## MUNICIPALITY OF THE COUNTY OF TIGONI

## **Council Expense Claim Report**

Name:

**Harris McNamara** 

Month/Year:

November-20

OFFICE USE ONLY Paid by Municipality

AMOUNT

**District:** 

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)
02-Nov-20	Council Meeting - Swearing in	79.8	\$ 37.27				\$ 37.27
09-Nov-20	Regular Council & COW	79.8	\$ 37.27				\$ 37.27
17-Nov-20	New Councillor Training	79.8	\$ 37.27				\$ 37.27
18-Nov-20	New Councillor Training	79.8	\$ 37.27				\$ 37.27
23-Nov-20	Council/COW	79.8	\$ 37.27				\$ 37.27
24-Nov-20	New Councillor Training	79.8	\$ 37.27				\$ 37.27
30-Nov-20	Training	79.8	\$ 37.27				\$ 37.27
			\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
	Internet					\$ 22.50	\$ 22.50
	Cell Phone Stipend				8	\$ 40.00	\$ 40.00
	TOTAL	558.6	\$ 260.87	\$ -	\$ -	\$ 62.50	\$ 323.37

TYPES OF EXPENSE	
	Expense Codes
TRV - Travel -Milea	age, Parking, Hotel, Taxi
ML - Meal Expense	es
PD - Professional D	Development (training/conference)
OTH - Other - ie: P	hone, Internet, Incidentals
Mileage Rate - \$0.	4670/KM

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

Signature:

Approved by:

(Municipal CAO/Deputy Clerk/Director)

OTH - GL# - 10-210-2110-202130 \$

TOTAL

260.87

62.50

323.37

Date:

Office Use Only	
TRV - GL# - 10-210-2110-202130	\$
ML- GL# - 10-210-2110-202130	\$
PD - GL# - 10-210-2110-202130	\$

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