


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

Approved by:
(Print)

Validated by:
(Print)



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

16 Sep/25

**Village of Ryley Council Expense Claim (2025)**

<b>NAME:</b> Cr. Sheldon Reid		<b>MONTH:</b> August			
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	\$ -
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		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) Glen Hamilton-Brown  
 Chief Administrative Officer (CAO)  
 Village of Ryley

16 Sep /25  
 (DATE)



**Village of Ryley Council Expense Claim (2025)**

NAME: <b>DM Lyndie Knockleby</b>		MONTH: <b>August</b>			
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	\$ -
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		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		\$ -

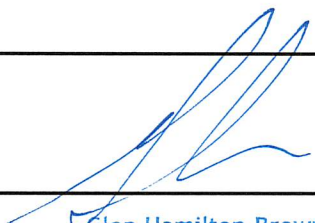
**Signature:** NO EXPENSES CLAIMED  
 (Print) **DM Lyndie Knockleby**

\_\_\_\_\_  
 (DATE)

**Approved by:** \_\_\_\_\_  
 (Print)

\_\_\_\_\_  
 (DATE)

**Validated by:** \_\_\_\_\_  
 (Print)

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

16 Sep / 25  
 (DATE)

Village of Ryley Council Expense Claim (2025)

NAME: Cr. Kim Murphy		MONTH: August			
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	\$ -
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		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)

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

16 Sep 25  
(DATE)