

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Report

Name: Owen McCarron (OWE040)

Month/Year

December-19

District: 6

**OFFICE USE ONLY
Paid by Municipality**

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
Dec 1/19	Chancellors Luncheon ST. FXU	22	\$ 10.09				\$ 10.09	
Dec 1/19	Lights of Love RK Nursing home	22	\$ 10.09				\$ 10.09	
Dec 2/19	Coady Anniversary	22	\$ 10.09				\$ 10.09	
Dec 3/19	Antigonish Education Centre Breakfast program	24	\$ 11.00				\$ 11.00	
Dec 3/19	COW	18	\$ 8.25				\$ 8.25	
Dec 4/19	Joint Council County office	18	\$ 8.25				\$ 8.25	
Dec 5/19	Dave Stewart and Glenn Horne	18	\$ 8.25				\$ 8.25	
Dec 6/19	Pomquet Volleyball Tournament	18	\$ 8.25				\$ 8.25	
Dec 7-8/19	Home - Halifax Rtn Opening		\$ -	\$ 36.00		\$ 10.00	\$ 46.00	
	Ceremony Thunderbirds	452	\$ 207.24	\$ 15.00		\$ 15.00	\$ 237.24	
	- Four Points Halifax		\$ 169.58				\$ 169.58	
Dec 9/19	Physician Recruitment	22	\$ 10.09				\$ 10.09	
Dec 10/19	Quality of Life Mtg	18	\$ 8.25				\$ 8.25	
Dec 11/19	Carevan Cheque presentation	22	\$ 10.09				\$ 10.09	
Dec 11/19	Active transportation WKshop	18	\$ 8.25				\$ 8.25	
Dec 16/19	Port Hawkesbury rtn Interview	132	\$ 60.52				\$ 60.52	
Dec 17/19	Regular Council	18	\$ 8.25				\$ 8.25	
Dec 20/19	Shop Local Radio Station	22	\$ 10.09				\$ 10.09	
Dec 24 /19	Interview XFM	22	\$ 10.09				\$ 10.09	
	Internet					\$ 22.50	\$ 22.50	
TOTAL		888	\$ 576.73	\$ 51.00	\$ -	\$ 47.50	\$ 675.23	\$ -

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 - \$0.4585/KM	

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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 6

Signature: _____

Date: _____

Approved by: _____

(Municipal Clerk/Deputy Clerk/Director)

Office Use Only	
TRV - GL# - 10-210-2110-202127	\$ 576.73
ML - GL# - 10-210-2110-202127	\$ 51.00
PD - GL# - 10-210-2110-202127	\$ -
OTH - GL# - 10-210-2110-202127	\$ 47.50
TOTAL	\$ 675.23