ANTIGONISH

Council Expense Claim Report

Name:	Harris McNamara (HAR01	5)	Mont	h/Year:	October-21			OFFICE USE CINLY
District:	9							Paid by Municipality
Date		Km Travelled	TRAVEL(\$) TRV	MEAL (\$) IML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$)	Amount (\$)	AMOUNT
12-10-2021	Regular Council Mtg. CoW Mtg.	79.8	\$ 36.83				\$ 36.83	,
26-10-2021	CoW Mtg., Asset Management Mt	79.8	\$ 36.83		9		\$ 36.83	
25-10-2021	Consolidation Mtg Queens St. FX	79.8	\$ 36.83				\$ 36.83	
28-10-2021	Meeting	62.5	\$ 28.84				\$ 28.84	
27-10-2021	Appreciation Dinner St. FX	84.4	\$ 38.95				\$ 38.95	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
	Internet					\$ 22.50	\$ 22.50	
	Cell Phone Stipend					\$ 40.00	\$ 40.00	
11	TOTAL	386.3	\$ 178.28	\$ -	\$ -	\$ 62.50	\$ 240.78	\$ -

Date:

TYPES OF EXPENSE	
Expense Codes	
TRV - Travel -Mileage, Parking, Hotel, Taxi	
VIL - Meal Expenses	
PD - Professional Development (training/confere	nce)
OTH - Other - ie: Phone, Internet, Incidentals	1.86
Villeage Rate - \$0.4615/KIVI	

 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:

Approved by:

(Municipal AO/Deputy Clerk/Director)

Dou 02/2021

Office Use Only	
TRV - GL# - 10-210-2110-202130	\$ 178.28
ML- GL# - 10-210-2110-202130	\$ -
PD - GL# - 10-210-2110-202130	\$ -
OTH - GL# - 10-210-2110-202130	\$ 62.50
TOTAL	\$ 240.78