MUNICIPALITY OF THE COUNTY OF

Council Expense Report

Name: Glenn Horne (GLE010) Month/Year

July, 2021

CAO

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)
	None		\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
7/10-7			\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
		- ** * 53	\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
			\$ -				\$ -
	TOTAL	0	\$ -	\$ -	\$ -	\$ -	\$ -

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 \$ 36.00 Dinner Total per day 81.00

Aug 16/21

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:

Date:

Approved by:

Office Use Only TRV - GL# - 10-210-2123-201116 \$ ML- GL# - 10-210-2123-201116 \$ PD - GL# - 10-210-2123-201116 \$ -OTH - GL# - 10-210-2123-201116 \$ TOTAL