

38784

Municipality of the County of Richmond - March 2019		
Meetings Held:		67 kms
Date:	Meeting:	Gilbert Boucher
March-05-19	PAC/Heritage	0
March-06-19	By-Law Committee	1
March 11, 2019	COW	1
March 14, 2019	Budget	1
March 21, 2019	Budget	1
March-25-19	Council	1
Total # of Meetings Attended:		5
x kms/trip (return):		67
Total Mileage (kms):		335
Rate		0.4415
Total Owed		\$147.90



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 210	130

HST 3

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:	PH Civic Centre
Purpose of Travel:	Conduct Job Interviews for Landrie Lake Water Utility Operator Position
Departure Date/Time:	April 25, 2019 - 8:00 AM
Return Date/Time:	April 25, 2019 - 5:00 PM
Approval to Travel	X <i>Don Macdonald</i> Date: <u>April 24/19</u>

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

Conducting job interviews for new Landrie Lake water utility operator. 9am to 4pm.

All claims are to be submitted not later than 30 days after return.	
Claimant Signature:	<i>Chris Boudreau</i>
Date:	<u>April 26/19</u>
Travel Approved by Supervisor:	<i>Don Macdonald</i>
GL Code:	10-242-3070-242110

Goods Rec'd. Date.....	Initial.....	
Prices Checked.....		A
Add. & Ext. Checked.....		A
Approval for Payment.....		A
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <u>10 242 3070 24</u>		<u>2110</u>

SCHEDULE "B"



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

MUNICIPALITY TRAVEL

OF THE COUNTY OF RICHMOND

EXPENSE CLAIM

Name of Claimant:	Chris Boudreau
Destination:	750 Main Street, Moncton NB
Purpose of Travel:	MPWWA Annual Training Seminar
Departure Date/Time:	April 16, 2019 - 6:00 AM
Return Date/Time:	April 17, 2019 - 5:00 PM
Approval to Travel	X <i>[Signature]</i> Date: <i>March 25/2019</i>

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Mileage: # of Km	382.0	382.0	0	0	0	337.31 0.00
Accommodation: Direct Bill Hotel Name: <i>(Indicate if Direct Bill or Provide Receipt)</i>						0.00
Meals: Breakfast \$20	20	20				40 0.00
Lunch \$25						0.00
Dinner \$30						0.00
Other Meals/Conference Fee	138.94					138.94 0.00
Incidentals (\$10 per overnight stay)	10					10 0.00
Taxi/Parking/Tolls (Receipts Required)	4	4				8 0.00
Total Amount Being Claimed						534.25 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

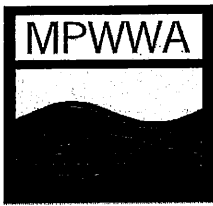
2 of 3 days only (did not attend first day on April 15th + travelled the morning of the 16th for remaining 1.5 days of that contained the training sessions). (conference fee of \$138.94 includes 1.5

days of sessions + banquet + luncheon.

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

Claimant Signature:	<i>[Signature]</i>
Date:	<i>April 23/19</i>
Travel Approved by Supervisor:	<i>[Signature]</i>
GL Code:	<i>10-240-3070-242110</i>

Goods Rec'd. Date.....	Initial.....	<i>A</i>
Prices Checked.....		<i>A</i>
Add. & Ext. Checked.....		<i>B</i>
Approval for Payment.....		<i>A</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <i>102423070242110</i>		



MPWWA 39th Annual Training Seminar

Building on the Best Operators
'Supporting Growth'

April 14 - 17, 2019
Moncton, NB

Name: Chris Boudreau

Name of Spouse (if attending the seminar):

Work Phone: 902-226-3988 Fax: 902-226-0000 e-mail: cboudreau@richmondcounty.ca

Employer: Municipality of Richmond Position: Director of Public Works

Employer Address: 23517 Hwy 206 Street 120 P.O. Box BOE1A6
Arichat Town NS Province Postal Code

SEMINAR REGISTRATION FEE SCHEDULE: AMOUNT MEMBERSHIP #

Table with 4 columns: Category, Fee, Amount, Membership #. Rows include Active Member, Associate Member, Commercial Member, Alumni Member, Spouse's Registration Fee, Non Member Fee, Monday Tradeshow with Lunch, Tour - Moncton Water Treatment Facility with Tower Road Dam, TransAqua - Greater Moncton Wastewater Facility, and Late Fee added after April 1st.

Participate in the joint ACWWA/MPWWA Top Ops Competition and get a chance to compete at ACE in Florida in 2020. There is no fee to compete!!

Name: \$0.00

(2019 membership # must be included to receive member rate)

**Please check one box for tour of choice as space is limited! Work boots required for all tours!

In an effort to recognize the contribution of its alumni, the MPWWA is pleased once again to offer an incentive for them to attend the conference. All alumni registering for the conference will have their names put into a draw with the winner will be reimbursed their registration fee.

HST rate: NB - 15% (HST# 806511911)

TOTAL ENCLOSED: \$

Please describe any dietary restrictions or other special needs you may have:

Paid upon arrival, Receipt, attached

WE LOOK FORWARD TO SEEING YOU AT THE 39th ANNUAL SEMINAR!!!

THERE WILL BE AN EARLY BIRD DRAW FOR THOSE WHO REGISTER FOR THE SEMINAR ON OR BEFORE March 14, 2019.

Accommodations:

Delta Beausejour
750 Main Street
Moncton, NB
Toll Free Room Reservations: 1-855-213-0582

Phone: Hotel 506-854-4344

Online hotel booking: Click hotel link on mpwwa.ca

Book your group rate for Maritime Provinces Water and Wastewater Association 2019 Seminar

\$159.00-179.00 single/double occupancy

Please advise the hotel that you are with the **Maritime Provinces Water & Wastewater Association**

Registration:

You can register online using our **ONLINE REGISTRATION** and payment option at www.mpwwa.ca

If you prefer, you can complete the form and mail or fax it to the address or number below.

MPWWA
c/o Clara Shea, Executive Secretary
PO Box 28142
Dartmouth, NS
B2W 6E2
Fax: (902) 434-8859
email: contact@mpwwa.ca

Payments Options:

Cheque, Money Order; Visa or MasterCard

Please make cheque payable to MPWWA

Cancellation Policy:

Cancel on or after April 7, 2019 – No refund

Cancel on March 15, 2019 – April 6, 2019 – 50% refund

Cancel on or before March 14, 2019 - Full refund

MPWWA 39th ANNUAL TRAINING SEMINAR

“Building on the Best Operators Supporting Growth”

SUNDAY, April 14

- 2:00 pm - 4:00 pm MPWWA BOARD OF DIRECTORS MEETING
- 7:00 pm - 9:00 pm REGISTRATION
- 7:00 pm - 10:00 pm MEET AND GREET

MONDAY, APRIL 15

- 7:30 am - 9:00 am REGISTRATION
- 8:30 am - 9:00 am OFFICIAL OPENING – Dawn Arnold
- 9:00 am – 10:00 am KEYNOTE SPEAKER- Robyn Tingley
- 9:00 am - 5:00 pm ANNUAL CHARITY SILENT AUCTION
- 10:00 am - 10:30 am HEALTH BREAK
- 10:30 am - 12:00 pm Mark Black
“Helping You Thrive In Challenging Times”
- 12:00 pm - 1:00 pm LUNCH
- 12:00 pm- 4:30 pm EQUIPMENT AND SUPPLY SHOW

TUESDAY, APRIL 16

- 8:00 am - 9:30 am ANNUAL GENERAL MEETING AND BREAKFAST
- 9:00 am - 5:00 pm ANNUAL CHARITY SILENT AUCTION
- 9:30 am - 10:30 am WORKSHOP “A” – Municipal Chlorine Measurement and Control – Marc Szuszkiewicz
- (PICK 1 OF 3)** WORKSHOP “B” – Storm Water Management – Phillipe Losier
- WORKSHOP “C” – Ammonia Limits and Lagoons – Francis Bordeleau
- 10:30 am - 10:45 am HEALTH BREAK

COMPANIONS' PROGRAM

SUNDAY, APRIL 14

- 7:00 pm - 9:00 pm REGISTRATION
7:00 pm - 10:00 pm MEET AND GREET

MONDAY, APRIL 15

- 7:30 am - 9:00 am REGISTRATION
8:30 am - 9:00 am OFFICIAL OPENING
9:00 am - 5:00 pm ANNUAL CHARITY SILENT AUCTION
9:00 am MEET IN LOBBY
9:10 am PAINT PROJECT
11:15am MEET IN LOBBY
11:30am LUNCH AT PUMPHOUSE PUB
1:00 pm - 3:00 pm MAGNETIC HILL WINERY TOUR AND TASTE

TUESDAY, APRIL 16

- 8:00 am - 9:30 am ANNUAL GENERAL MEETING AND BREAKFAST
9:00 am - 5:00 pm ANNUAL CHARITY SILENT AUCTION
9:30 am MEET IN LOBBY
10:00 am – 12:00 pm RESURGO PACE GUIDED TOUR
12:00 pm - 1:00 pm LUNCH ON YOUR OWN
1:00 pm – 4:00 pm GIFT EXCHANGE
 (\$10-15 GIFT TO EXCHANGE BETWEEN COMPANIONS)
 ENJOY MANI OR PEDI AND GOOD COMPANY
 MANI AND PEDI ARE PROVIDED BY FINGERS FACE AND FEET
6:00 pm - 7:00 pm RECEPTION
7:00 pm - 10:30 pm BANQUET AND ENTERTAINMENT

WEDNESDAY, APRIL 17

- 11:30 pm - 1:00 pm STAY 'TIL THE END LUNCHEON



MPWWA

How was your experience?



*2 days of conferer
+ banquet &
luncheon
included.*

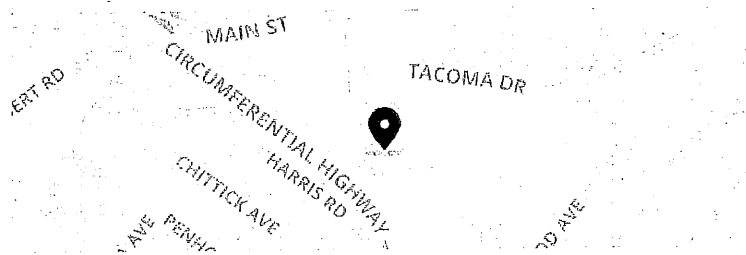
\$138.94

Meals - Banquet	\$73.54
Meals - Stay til the End Luncheon	\$47.28

Purchase Subtotal	\$120.82
NS HST (15%)	\$18.12


Total	\$138.94
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Chin Bourdeau



MPWWA
Box 28142
Dartmouth, NS B2W6E2

902-434-8874

	16/04/2019,
MasterCard 8286 (Swipe)	10:13
	#Q7Vr
CHRIS BOUDREAU	Auth code:
	09470B

GST/HST: 806511911RT0001

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COBEQUID PASS TOLL PLAZA
209 Cobequid Pass
GREAT VILLAGE, N.S. B0M 110
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
16/04/2019 08:16:36 436609 1
COB-LA01
9727



051910608163643660900014000008

COBEQUID PASS TOLL PLAZA
209 Cobequid Pass
GREAT VILLAGE, N.S. B0M 110
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

Treuro
17/04/2019 11:50:40 544108 1
COB-LT06
9702



051910711504054410800013000004



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

NAME: Chris Boudreau

PERIOD COVERED: March 1, 2019 to March 31, 2019

DATE:	PARTICULARS:	MILEAGE (KM):	OTHER EXPENSES:
26-Mar-19	Travel to Landrie Lake Water Utility for site walkthrough.	82	

Goods Rec'd. Date..... Initial: *CB*
 Items Checked.....
 Add. & Ext. Checked.....
 Approval for Payment.....
 Discount Date.....
 Paid by Cheque No. *102423070242110*
 Distribution: Acc't. No. *102423070242110*

HST 3

Totals: 82.00 \$0.00
 Rate: \$0.4415
 Total Mileage (\$): \$36.20

Total Expenses Claimed: **\$36.20**

ACCOUNT #:	10-242-3070-242110	CHEQUE #:	
SIGNATURE:	<i>Chris Boudreau</i>	AMOUNT:	
APPROVED:	<i>[Signature]</i>	DATE PAID:	
DATE SUBMITTED:	<i>April 1/19</i>	INITIAL:	



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

NAME: Ronalda Boudreau

PERIOD COVERED: April 1 to April 12

FROM: TO:

DATE:	PARTICULARS:	MILEAGE (KM):	OTHER EXPENSES:
April 1, 2019	Registration for Gentle Yoga with Lynne Doucette at the St. Peters Fire Hall	71.00	
April 1, 2019	Registration for Gentle Yoga with Lynne Doucette at FMEC	36.00	
April 2, 2019	Registration for Chair Yoga with Lynne Doucette at the Bonnie Brae	71.00	
April 2, 2019	Registration for Floor Yoga with Helen Slade at the FMEC	36.00	
April 3, 2019	Registration for Floor Yoga with Helen Slade at the Lower River Community Hall	62.00	
April 4, 2019	Registration for Gentle Yoga with Lynne Doucette at the St. Peters Fire Hal	71.00	
April 8, 2019	Registration for Evening Yoga in Lower River with Patti Macdonald-David	71.00	
April 9, 2019	Registration for spring Yoga at St. Peter's Fire Hall at 6:30pm	80.00	
April 10, 2019	Had to go to Rec Building to gather supplies for the volenteer recognition night	36.00	
April 11, 2019	Registration for Youth Art from 4 - 6:30 pm at EREC	80.00	
April 12, 2019	Registration for Youth Drama from 3 - 4:30 pm at EREC	71.00	

Goods Rec'd. Date..... Initial.....
 Prices Checked.....
 Add. & Ext. Checked.....
 Approval for Payment.....
 Discount Date.....
 Paid by Cheque No. 10 270 4120 270180
 Distribution: Acc't. No. 10 270 4120 270180

Totals: 685.00 \$0.00
 Rate: \$0.4415
 Total Mileage (\$): \$302.43

Total Expenses Claimed: **\$302.43**

ACCOUNT #:		CHEQUE #:	
SIGNATURE:	Ronalda Boudreau	AMOUNT:	
APPROVED:	<i>[Signature]</i>	DATE PAID:	
DATE SUBMITTED:	April 12/19	INITIAL:	

00582

Municipality of the County of Richmond - March 2019		
Meetings Held:		10 km
Date:	Meeting:	James Goyetche
March-05-19	PAC/Heritage	1
March-06-19	By-Law Committee	1
March 11, 2019	COW	1
March 14, 2019	Budget	1
March 21, 2019	Budget	1
March-25-19	Council	1
Total # of Meetings Attended:		6
x kms/trip (return):		10
Total Mileage (kms):		60
Rate		0.4415
Total Owed		\$26.49

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

HST 3

Municipality of the County of Richmond - April 2019		
Meetings Held:		10 km
Date:	Meeting:	James Goyetche
April-01-19	Special Council	1
April-04-19	Emergency Council	1
April 23, 2019	Regular Council	1
April 8, 2019	COW	1
		0
		0
Total # of Meetings Attended:		4
x kms/trip (return):		10
Total Mileage (kms):		40
Rate		0.4415
Total Owed		\$17.66

James Goyetche

Goods Rec'd. Date.....	Initial.....	<i>R</i>
Prices Checked.....		<i>A</i>
Add. & Ext. Checked.....		<i>A</i>
Approval for Payment.....		<i>R</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No.....	<i>10 210 2110 210130</i>	

HST 3



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

TRAVEL EXPENSE CLAIM Rate **\$0.4415**

Name of Claimant:	André LeBlanc
Destination:	New Glasgow, Pictou County Wellness Centre
Purpose of Travel:	Basic Arena Reprigeration Course
Departure Date/Time:	April 8, 2019 <i>5:30</i>
Return Date/Time:	April 11, 2019 <i>18:30</i>

Approval to Travel *Chris Broadbent* Date: *March 29/19*

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): 340.00	170.00			170.00		340.00
Total Cost of Mileage: \$150.11	\$75.06	\$0.00	\$0.00	\$75.06	\$0.00	\$150.11
Accomodation/Hotel Name: Comfort Inn						\$0.00
<i>Direct Billed</i>						
Meals: Breakfast \$20	\$20.00	\$20.00	\$20.00	\$20.00		\$80.00
Lunch \$25						\$0.00
Dinner \$30	\$30.00	\$30.00	\$30.00	\$30.00		\$120.00
Other Meals (Receipts Required)						\$0.00
Incidentals (\$10 per overnight stay)	\$10.00	\$10.00	\$10.00			\$30.00
Taxi/Parking/Tolls (Receipts Required)						\$0.00
Total Amount Being Claimed	\$135.06	\$60.00	\$60.00	\$125.06	\$0.00	\$380.11

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 *AL* N/A

Course was an intensive four day course on Basic Arena Refrigeration. The course took place over four consecutive days from 8:30am - 4:30pm. Provided me with a great deal of information regarding the operation of the Refrigeration system in order to ensure a safe environment for myself, co-workers and the public.

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

Claimant Signature: *A. LeBlanc*
 Date Submitted: *April 12, 2019*
 Travel Approved by Supervisor: *Chris Broadbent*
 GL Code: *10.270.4150.270480*

Goods Rec'd. Date.....	Initial.....	<i>AL</i>
Prices Checked.....		<i>AL</i>
Add. & Ext. Checked.....		<i>AL</i>
Approval for Payment.....		<i>AL</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <i>10.270.4150.270480</i>		



Comfort Inn

740 Westville Rd.

New Glasgow, NS B2H 2J8

(902) 755-6450

GM.CN250@choicehotels.com

Monday, March 25, 2019

Account Number: 642230759

CRS Number:

Dear ANDRE LEBLANC:

We are delighted that you will be staying with us. We have reserved a room with 2 Double Beds, No Smoking for you.

Arrive: Monday, April 08, 2019

Depart: Thursday, April 11, 2019

Check in begins at 01:00 PM and check out is by 11:00 AM on Thursday, April 11, 2019.

Your rate(s) are as follows based on the night(s) of your stay:

<u>From</u>	<u>Through</u>	<u>Rate</u>
4/8/19	4/10/19	125.00

This rate is not eligible for partner rewards.

Rates quoted are per day and exclude applicable taxes. (Where required by law, rates and total package cost may include taxes.)

If you are exempt from any of these taxes, please contact the hotel directly and present all required documentation at time of check in.

Your reservation has been guaranteed by CREDIT CARD. If you need to cancel this reservation, you must do so by 4 PM local hotel time, 48 hours before the date of arrival to avoid a cancellation penalty.

If your reservation is associated with a group booking, the cancellation requirements may be different. Please check with your group coordinator for specific details.

If you have any questions, please do not hesitate to call our hotel staff at (902) 755-6450.

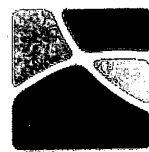
Sincerely,

Diane Mahar
General Manager



**Recreation Facility Association
of Nova Scotia**

Supporting you - from the ground up



orfa

**Ontario
Recreation
Facilities
Association**

Building Community Since 1947

Recreation Facility Association of Nova Scotia (RFANS) in partnership with the Ontario Recreation Facilities Association (ORFA)

Basic Arena Refrigeration Course

Monday, April 8th to Thursday, April 11th, 2019

8:30 am to 4:30 pm

Pictou County Wellness Centre

2756 Westville Road

New Glasgow, Nova Scotia

Course Instructor:

Hotel: Comfort Inn

740 Westville Rd, New Glasgow

Rate: \$125.00 +HST

Quote: **Recreation Facility Association**

Cut off date for rate: March 7, 2019

André J. LeBlanc

Name

Richmond Arena

Facility

2357 Hwy 206, P.O. Box 120

Address

Arichat NS

City

Province

PC

902-226-3989

Phone

902-226-0060

Fax

aleblanc@richmondcounty.ca

Email

Registration Fee

\$850.00+ tax*

\$1,000.00 + tax*

*Tax at 15%

RFA NS Member

Not a Member

Richmond County

Registration Fee

Is enclosed.

Please Invoice me: PO # RICHCO

Visa/MC

Card # _____ Exp: _____

Name on Card: _____

Signature: _____

To register return form to:

Recreation Facility Association of Nova Scotia

Mail: 5516 Spring Garden Road, 4th Floor

Halifax, NS B3J 1G6

Fax: 902-425-5606

Email: rfans@sportnovascotia.ca

Course Partner



For More Information: Please contact the RFANS at (902) 425-5450 x 330 or email: rfans@sportnovascotia.ca

Basic Arena Refrigeration Course Information

The ORFA Basic Arena Refrigeration course is considered the minimum industry-recognized standard for ice arena facility personnel. The Occupational Health and Safety Act demands that those who conduct work in these environments be “competent” while the Operating Engineers Regulation requires that all who have “privilege to enter a registered refrigeration plant room” be qualified. Such qualification and competency begins with a strong foundation of all regulatory obligations to be met followed by an introduction to the principles and fundamentals of the theory of refrigeration and concluding with a risk and hazard assessment overview of a typical refrigeration plant room. Once the legislative requirements and theoretical overview is complete participants will move on to understand that the refrigeration process operates on scientific principles that are applied to practical mechanical processes. Students will be introduced to the different types of ice arena refrigeration plant designs and key pieces of equipment required to safely transfer heat plus the role of safety devices during this transfer. In addition, participants will be able to identify the types and the amounts, as well as the storage and disposal of refrigerants and lubricants.

Emphasis is placed on the need for worker safety which depends on the proper use of personal protective equipment from all noxious gases and/or refrigerants stored on site. Operator and public safety further relies on the operator’s ability to monitor plant conditions, liquid levels, pressures and temperatures and take appropriate action under the circumstance. Hazards of electricity, temperature and pressures are introduced so that plant monitors can recognize the importance of plant piping markings so not to touch these delivery mechanisms; not to place hands or feet near pumps or motors or make unqualified plant adjustments. Monitors must understand the need to conduct regular plant checks and the importance of recording these activities in the official plant log. Course participants will gain an appreciation for the proper use of plant room ventilation and the role of the refrigeration safety devices and alarm systems. Once this knowledge has been obtained, participants will clearly understand the importance of their role during plant room emergencies and the need to embrace and practice evacuation plans for both worker and general public safety.

While not mandatory, participants are encouraged to gain some knowledge of a working ice arena refrigeration plant prior to attendance. It is strongly recommended that prior to attending this course participants visit the ORFA Resource Centre and review materials found in the Refrigeration Plant Operations section <http://www.orfa.com/Refrigeration-Plant-Operations>. Access to this link will be provided once course registration has been confirmed. Of further benefit would be a guided tour of a refrigeration plant room under the leadership of a competent plant operator for an orientation of the refrigeration plant room and review of the plant operational and training manual.

Topics include:

- Module One: Refrigeration Theoretical and Practical Factors
- Module Two: Refrigeration Codes, Regulations and Acts
- Module Three: Ice Rink Refrigeration Equipment, Controls and Safety Devices
- Module Four: Ice Rink Refrigeration Plant Safe Operations and Maintenance
- Module Five: Refrigeration Emerging Technologies and Energy Management
- Module Six: Review of Key Learning Objectives

Workplace-Specific Training: A reminder is given to facility supervisory staff that to complete the educational process successful participants must return to work and be provided with specific workplace-specific training.



**Recreation Facility
Association
of Nova Scotia**

Supporting you – from the ground up



orfa

**Ontario
Recreation
Facilities
Association**

Building Community Since 1947



4585

TRAVEL EXPENSE CLAIM Rate ~~\$0.4415~~

Name of Claimant:	André J. LeBlanc
Destination:	Best Western Glengarry Hotel, 150 Willow Street, Truro, NS
Purpose of Travel:	On-site Sewage Disposal System Installer Course
Departure Date/Time:	24/04/2019 - 05h00
Return Date/Time:	26/04/2019 - 20h00 <i>19h00 AL</i>

Approval to Travel *Chris Boardman* Date: *April 23/19*

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km): 458.00	229.00		229.00			458.00
Total Cost of Mileage:	<i>105.00</i>	\$0.00	<i>105.00</i>	\$0.00	\$0.00	<i>210.00</i>
Accommodation/Hotel Name: Best Western Glengarry						\$0.00
<i>Direct Billed</i>						
Meals: Breakfast \$20	\$20.00	\$20.00	\$20.00			\$60.00
Lunch \$25						\$0.00
Dinner \$30	\$30.00	\$30.00	\$30.00			\$90.00
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	<i>165.00</i>	\$60.00	<i>155.00</i>	\$0.00	\$0.00	380.00

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 *AL* N/A _____

Three day course for onsite sewage disposal system. We visited the Perennia Centre in Bible Hill that has several installations of onsite sewage systems for study + testing. Also received a falling head permeameter for doing onsite soil/sand tests.

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

Claimant Signature: *[Signature]*

Date Submitted: *April 30/19*

Travel Approved by Supervisor: *Chris Boardman*

GL Code: *10.260.4070.260200*

Goods Rec'd. Date.....	Initial.....	<i>AL</i>
Prices Checked.....		<i>R</i>
Add. & Ext. Checked.....		<i>R</i>
Approval for Payment.....		<i>R</i>
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. <i>10.260.4070.260200</i>		

154
3



Waste Water Nova Scotia Society
60 Kyle Road,
Greenwood, N.S.
B2H 5C7
Phone: (902)246-2131 Fax: (902)246-2130

February 16, 2019

Andre LeBlanc
2357 Hwy 206
PO Box 120
Arichat, NS
B0E 1A0

RE: Installer Training – Course April 24th - April 26th
Best Western Glengarry Hotel (150 Willow Street), Truro, NS

As you are on our priority list for Installer Training, I would ask that you fill out the following and return to WWNS with appropriate registration fee payable to **“Berrigan Surveys Ltd”** by 4pm on April 5th, 2019. **The first 20 persons to submit the fee will be registered for that course.**

Please return this registration form along with check or money order to Waste Water Nova Scotia or you may submit the form to WWNS and pay by credit card by contacting Berrigan Surveys directly at **902-543-5695**.

I will or will not be attending the proposed training program to be held **April 24th, April 25th and April 26th**

Signed: _____

Phone #: 902-226-3989 Fax#: 902-226-0060 Email: aleblanc@richmondcounty.ca

Your cooperation is appreciated.

Gary Cameron
Executive Director, WWNS

As of May 1st, 2016, after successfully completing the training, proof of experience in the on-site sewage industry is required by new applicants when they apply for certification as an Installer/QP to Nova Scotia Environment.

ON-SITE SEWAGE DISPOSAL SYSTEM INSTALLER COURSE

A maximum of 20 students per course permitted. First paid , first confirmed !!

Information regarding the course for On-Site Sewage Disposal System Installers to be held

Course Date: Wednesday April 24th to Friday April 26th 2019

When:

The Installer Course will start at **8:30am** each day listed above and finish around 4:00pm.

NOTE: Your name and full course payment must be in hand to Waste Water Nova Scotia or Berrigan Surveys Ltd no later than Friday April 5th, 2019 @ 4pm.

There are no alternatives to this time-line without written approval from Waste Water Nova Scotia as sufficient time is required for creation of Course Information Binders & Materials.

Where:

The course will be held at the **Best Western Glengarry Hotel (150 Willow Street) in Truro.** Classes will be held in one of the large meeting rooms and will be advertised on the morning of each course date.

Registration & Fee:

The course registration fee is **\$865 + HST(15%) = \$994.75**

The cheque or Money Order can be made out to: **Berrigan Surveys Ltd** and sent to:

Gary Cameron

Waste Water Nova Scotia

60 Kyle Road, Greenwood, NS B2H 5C7

OR

Payment can also be processed by Credit Card

by contacting **Berrigan Surveys Ltd. 902-543-5695**

Receipts will be issued upon signing in to the course on April 24th

Please DO NOT make cheques payable to Waste Water Nova Scotia.

As well as all course materials, including 2 information binders, the regulations, guidelines, Standards and a permeameter sand tester, your fee covers coffee breaks and a meal at lunch time on three days of the course April 24th to April 26th. Please indicate any special food requirements and every effort will be made to accommodate these. All other meals and accommodations are your responsibility.

NOTE: A minimum of 10 students is required to run a course. A maximum of 20 is permitted to take the class at one time. First come , first served.

On Site Sewage Disposal System Installer Course

Bring:

- a) appropriate outdoor wear for the morning of April 26th as we will be outside at a designated location learning how to stake contours, make measurements, identify site features, etc etc.
- b) Calculator – used to calculate slope and totalling volumes of material. Metric units will be used in the course. The Standards, Regulations, Guidelines, and approvals are all in metric. If you are not familiar with metric units, a metric conversion calculator may be helpful.
- c) Pens or pencils, paper for taking notes / sketches for your final exam.

Accommodations:

There are plenty of motels/accommodations close by in Truro so make whatever arrangements you wish.

Examination:

To become a Licensed On Site Sewage Disposal System Installer you must write the two 2+ hr examination on the final day of the course and have a mark of at least 75 %. The exam will be based on what a person should know to install an on-site sewage disposal system in accordance with the Regulations, Guidelines, Standards and Nova Scotia Environment. The exam will be open book, (you can have your notes, etc. with you when you write) but you will write it by yourself. Anyone with special needs concerning reading or writing abilities should discuss it with Gary Cameron before registering.

Additional Information:

If you wish additional information about the course or the requirements to become a Qualified Person for on-site sewage disposal selection, please direct your questions through **Gary Cameron** with Waste Water Nova Scotia at:

Work: (902) 246-2131
Cell: (902) 890-6021
Email: wastewaterns@eastlink.ca

Course Instructor:

Peter Berrigan, P.Eng, NSLS
Berrigan Surveys Ltd, Bridgewater
902-543-5695



MUNICIPALITY OF THE COUNTY OF RICHMOND
 TRAVEL EXPENSE CLAIM

Name of Claimant:	Brian Marchand
Destination:	NSCC Campus
Purpose of Travel:	SAT Board Meeting
Departure Date/Time:	April 2-2019 - 8:00AM
Return Date/Time:	April 2-2019 - 12:00 PM
Approval to Travel	<i>See attached</i> . Date:

Description	Day 1						Total
Mileage: # of Km 60 KM	\$ 26.49						\$ 26.49
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	\$ 26.49						\$ 26.49

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: April 8/2019

Travel Approved by Supervisor: [Signature]

GL Code: _____

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

HSC 3



Strait Area Transit Board Meeting

April 2, 2019, NSCC Room 211

Agenda

- 1) Call to order
- 2) Approval of Agenda
- 3) In Camera (if required)
- 4) Minutes
- 5) Manager's Report
- 6) Vehicle Report
- 7) Financial Report
- 8) Provincial/Municipal Funding
- 9) Co-op Meeting
- 10) Board Members

- 11) Additional items:
 - a
 - b
 - c
 - d
- 12) Adjournment

Next meeting:

From: jmaclean@richmondcounty.ca
Subject: Re: Sat board meeting
Date: Mar 30, 2019 at 10:46:31 AM
To: Brian brianmarchand@hotmail.com

Hi Brian, yes for sure.

Jason

From: "Brian" <brianmarchand@hotmail.com>
To: "Jason MacLean" <jmaclean@richmondcounty.ca>
Date: 29/03/2019 10:04 AM
Subject: Sat board meeting

Looking for permission to attend Sat Board Meeting Tuesday April 2nd 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/
MjgwNzYwOjIxNjE1NTAxOTk6amlhY2xlYW5AcmljaG1vbmrjb3VudHkuY2E6ZGVsaXZlcmVk](https://support.onlymyemail.com/view/report_spam/MjgwNzYwOjIxNjE1NTAxOTk6amlhY2xlYW5AcmljaG1vbmrjb3VudHkuY2E6ZGVsaXZlcmVk)



MUNICIPALITY OF THE COUNTY OF RICHMOND
 TRAVEL EXPENSE CLAIM

Name of Claimant:	Brian Marchand
Destination:	Port Hawkesbury PHCC
Purpose of Travel:	Meeting to Discuss Housing Issues
Departure Date/Time:	April 17-2019 - 8:30 AM
Return Date/Time:	April 17-2019 - 1:30 PM
Approval to Travel	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 & others to discuss Affordable Housing Issues

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

Claimant Signature: Brian Marchand

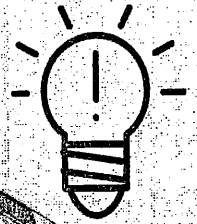
Date: April 17/2019

Travel Approved by Supervisor: [Signature]

GL Code: _____

Goods Rec'd. Date.....	Initial.....	<u>R</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>102102110210</u>		<u>130</u>

Community Think Tank Housing Matters



STRAIT RICHMOND HOUSING GROUP

Wednesday, April 17, 2019

10:00 am to 12 noon

Port Hawkesbury Civic Centre, Board Room, 2nd Floor



Agenda for the day

- 10:00 Check In and Welcome
- 10:15 Update on A People's School on Housing Needs
- 10:30 Discussion of Name and Terms of Reference for Group
- 11:30 Other Business
- Wrap Up and Agenda Items for Next Meeting



From: dmarchand@richmondcounty.ca
Subject: Re: Housing Meeting
Date: Apr 16, 2019 at 8:32:46 AM
To: Brian brianmarchand@hotmail.com

Sure Brian.

Don Marchand
Chief Administrative Officer
2357 Hwy 206, P.O. Box 120
Arichat, N.S.
B0E 1A0
902-226-3970

From: "Brian" <brianmarchand@hotmail.com>
To: "Don (Gail) Marchand" <dmarchand@richmondcounty.ca>
Date: 15/04/2019 11:14 PM
Subject: Housing Meeting

Looking for permission to attend the Housing Thinktank meeting in Port Hawkesbury on Wed April 17th?

Thanks.

Brian

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If this email is spam, please report it to
https://support.onlymyemail.com/view/report_spam/
[MjgwNzUwOjIxNjUwNjk1NjY6ZG1hcmNoYW5kOHJpY2htb25kY291bnR5LmNhOmR1bG12ZXJlZA](https://support.onlymyemail.com/view/report_spam/MjgwNzUwOjIxNjUwNjk1NjY6ZG1hcmNoYW5kOHJpY2htb25kY291bnR5LmNhOmR1bG12ZXJlZA)

26840

Municipality of the County of Richmond - March 2019		
Meetings Held:		14 km
Date:	Meeting:	Alvin Martell
March-05-19	PAC/Heritage	1
March-06-19	By-Law Committee	1
March 11, 2019	COW	1
March 14, 2019	Budget	1
March 21, 2019	Budget	1
March-25-19	Council	1
Total # of Meetings Attended:		6
x kms/trip (return):		14
Total Mileage (kms):		84
Rate		0.4415
Total Owed		\$37.09

Alvin Martell

Goods Rec'd. Date.....	Initial.....	A
Prices Checked.....		D
Add. & Ext. Checked.....		A
Approval for Payment.....		A
Discount Date.....		
Paid by Cheque No.....		
Distribution: Acc't. No. 10.210.2110.2101		30

HST 3



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:	PH Civic Centre
Purpose of Travel:	CBREN – Liasion and Oversight Committee Meeting.
Departure Date/Time:	2019-03-12
Return Date/Time:	March 12, 2019

Approval to Travel *[Signature]* Date: *March 11, 2019*

Description	Day 1	Day 2	Day 3	Day 4	Day 5	Total
Total Mileage (# of Km):	87.00					0.00
Total Cost of Mileage:	\$0.44	\$87.00	\$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						\$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	\$87.00	\$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 *[Signature]* N/A _____

All claims are to be submitted not later than 60 days after return	
Claimant Signature:	<i>[Signature]</i>
Date Submitted:	<i>March 14 / 2019</i>
Travel Approved by Supervisor:	<i>[Signature]</i>
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. <i>10 212 2120 21</i>	<i>130</i>

HST 3

Kent

CBREN Liaison Oversight Committee Meeting

Port Hawkesbury Civic Centre

March 11, 2018

2:00 pm – 3:30 pm

Agenda

- 1 Welcome and Introductions
- 2 Approval of Agenda
- 3 Approval of Minutes
- 4 Review of Action Plan
- 5 Financials
- 6 New Business
 - ✓ ■ Request from Town of Port Hawkesbury
 - ✓ ■ Structure of Cape Breton REN LOC to include new partners
 - ✓ ■ CBU – temporary rural housing project
 - ✓ ■ New Cape Breton Island strategy
 - ✓ ■ Upcoming REN changes from DMA for 2019/20
- 7 Roundtable
- 8 Adjournment