

MUNICIPALITY OF THE COUNTY OF
ANTIGONISH

Council Expense Claim Report

Name: ^{HAR} Harris McNamara ⁰¹⁵ Month/Year: January-21

District: **9**

OFFICE USE ONLY
Paid by Municipality

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
11-01-2021	Regular Committee of the Whole	79.8	\$ 37.27				\$ 37.27	
19-01-2021	Strategic Planning Meeting	79.8	\$ 37.27				\$ 37.27	
20-01-2021	Strategic Planning Meeting (7:00-21:00)	79.8	\$ 37.27				\$ 37.27	
25-01-2021	Regular Committee of the Whole & Council Mtg.	79.8	\$ 37.27				\$ 37.27	
20-01-2021	Once monthly meeting in morning 09:30 - 11:00	79.8	\$ 37.27				\$ 37.27	
							\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
	Internet					\$ 22.50	\$ 22.50	
	Cell Phone Stipend					\$ 40.00	\$ 40.00	
TOTAL		399	\$ 186.34	\$ -	\$ -	\$ 62.50	\$ 248.84	\$ -

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 9
Signature: James Harris McNamara

Date: Feb 02/2021

Approved by: [Signature]
(Municipal CAO/Deputy Clerk/Director)

Office Use Only	
TRV - GL# - 10-210-2110-202130	\$ 186.34
ML - GL# - 10-210-2110-202130	\$ -
PD - GL# - 10-210-2110-202130	\$ -
OTH - GL# - 10-210-2110-202130	\$ 62.50
TOTAL	\$ 248.84