

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Claim Report

Name: Donnie MacDonald (DON140) **Month/Year** September-20
District: 2

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PL	OTHER (\$) OTH	Amount (\$)
Sept.08/20	Asset Management Meeting	16	\$ 7.47				\$ 7.47
	Committee Of The Whole		\$ -				\$ -
	Municipal Council Meeting.		\$ -				\$ -
Sept.09/20	OHS&Wellness Meeting.	16	\$ 7.47				\$ 7.47
Sept.10/20	A.A.H.S. Building Committee	6	\$ 2.80				\$ 2.80
Sept.23/20	A.A.H.S Committee Meeting.	6	\$ 2.80				\$ 2.80
	A.A.H.S. AGM		\$ -				\$ -
Sept.24/20	ERSW Mgmt Meeting	108	\$ 50.44				\$ 50.44
Sept.28/20	Asset Management Meeting	16	\$ 7.47				\$ 7.47
	Committee Of The Whole		\$ -				\$ -
	Internet					\$ 22.50	\$ 22.50
	Cell Phone Stipend					\$ 40.00	\$ 40.00
TOTAL		168	\$ 78.46	\$ -	\$ -	\$ 62.50	\$ 140.96

TYPES OF EXPENSE	
Expense Codes	
TRV - Travel -Mileage, Parking, Hotel, Taxi	
ML - Meal Expenses	
PD - Professional Development (training/conference)	
OTH - Other - ie: Phone, Internet, Incidentals	
Mileage Rate - \$0.4670/KM	

Per Diem Rates	
Meal	Rate per Day
Incidental	\$ 10.00
Breakfast	\$ 15.00
Lunch	\$ 20.00
Dinner	\$ 36.00
Total per day	\$ 81.00

I certify that the amounts claimed in this request are accurate, in accordance with the municipal policy, and were incurred while conducting municipal business.

District 2
Signature: 
Approved by: 
 (Municipal Clerk/Deputy Clerk/Director)

Date: Dec 26/20

Office Use Only	
TRV - GL# - 10-210-2110-202123	\$ 78.46
ML - GL# - 10-210-2110-202123	\$ -
PD - GL# - 10-210-2110-202123	\$ -
OTH - GL# - 10-210-2110-202123	\$ 62.50
TOTAL	\$ 140.96