

Council Expense Claim Report

Name: Sh

Shawn Brophy (SHA030)

Month/Year

November-20

OFFICE USE ONLY Paid by

District: 4

District:	4									Municipality
Date	Details of Expense	Km Travelled	TR	AVEL(\$) TRV	MEAL (\$) MI	PROFESSIONAL DEVELOPMENT (\$) . PD	OTHER (\$) OTH	Am	ount (\$)	AMOUNT
9-Nov-20	Council/COW	14.4	\$	6.72				\$	6.72	
23-Nov-20	Asset Management/COW/Special Council	14.4	\$	6.72				\$	6.72	
25-Nov-20	Friends of the harbour	14.4	\$	6.72				\$	6.72	
			\$	-				\$	-	
			\$	-				\$	-	
			\$	-				\$	-	
			\$	-				\$	-	
			\$	-				\$	-	
			\$	-				\$	-	
			\$	-				\$		
	Internet						\$ 22.50	\$	22.50	
	Cell Phone Stipend			-						
	TOTAL	43.2	\$	20.17	\$ -	\$ -	\$ 22.50	\$	42.67	\$

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	

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 4

Signature:

Approved by:

(Municipal CAO/Deputy Clerk/Director)

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

Date:

Office Use Only		ESCHIENCES AND
TRV - GL# - 10-210-2110-202125	\$	20.17
ML- GL# - 10-210-2110-202125	\$	-
PD - GL# - 10-210-2110-202125	\$	-
OTH - GL# - 10-210-2110-202125	\$	22.50
TOTAL	Ś	42.67

Jan 28/21