

Village of Ryley Council Expense Claim (2025)					
NAME: Mayor Steph Dennis			MONTH: March		
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	\$ -
		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) Mayor Steph Dennis

 (DATE)

Approved by: _____
 (Print)

 (DATE)

Validated by: _____
 (Print)

 (DATE)

Village of Ryley Council Expense Claim (2025)

NAME: **Cr. Lyndie Knockleby**

MONTH: **March**

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	\$ -
		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)

(DATE)

Validated by:

(Print)

(DATE)

Village of Ryley Council Expense Claim (2025)

NAME: Cr. Kim Murphy		MONTH: March			
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)

 (DATE)

Validated by: _____
 (Print)

 (DATE)

Village of Ryley Council Expense Claim (2025)

NAME: **Cr. Sheldon Reid**

MONTH: **March**

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)

(DATE)

Validated by: _____

(Print)

(DATE)