Village of Ryley Council Expense Claim (2025)					
NAME: Mayor Steph Dennis			MONTH: January		
Date	**Event**	**ALLOWANCE/BENEFIT**	**RATE**	**Number**	**Calculation**
	BRP Milage - Jan 9, 2025	Mileage: Viking	$ 55.59	1.00	$ 55.59
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
	(use last date for multi-date receipts/events)	Drop Down: Pick One	$ -	1.00	$ -
				SUB-TOTAL	$ 55.59
Date	**Event**	**RECEIPTS (Attached)**	**AMOUNT**		**Calculation**
					$ -
					$ -
					$ -
					$ -
					$ -
	(use last date for multi-date receipts/events)				$ -
				SUB-TOTAL	$ -
		EXPENSE TOTAL			**$ 55.59**
		PAYROLL TOTAL			**$ -**
				GRAND TOTAL	**$ 55.59**

Signature: _____ Feb 3, 2025

(Print) **Mayor Steph Dennis** (DATE)

Approved by: _____ 2025/02/04

(Print) (DATE)

Validated by: _____ Feb 3/25

(Print) (DATE)

Glen Hamilton-Brown
Chief Administrative Officer (CAO)
Village of Ryley

Village of Ryley Council Expense Claim (2025)					
NAME: D Mayor Brian Ducherer			MONTH: January		
Date	**Event**	**ALLOWANCE/BENEFIT**	**RATE**	**Number**	**Calculation**
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
	(use last date for multi-date receipts/events)	Drop Down: Pick One	$ -	1.00	$ -
				SUB-TOTAL	$ -
Date	**Event**	**RECEIPTS (Attached)**	**AMOUNT**		**Calculation**
					$ -
					$ -
					$ -
					$ -
					$ -
	(use last date for multi-date receipts/events)				$ -
				SUB-TOTAL	$ -
		EXPENSE TOTAL			**$ -**
		PAYROLL TOTAL			**$ -**
				GRAND TOTAL	**$ -**

Signature: NO EXPENSES CLAIMED _____ _____

(Print) **D Mayor Brian Ducherer** (DATE)

Approved by: _____ _____

(Print) Glen Hamilton-Brown
Chief Administrative Officer (CAO)
Village of Ryley (DATE)

Validated by: _____ 4 FEB / 25

(Print) (DATE)

Village of Ryley Council Expense Claim (2025)					
NAME: Cr. Lyndie Knockleby			MONTH: January		
Date	**Event**	**ALLOWANCE/BENEFIT**	**RATE**	**Number**	**Calculation**
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
	(use last date for multi-date receipts/events)	Drop Down: Pick One	$ -	1.00	$ -
				SUB-TOTAL	$ -
Date	**Event**	**RECEIPTS (Attached)**	**AMOUNT**		**Calculation**
					$ -
					$ -
					$ -
					$ -
					$ -
	(use last date for multi-date receipts/events)				$ -
				SUB-TOTAL	$ -
		EXPENSE TOTAL			$ -
		PAYROLL TOTAL			$ -
				GRAND TOTAL	$ -

Signature: NO EXPENSES CLAIMED _____ _____

(Print) **Cr. Lyndie Knockleby** (DATE)

Approved by: _____ _____

(Print) Glen Hamilton-Brown (DATE)

Chief Administrative Officer (CAO)

Village of Ryley

Validated by: _____ 4 FEB /25

(Print) (DATE)

Village of Ryley Council Expense Claim (2025)					
NAME: Cr. Kim Murphy			MONTH: January		
Date	**Event**	**ALLOWANCE/BENEFIT**	**RATE**	**Number**	**Calculation**
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
	(use last date for multi-date receipts/events)	Drop Down: Pick One	$ -	1.00	$ -
				SUB-TOTAL	$ -
Date	**Event**	**RECEIPTS (Attached)**	**AMOUNT**		**Calculation**
					$ -
					$ -
					$ -
					$ -
					$ -
	(use last date for multi-date receipts/events)				$ -
				SUB-TOTAL	$ -
		EXPENSE TOTAL			**$ -**
		PAYROLL TOTAL			**$ -**
				GRAND TOTAL	**$ -**

Signature: NO EXPENSES CLAIMED _____ _____

(Print) **Cr. Kim Murphy** (DATE)

Approved by: _____ _____

(Print) Glen Hamilton-Brown
Chief Administrative Officer (CAO)
Village of Ryley (DATE)

Validated by: _____ 4 Feb 25

(Print) (DATE)

Village of Ryley Council Expense Claim (2025)					
NAME: Cr. Sheldon Reid			MONTH: January		
Date	**Event**	**ALLOWANCE/BENEFIT**	**RATE**	**Number**	**Calculation**
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
		Drop Down: Pick One	$ -	1.00	$ -
	(use last date for multi-date receipts/events)	Drop Down: Pick One	$ -	1.00	$ -
				SUB-TOTAL	$ -
Date	**Event**	**RECEIPTS (Attached)**	**AMOUNT**		**Calculation**
					$ -
					$ -
					$ -
					$ -
					$ -
	(use last date for multi-date receipts/events)				$ -
				SUB-TOTAL	$ -
		EXPENSE TOTAL			**$ -**
		PAYROLL TOTAL			**$ -**
				GRAND TOTAL	**$ -**

Signature: NO EXPENSES CLAIMED _____ _____

(Print) **Cr. Sheldon Reid** (DATE)

Approved by: _____ _____

(Print) Glen Hamilton-Brown
Chief Administrative Officer (CAO)
Village of Ryley (DATE)

Validated by: _____ 4 Feb / 25

(Print) (DATE)