

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Claim Report

Name: Owen McCarron (OWE040)

Month/Year July-20

District: 6

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)
			\$ -				\$ -
July 3 /20	Family Medicine Doctors Visit	20	\$ 9.34				\$ 9.34
July 7/20	County office S/Sgt Introduction	18	\$ 8.41				\$ 8.41
July 15/20	Fuel Fund Meeting County office	18	\$ 8.41				\$ 8.41
July 19/20	Chez Delauriez Centarian Birthday	28	\$ 13.08				\$ 13.08
July 23/20	County office	18	\$ 8.41				\$ 8.41
July 30/20	Meeting Re Court House Reno's	18	\$ 8.41				\$ 8.41
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	Internet					\$ 22.50	\$ 22.50
TOTAL		120	\$ 56.04	\$ -	\$ -	\$ 22.50	\$ 78.54

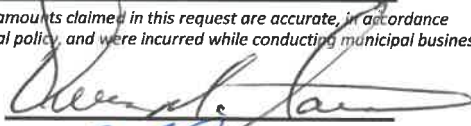
TYPES OF EXPENSE	
Expense Codes	
TRV - Travel -Mileage, Parking, Hotel, Taxi	
ML - Meal Expenses	
PD - Professional Development (training/conference)	
OTH - Other - ie: Phone, Internet, Incidentals	
Mileage Rate - \$0.4670/KM	

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 6

Signature:



Date:

Sept. 25/2020

Approved by:



(Municipal Clerk/Deputy Clerk/Director)

Office Use Only	
TRV - GL# - 10-210-2110-202127	\$ 56.04
ML - GL# - 10-210-2110-202127	\$ -
PD - GL# - 10-210-2110-202127	\$ -
OTH - GL# - 10-210-2110-202127	\$ 22.50
TOTAL	\$ 78.54