</u> Date: <u>Sept. 10/2018</u>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	208.00	208.00				208.00
Total Cost of Mileage:	\$91.83	\$0.00	\$0.00	\$0.00	\$0.00	\$91.83
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
Total Amount Being Claimed	\$91.83	\$0.00	\$0.00	\$0.00	\$0.00	\$91.83

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 YB

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

Claimant Signature: Yvonne Boudreau

Date Submitted: Sept 12/18

Travel Approved by Supervisor: [Signature]

GL Code:

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>10.212.2120.212130</u>		



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:	Baddeck, St. Ann's, Ingonish
Purpose of Travel:	Tourism Assessment and Analysis
Departure Date/Time:	20/09/2018 8:30 am
Return Date/Time:	20/09/2018 7:00:00 PM - 7:00 PM

Approval to Travel *[Signature]* Date: September 10/18

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): 470.00	470.00					470.00
Total Cost of Mileage: \$207.51	\$207.51	\$0.00	\$0.00	\$0.00	\$0.00	\$207.51
Accommodation/Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						\$0.00
Meals: Breakfast \$20						\$0.00
Lunch \$25	\$25.00					\$25.00
Dinner \$30	\$30.00					\$30.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)						\$0.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
Total Amount Being Claimed	\$262.51	\$0.00	\$0.00	\$0.00	\$0.00	\$262.51

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

No agenda. (Visited various locations) Report to follow.

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

Claimant Signature: *[Signature]*

Date Submitted: Sept 21/18

Travel Approved by Supervisor: *[Signature]*

GL Code:

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 21 2 21 20 21 21</u>		<u>30</u>



THE MUNICIPALITY
OF THE COUNTY OF

LA MUNICIPALITÉ
DU COMTÉ DE

RICHMOND

Tourism Field Trip and Research August-September 2018

Purpose: To travel/explore a designated route within Cape Breton to determine the extent of tourism offerings, innovative tourism related infrastructure and activities as well as economic development activity.

Research: Discovering and recording (notes/photos);

- tourism best practices
- unique concepts that can be replicated in Richmond
- distinctive retail – displays/merchandizing techniques, locations, décor, products
- roadside signage (directional, destination, color schemes, unique format/design)
- new ideas which can add value to existing Richmond retail businesses and/or the tourism sector in Richmond County.

Route #1: From Arichat to Baddeck, St. Ann's, Ingonish, and return to Arichat.
(2hrs. 55 min; 222km).

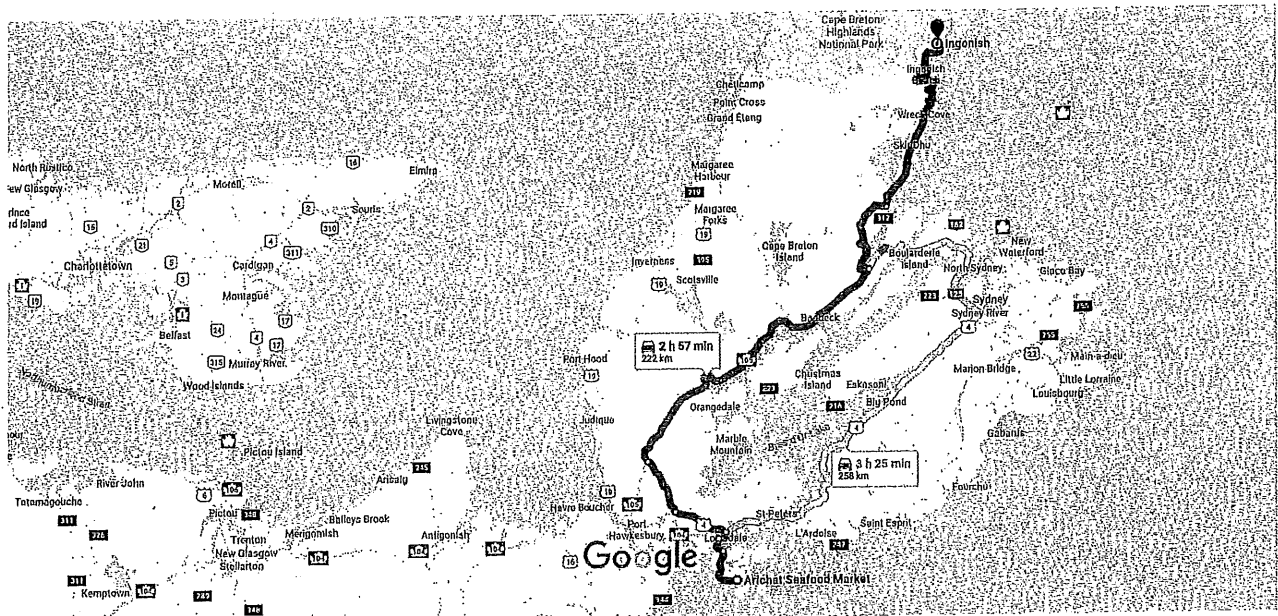
Route #2: From Arichat to Port Hood, Inverness, Margaree Harbour, Cheticamp, Pleasant Bay and return to Arichat. (3hrs. 5 min; 226km)

- The field trips will be conducted between August 1st and September 14th, 2018.
- The final report will consist of photos and bullet points regarding findings.
- The final report (power point) to the Executive Team will be on September 26th.
- All related expenses will be covered by the municipality.

Google Maps

Arichat Seafood Market to Ingonish, NS

Drive 222 km, 2 h 57 min



Map data ©2018 Google

20 km

via Trans-Canada Hwy/NS-105 E and Cabot Trail
Fastest route

2 h 57 min
222 km

via NS-4 E and Cabot Trail

3 h 25 min
258 km



TRAVEL EXPENSE CLAIM Rate **\$0.4415**

Name of Claimant:	JAMES COYEICHÉ
Destination:	ANTIGONISH
Purpose of Travel:	MTSU DEVELOP NOVA SCOTIA
Departure Date/Time:	9:30 AM August 8 th /2018
Return Date/Time:	4 PM August 8 th /2018
Approval to Travel	<i>[Signature]</i> Date: Aug. 3/2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	0.00					0.00
Total Cost of Mileage:	\$0.00					\$0.00
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
Total Amount Being Claimed	\$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 _____

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

Claimant Signature: _____

Date Submitted: _____

Travel Approved by Supervisor: _____

GL Code: _____



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

TRAVEL EXPENSE CLAIM Rate **\$0.4415**

Name of Claimant:	JAMES GOYETCHE	
Destination:	ANTIGONISH	
Purpose of Travel:	Meeting re: DEVELOP NOVA SCOTIA	
Departure Date/Time:	9:30 AM August 8 th / 2018	
Return Date/Time:	4 PM August 8 th / 2018	
Approval to Travel	Brian Marchand	Date: July 31-2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	0.00	220 Km				220 Km
Total Cost of Mileage:	\$97.13	\$0.00	\$0.00	\$0.00	\$0.00	\$97.13
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
Total Amount Being Claimed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$97.13

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%

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

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

Claimant Signature: James Goyetche

Date Submitted: August 9th 2018

Travel Approved by Supervisor: Brian Marchand

GL Code: _____

Goods Rec'd, Date.....	Initial.....	0
Prices Checked.....		0
Add. & Ext. Checked.....		0
Approval for Payment.....		0
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No.....	10.210.210.210.130	



Jennifer Angel, President and CEO of Develop Nova Scotia, invites you to participate in a community engagement session to learn more about the vision for Develop Nova Scotia as well as an update and discussion on the provincial rural internet strategy.

Please see below a schedule of events. Kindly RSVP at rsvp.atlantic@national.ca with the specific event location you will attend.

Schedule of events:

Antigonish St. FX Charles Keating Centre - 1100 Convocation Boulevard →

Wednesday, August 8th, 11:00 am – 1:00 pm

Whycocomagh Fire Hall - 9519 Trans-Canada Hwy
Thursday, August 9th, 11:00 am – 1:00 pm

Yarmouth Mariner's Centre
Tuesday, August 14th, 11:00 am – 1:00 pm

Kentville NSCC - 236 Belcher Street
Wednesday, August 15th, 11:00 am – 1:00 pm

Lunenburg Fire Hall – 25 Medway Street
Thursday, August 16th, 11:00 am – 1:00 pm

Truro NSCC - 36 Arthur Street
Tuesday, August 21st, 11:00 am – 1:00 pm

NSCC Ivany Campus – 80 Mawioni Place, Dartmouth
Wednesday, August 22nd, 11:00 am – 1:00 pm

James will attend

Municipality of the County of Richmond - August 2018		
Meetings Held:		10 km
Date:	Meeting:	James Goyetche
August-01-18	Special Council	1
August-29-18	Special Council	1
<i>James Goyetche</i>		
Total # of Meetings Attended:		2
x kms/trip (return):		10
Total Mileage (kms):		20
Rate		0.4415
Total Owed		<u>\$8.83</u>

K. Goyetche

Goods Rec'd. Date.....	Initial.....	A
Prices Checked.....		A
Add. & Ext. Checked.....		A
Approval for Payment.....		A - 155 3
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't, No.....	10 210 2110 2101	30



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

TRAVEL EXPENSE CLAIM

Rate **\$0.4415**

Name of Claimant:	Kent MacIntyre
Destination:	Civic Centre – Port Hawkesbury
Purpose of Travel:	Meet Dalhousie University
Departure Date/Time:	2018-08-14
Return Date/Time:	August 14, 2018

Approval to Travel *Brian Marchand* Date: *Aug 13-2018*

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): 87.00						
Total Cost of Mileage: \$0.44		\$0.00	\$0.00	\$0.00	\$0.00	\$38.41
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
Total Amount Being Claimed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$38.41

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 _____

No agenda - Discussion + round table

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

Claimant Signature: *K MacIntyre*
Date Submitted: *August 15/2018*
Travel Approved by Supervisor: *Brian Marchand*
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 212130</i>		

HSR
3



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

TRAVEL EXPENSE CLAIM

Rate **\$0.4415**

Name of Claimant:	Kent MacIntyre
Destination:	Sydney, Nova Scotia
Purpose of Travel:	Meet Strategic Planning Writer
Departure Date/Time:	2018-09-11
Return Date/Time:	September 11, 2018

Approval to Travel Grian Marchand Date: Sept 11/2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	244.00	244.00				244.00
Total Cost of Mileage:	\$0.44	\$107.73	\$0.00	\$0.00	\$0.00	\$107.73
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
Total Amount Being Claimed	\$107.73	\$0.00	\$0.00	\$0.00	\$0.00	\$107.73

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 [Signature] N/A _____

No Agenda

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

Claimant Signature: [Signature]
 Date Submitted: September 24/2018
 Travel Approved by Supervisor: Grian Marchand
 GL Code: _____

Goods Rec'd. Date.....	Initial.....	<u>0</u>
Prices Checked.....		<u>0</u>
Add. & Ext. Checked.....		<u>0</u>
Approval for Payment.....		<u>0</u>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <u>10</u>	<u>212</u>	<u>2120</u> <u>2121</u> <u>30</u>

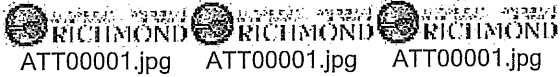


Re: Permission

Brian to: kmacintyre@richmondcounty.ca

2018-09-11 12:12 AM

3 attachments



Yes

Thanks.

Brian

On Sep 10, 2018, at 10:24 PM, "kmacintyre@richmondcounty.ca" <kmacintyre@richmondcounty.ca> wrote:

Warden;

Permission to attend meeting with potential "strategic planning" writer in Sydney, September 11, 2018.

Regards;

Kent MacIntyre
Chief Administrative Officer
Municipality of the County of Richmond
2357 Hwy 206
Arichat, NS
B0E 1A0
902-226-3970
<mime-attachment.jpg>



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

TRAVEL EXPENSE CLAIM

Rate **\$0.4415**

Name of Claimant:	Kent MacIntyre
Destination:	Municipality of the District of St. Mary's – Municipal Office
Purpose of Travel:	CAO – Regional Meeting
Departure Date/Time:	2018-09-21
Return Date/Time:	September 21, 2018

Approval to Travel Brian Marchand Date: Sept 21/2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	302.00	302.00				302.00
Total Cost of Mileage:	\$0.44	\$133.33	\$0.00	\$0.00	\$0.00	\$133.33
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
Total Amount Being Claimed	\$133.33	\$0.00	\$0.00	\$0.00	\$0.00	\$133.33

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 [Signature] N/A _____

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

Claimant Signature: Kent MacIntyre
 Date Submitted: September 24/2018
 Travel Approved by Supervisor: Brian Marchand
 GL Code: _____

Goods Rec'd. Date.....	Initial.....	<u>[Signature]</u>
Prices Checked.....		<u>[Signature]</u>
Add. & Ext. Checked.....		<u>[Signature]</u>
Approval for Payment.....		<u>[Signature]</u>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <u>10 212 2120 212</u>		<u>130</u>



Re: Permission
Brian to: kmacintyre@richmondcounty.ca

2018-09-21 07:46 AM

Yes, permission to go.

Thanks.

Brian

> On Sep 20, 2018, at 11:06 PM, "kmacintyre@richmondcounty.ca"
<kmacintyre@richmondcounty.ca> wrote:
>
>
> Warden;
>
> Permission for travel;
> CAO Meeting at Saint Mary's municipal office on Friday, September 21st.
>
> Kent
>
> Sent from my iPhone

--

If this email is spam, please report it to
https://support.onlymyemail.com/view/report_spam/MjgwNzY1OjIxMjMwMjEzMTg6a2lhY2ludHlyZUByaWNobW9uZGNvdW50eS5jYTpkZWxpdmVyZWQ



RE: Strait CAO Meeting
Marvin MacDonald to: Keith MacDonald, Glenn Horne, Leanne MacEachen, Terry Doyle, kmacintyre@richmondcounty.ca, Jim Davis, jlawrence@townofantigonish.ca, Barry Carroll 2018-09-20 09:46 AM
From: "Marvin MacDonald" <marvin.macdonald@saint-marys.ca>
To: "Keith MacDonald" <keith.macdonald@invernesscounty.ca>, "Glenn Horne" <glenn.horne@antigonishcounty.ns.ca>, "Leanne MacEachen" <leanne.maceachen@countyvictoria.ns.ca>, "Terry Doyle" <tdoyle@townofph.ca>, "kmacintyre@richmondcounty.ca" <kmacintyre@richmondcounty.ca>, "Jim Davis" <jim.davis@townofmulgrave.ca>, "jlawrence@townofantigonish.ca" <jlawrence@townofantigonish.ca>, "Barry Carroll" <bcarroll@modg.ca>

Some suggested agenda items for tomorrow's meeting:

- PVSC
- Halifax Roundtable
- EDPC – Development Engineer
- Provincialization.
- ESREN

Additional items as brought forward tomorrow.

Lunch will be provided.

Thanks

Marvin

Marvin MacDonald
Chief Administrative Officer
Municipality of the District of Saint Mary's
902-522-2432 Office
902-328-4109 Cell

From: Marvin MacDonald
Sent: Monday, September 10, 2018 2:26 PM
To: Keith MacDonald <keith.macdonald@invernesscounty.ca>; Glenn Horne <glenn.horne@antigonishcounty.ns.ca>; Leanne MacEachen <leanne.maceachen@countyvictoria.ns.ca>; Terry Doyle <tdoyle@townofph.ca>; kmacintyre@richmondcounty.ca; Jim Davis <jim.davis@townofmulgrave.ca>; jlawrence@townofantigonish.ca; Barry Carroll <bcarroll@modg.ca>
Subject: RE: Strait CAO Meeting

The meeting will be held in the Community Room at the Municipal Building at 8296 Highway 7 Sherbrooke.

Anyone with agenda items please send to me this week.

Thanks

Marvin

Marvin MacDonald
Chief Administrative Officer
Municipality of the District of Saint Mary's



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

TRAVEL EXPENSE CLAIM

Rate **\$0.4415**

Name of Claimant:	Kent MacIntyre
Destination:	Port Hawkesbury Civic centre
Purpose of Travel:	EDPC meeting
Departure Date/Time:	2018-09-27
Return Date/Time:	September 27, 2108

Approval to Travel: Brian Marchand Date: Sept 27/2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): 87.00	87.00					87.00
Total Cost of Mileage: \$0.44	\$38.41	\$0.00	\$0.00	\$0.00	\$0.00	\$38.41
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
Total Amount Being Claimed	\$38.41	\$0.00	\$0.00	\$0.00	\$0.00	\$38.41

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 _____

Attached agenda

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

Claimant Signature: Kent MacIntyre

Date Submitted: Sept. 27/2018

Travel Approved by Supervisor: Brian Marchand

GL Code: _____

Goods Rec'd. Date.....	Initial.....	<u>0</u>
Prices Checked.....		<u>0</u>
Add. & Ext. Checked.....		<u>0</u>
Approval for Payment.....		<u>0</u>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <u>10.212.2120.2121</u>		<u>30</u>



Eastern District Planning Commission

606 Reeves Street, Unit #3, Port Hawkesbury NS B9A 2R7
Ph.: 902-625-5364
Fx.: 902-625-1559
1-888-625-5361

John D. Bain
Director
jdbain@edpc.ca

AGENDA

Thursday, September 27th 2018 at 1:00 p.m.
Civic Centre Board Room – 606 Reeves Street (2nd Floor)

1. Call to Order
2. Appointment of New Vice Chair
3. Items added to the Agenda
4. Review of Minutes: Board Meeting – June 7, 2018
5. Director's Report
6. Correspondence and Documentation
 - a. Joint Press Release
 - b. "What We Heard" – Agricultural Open Houses
 - c. Revised Budget
 - d. Signed Inter-Municipal Agreement
7. Discussion – Items added to the Agenda
8. Next Meeting Date – **November 22, 2018**
9. Adjournment



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

TRAVEL EXPENSE CLAIM

Rate \$0.4415

Name of Claimant:	Kent MacIntyre
Destination:	Port Hawkesbury, Nova Scotia
Purpose of Travel:	Meet Transportation, Infrastructure and Renewal Manager/Staff
Departure Date/Time:	2018-09-13
Return Date/Time:	September 13, 2018

Approval to Travel Brian Marchand Date: Sept 12/2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	83.00					83.00
Total Cost of Mileage:	\$0.44	\$36.64	\$0.00	\$0.00	\$0.00	\$36.64
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
Total Amount Being Claimed	\$36.64	\$0.00	\$0.00	\$0.00	\$0.00	\$36.64

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: [Signature]

Date Submitted: Sept. 24/2018

Travel Approved by Supervisor: Brian Marchand

GL Code: _____

Goods Rec'd. Date.....	Initial.....
Prices Checked.....	
Add. & Ext. Checked.....	
Approval for Payment.....	
Discount Date.....	
Paid by Cheque No.....	
Distribution: Acc't. No. <u>10 212 2120 2121 30</u>	

From: caboudreau@richmondcounty.ca [mailto:caboudreau@richmondcounty.ca]

Sent: August-29-18 2:39 PM

To: Blundon, Darren <Darren.Blundon@novascotia.ca>

Subject: Meeting Request

Hi Darren,

Kent MacIntyre, our new CAO, would like to sit down for a brief meeting for an introduction and to discuss a few projects we have underway as well as areas of common concern. Are there any days in the next week or two where you could spare an hour for a meeting? We could meet at your office.

A few topics (feel free to add any of your concerns to it):

- A brief discussion regarding roads (municipal / provincial / private) and areas of responsibility (not too in depth as this could take a while!);
- Municipality's Highway Signage Project (working with Brian Storrie, TIR, at the moment for 2 new signs at County boundaries and 2 replacements of existing signs);
- Hot topic of late was brush cutting shoulders of roads, though a more general discussion on maintenance would be useful. Maybe a review on winter / summer maintenance, levels of service, and any budgetary pressures or reductions in service that have occurred, or may be anticipated in the near term;
- Upcoming projects that would be of interest to TIR as a stakeholder (new road in Lennox Passage Industrial Park, sidewalks in Arichat);

Please let me know if you have any time available.

Thanks,

Chris



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

TRAVEL EXPENSE CLAIM

Rate \$0.4415

Name of Claimant:	Kent MacIntyre
Destination:	Digby Pines – Digby, Nova Scotia
Purpose of Travel:	NS Municipal Affairs – NS REN Conference
Departure Date/Time:	2018-09-05
Return Date/Time:	September 7, 2018

Approval to Travel Brian Marchand Date: June 25 - 2018

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	1030.00	515.00	515.00			1,030.00
Total Cost of Mileage:	\$454.75	\$227.37	\$0.00	\$227.37	\$0.00	\$454.75
Accommodation/Hotel Name:						\$0.00
<i>(Indicate if Direct Bill or Provide Receipt)</i>						
Meals: Breakfast \$20			\$20.00			\$20.00
Lunch \$25	\$25.00		\$25.00			\$50.00
Dinner \$30	\$30.00					\$30.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)	\$10.00	\$10.00				\$20.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
Total Amount Being Claimed	\$292.37	\$10.00	\$272.37	\$0.00	\$0.00	\$574.75

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: Kent MacIntyre
 Date Submitted: Sept. 19/2018
 Travel Approved by Supervisor: Brian Marchand
 GL Code:

Goods Rec'd. Date.....	Initial.....
Prices Checked.....	
Add'l Ext. Checked.....	
Approval for Payment.....	
Discount Date.....	
Paid by Cheque No.....	
Distribution Acct. No. <u>10 212 2120 2121 30</u>	

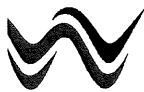
Wednesday, September 5, 2018
Digby Pines Main Lobby

6:30-9:00pm Reception *Sponsored by McSweeney*
Light Hors d'oeuvres
Cash Bar
Local musician

Thursday, September 6, 2018
Digby Hall

7:30am	Registration and Breakfast
8:30am	Opening & Welcome
9:30am	20X20 Presentations
10:30am	Refreshment Break
10:45am	Facilitated Conversations
12:00pm	Networking Lunch
1:15pm	Keynote Speaker
2:00pm	Facilitated Activities
4:00pm	Next Steps
4:30pm	Wrap up

Hosted by:



Western Regional
Enterprise Network

Funded by:


NOVA SCOTIA
NOUVELLE-ÉCOSSE



let the destination reach you.

**Digby Pines Golf Resort & Spa, an
Ascend Hotel Collection Me (CNA66)**

103 Shore Road
Digby, NS B0V 1A0
(902) 245-2511
GM.CNA66@choicehotels.com

Account: 598879240

Date: 9/14/18

Room: R202 GROUP

Arrival Date: 9/5/18

Departure Date: 9/7/18

Check In Time: 9/5/18 6:00 PM

Check Out Time: 9/7/18 9:05 AM

Western Regional Enterprise Network

MacIntyre, Kent

Western Regional Enterprise Network 2018

2357 Highway 206

Arichat, NS B0E1A0

Rewards Program ID:

You were checked out by: lfran1

You were checked in by: dcourt

Total Balance Due: 0.00

Post Date	Description	Comment	Amount
9/5/18	Room Charge	#R202 MacIntyre, Kent	140.00
9/5/18	Harmonized Sales Tax		21.00
9/6/18	Room Charge	#R202 MacIntyre, Kent	140.00
9/6/18	Harmonized Sales Tax		21.00
9/7/18	Direct Bill		(322.00)

Folio Summary 9/5/18 - 9/7/18

Room Charge	280.00
Harmonized Sales Tax	42.00
Direct Bill	(322.00)

Balance Due: 0.00

This rate is not eligible for partner rewards.

GST 125030429 RT0013

(322.00) will be billed to: Account 1746290

Western Regional Enterprise Network, 103 Water Street Box 12,
Yarmouth, NS B6A4P-4



Municipality of the County of Richmond - August 2018		
Meetings Held:		67 kms
Date:	Meeting:	Jason MacLean
August-01-18	Special Council	1
August-29-18	Special Council	1
Total # of Meetings Attended:		2
x kms/trip (return):		67
Total Mileage (kms):		134
Rate		0.4415
Total Owed		\$59.16

Handwritten signature: J. MacLean

Goods Rec'd. Date.....	Initial.....	A
Prices Checked.....	A
Add. & Ext. Checked.....	A
Approval for Payment.....	A
Discount Date.....	
Paid by Cheque No.....	
Distribution: Acc't. No.	10 210 2110 2101	30

155 3

Handwritten signature: Kim [unclear]



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 PHCC
Purpose of Travel:	Meeting with Group to Discuss Affordable Housing
Departure Date/Time:	Aug 28-2018 - 5:00 PM
Return Date/Time:	Aug 28-2018 - 8:00 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)							\$ -
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

Meeting with Celeste, Town of Port Hawkesbury & others to discuss Affordable Housing Conference

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

Claimant Signature:	<i>Brian Marchand</i>
Date:	<i>Sept 24 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>102107100210110</i>		

HST 3

From: kmacintyre@richmondcounty.ca
Subject: Re: Affordable Housing
Date: Aug 27, 2018 at 10:37:36 PM
To: Brian brianmarchand@hotmail.com

Yes.

Kent

Sent from my iPhone

On Aug 27, 2018, at 7:59 PM, Brian <brianmarchand@hotmail.com> wrote:

Requesting permission to attend affordable Housing think tank meeting in Port Hawkesbury on Tuesday Aug 28?

Thanks.

Brian

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If this email is spam, please report it to

https://support.onlymyemail.com/view/report_spam/

[MjgwNzY1OjlxMTc2Mzk1MTg6a21hY2ludHlyZUByaWNobW9uZGNvdW50eS5jYTpkZWxpdmVyZWQ](https://support.onlymyemail.com/view/report_spam/MjgwNzY1OjlxMTc2Mzk1MTg6a21hY2ludHlyZUByaWNobW9uZGNvdW50eS5jYTpkZWxpdmVyZWQ)



MUNICIPALITY OF THE COUNTY OF RICHMOND
 TRAVEL EXPENSE CLAIM

Name of Claimant:	Brian Marchand
Destination:	Baddeck - Inverary Inn
Purpose of Travel:	CB Local Immigration Partnership
Departure Date/Time:	Sept 18-2018 - 7:30 AM
Return Date/Time:	Sept 18-2018 - 2:00 PM
Approval to Travel	<i>attached</i> Date:

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km 236 KM	\$ 104.19					\$ 104.19
Accommodation: Hotel Name: Inverary Inn <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	\$ 129.19	\$ -	\$ -	\$ -	\$ -	\$ 129.19

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: Sept 24 2018

Travel Approved by Supervisor: [Signature]

GL Code: _____

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>10 210 2100 2101</u>		<u>110</u>

From: kmacintyre@richmondcounty.ca
Subject: Re: CBLip
Date: Sep 17, 2018 at 9:16:44 PM
To: Brian brianmarchand@hotmail.com

Yes.

Kent

Sent from my iPhone

On Sep 17, 2018, at 7:38 PM, Brian <brianmarchand@hotmail.com> wrote:

Asking for per mission to attend the CBLip meeting in Baddeck Sept
18-2018?

Thanks.

Brian

--
If this email is spam, please report it to

https://support.onlymyemail.com/view/report_spam/

[MjgwNzY1OjlxMjlxNTgwNTk6a21hY2ludHlyZUByaWNobW9uZGNvdW50eS5jYIpkZWxpdmVyZWQ](https://support.onlymyemail.com/view/report_spam/MjgwNzY1OjlxMjlxNTgwNTk6a21hY2ludHlyZUByaWNobW9uZGNvdW50eS5jYIpkZWxpdmVyZWQ)



**CAPE BRETON
LOCAL IMMIGRATION
PARTNERSHIP
CBLIP Council**

Meeting #5: Strategy Making

September 18, 2018

9:45am – 12:30pm

Inverary Resort, MacAulay Room, Baddeck

Purpose:

For CBLIP Council Members to:

- **Receive updates and provide feedback on CBLIP progress and activities**
- **Review feedback from Community Engagement sessions & Surveys**
- **Receive update on status of CBLIP Strategy**
- **Discuss upcoming Immigration Summit**

Time	Topic
9:45 am	Arrival and Refreshments
10:00 am	Welcome & Check In
10:05 am	Approval of agenda
10:10 am	Administration <ul style="list-style-type: none"> • Introduce new Program Coordinator • Membership Updates • Co-Chair – Call for Nominations • Terms of Reference Revision
10:30 am	Updates from Program Coordinator <ul style="list-style-type: none"> • Immigration Summit, November 15, 2018
10:45 am	Break
11:00 am	Break-out session
11:30 am	Review of Community Engagement & Survey Results
12:00 pm	Strategic Planning Process - Update
12:20 pm	Closing

Funded by:

Financé par :



Immigration, Refugees
and Citizenship Canada

Immigration, Réfugiés
et Citoyenneté Canada





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

TRAVEL EXPENSE CLAIM

Rate **\$0.4415**

Name of Claimant:	Alvin Martell
Destination:	Arichat
Purpose of Travel:	To attend a Special Council Meeting
Departure Date/Time:	Wednesday August: 1 8:00 A.M.
Return Date/Time:	Wednesday August 1 4:00 P.M.
Approve to travel	<i>[Signature]</i> Date: <i>Aug 1 / 2018</i>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	348.00					0.00
Total Cost of Mileage:	\$153.64	\$0.00	\$0.00	\$0.00	\$0.00	\$153.64
Accommodation/Hotel Name:						\$0.00
(Indicate if yes Direct Billing was provided)						
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
Total Amount Being Claimed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$153.64

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%

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

Out of County travel from Pictou to attend a Special Council meeting. Don

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

Claimant Signature: *[Signature]*

Date Submitted: *AUGUST 1, 2018*

Travel Approved by Supervisor: *[Signature]*

GL Code: _____

Goods Rec'd. Date.....	Initial.....	<i>A</i>
Prices Checked.....		<i>B</i>
Add. & Ext. Checked.....		<i>B</i>
Approval for Payment.....		<i>B</i>
Discount Date.....		
Paid by Choque No.....		
Distribution: Acc't. No.....		<i>102102110210130</i>



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

NAME: Carla Martell

PERIOD COVERED: September 2018

FROM: September 25, 2018 TO: September 25, 2018

DATE:	PARTICULARS:	MILEAGE (KM):	OTHER EXPENSES:
September 25, 2018	Travel to Port Hawkesbury to drop off drawings to Strait Engineering	87.00	

Goods Rec'd. Date..... Initial *A*
 Prices Checked..... *B*
 Add. & Ext. Checked..... *D*
 Approval for Payment.....
 Discount Date.....
 Paid by Cheque No. *10 242 3070 242 110*
 Distribution: Acc't. No. *10 242 3070 242 110*

Totals: 87.00 \$0.00
 Rate: \$0.4415
 Total Mileage (\$): \$38.41

Total Expenses Claimed: **\$38.41**

ACCOUNT #:	<i>10-242-3070 242110</i>	CHEQUE #:	
SIGNATURE:	<i>Carla Martell</i>	AMOUNT:	
APPROVED:	<i>Miss Brockie</i>	DATE PAID:	
DATE SUBMITTED:	<i>Oct 3/18</i>	INITIAL:	



TRAVEL EXPENSE CLAIM Rate \$0.4415

Name of Claimant:	JASON MARTELL
Destination:	ANTIGONISH, NS
Purpose of Travel:	DEVELOP NS INFO SESSION
Departure Date/Time:	WEDNESDAY, AUGUST 8TH, 2018 11 am
Return Date/Time:	WEDNESDAY, AUGUST 8TH, 2018 1 am
Approval to Travel	<i>[Signature]</i> Date: <u>Aug 6/2018</u>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	206.00	206.00				206.00
Total Cost of Mileage:	\$90.95	\$0.00	\$0.00	\$0.00	\$0.00	\$90.95
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) -Course Fee						\$0.00
Total Amount Being Claimed	\$90.95	\$0.00	\$0.00	\$0.00	\$0.00	\$90.95

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 JK N/A _____

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

Claimant Signature: *[Signature]*

Date Submitted: SEPTEMBER 9TH, 2018

Travel Approved by Supervisor: *[Signature]*

GL Code: _____

Goods Rec'd. Date.....	Initial.....
Prices Checked.....	<i>[Initial]</i>
Add. & Ext. Checked.....	<i>[Initial]</i>
Approval for Payment.....	<i>[Initial]</i>
Discount Date.....	
Paid by Cheque No.....	
Distribution: Acct. No.....	<u>10 212 2120 2121 30</u>



Jennifer Angel, President and CEO of Develop Nova Scotia, invites you to participate in a community engagement session to learn more about the vision for Develop Nova Scotia as well as an update and discussion on the provincial rural internet strategy.

Please see below a schedule of events. Kindly RSVP at rsvp.atlantic@national.ca with the specific event location you will attend.

Schedule of events:

Antigonish St. FX Charles Keating Centre - 1100 Convocation Boulevard
Wednesday, August 8th, 11:00 am – 1:00 pm

Whycocomagh Fire Hall - 9519 Trans-Canada Hwy
Thursday, August 9th, 11:00 am – 1:00 pm

Yarmouth Mariner's Centre
Tuesday, August 14th, 11:00 am – 1:00 pm

Kentville NSCC - 236 Belcher Street
Wednesday, August 15th, 11:00 am – 1:00 pm

Lunenburg Fire Hall – 25 Medway Street
Thursday, August 16th, 11:00 am – 1:00 pm

Truro NSCC - 36 Arthur Street
Tuesday, August 21st, 11:00 am – 1:00 pm

NSCC Ivany Campus – 80 Mawiomi Place, Dartmouth
Wednesday, August 22nd, 11:00 am – 1:00 pm



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

TRAVEL EXPENSE CLAIM		Rate \$0.4415
Name of Claimant:	JASON MARTELL	
Destination:	BADDECK, ST ANN'S, INGNISH	
Purpose of Travel:	TOURISM FIELD TRIP	
Departure Date/Time:	SEPTEMBER 20TH, 9 AM	
Return Date/Time:	SEPTEMBER 20TH, 7 PM	
Approval to Travel	Date:	

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	0.00					0.00
Total Cost of Mileage:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Accommodation/Hotel Name:						\$0.00
<i>(Indicate if Direct Bill or Provide Receipt)</i>						
Meals: Breakfast \$20						\$0.00
Lunch \$25	\$25.00					\$25.00
Dinner \$30	\$30.00					\$30.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)						\$0.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
Total Amount Being Claimed	\$55.00	\$0.00	\$0.00	\$0.00	\$0.00	\$55.00

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 JK N/A _____

No agenda - Road Trip as directed by CAO

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

Claimant Signature: Jason Martell

Date Submitted: Sept 27 / 2018

Travel Approved by Supervisor: [Signature]

GL Code: _____

Goods Rec'd. Date.....	Initial.....	
Prices Checked.....		
Add. & Ext. Checked.....		
Approval for Payment.....		
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <u>10 212 2120 2121</u>		30