

**Spokane County Fire Protection District 8
COMMISSIONER ACTIVITY REPORT**

Month(s) of _____ / _____ / _____, 20_____

I hereby certify that I have attended meetings of the Spokane County Fire District 8 Board of Commissioners or performed services or attended meetings on behalf of the district as set forth below, and that I am entitled to compensation therefore as provided by RCW 52.14.010 and the Amendment set forth through Senate Bill 6174.

<i>Date</i>	<i>Description of Activity or Meeting</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
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_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Days _____ X \$161.00 = _____

Date: _____

Signature: _____

Payroll: _____