

## **Council Expense Claim Report**

Name: Harris McNamara (HAR015)

9

Month/Year:

February-22

District:

Date		Km Travelled	TRAVEL(\$	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$)	Amount
22-Feb-22	Asset Management / COW	79.8	\$ 36.8.	3			
23-Feb-22	Joint Council, Guiding Principlesi	84.8	\$ 39.1				\$ 36.
	Chamber of Comerence	84.8	\$ 39.1	1			\$ 39.:
							\$ 39.1
			\$				\$ -
							\$ -
			\$				\$ -
			\$				\$ -
			\$ -		,		\$ -
In	iternet		\$ -				\$ -
	ell Phone Stipend				\$		\$ 22.50
	TOTAL	249.4	115.10		\$	40.00	\$ 40.00
	TO TALL	245.4	115,10	\$ - \$	- \$	62.50	\$ 177.60

	Paid by Municipality
ount (\$)	AMOUNT
36.83	
39.14	
39.14	
-	
22.50	
40.00	

TYPES OF EXPENSE	_
Expense Codes	
TRV - Travel -Mileage, Parking, Hotel, Taxi	
ML - Meal Expenses	_
PD - Professional Development (training/conference	e)
OTH - Other - ie: Phone, Internet, Incidentals	
Mileage Rate - \$0.4615/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 9

Signature:

Harris Mc Dumero

Date:

Approved by:

(Municipal CAO/Deputy Clerk/Director)

Mwch 04/22

Per Diem Rates

\$

\$

\$

\$

Rate per Day

10.00

15.00

20.00

36.00

81.00

Meal

Lunch

Dinner

Incidental

Breakfast

Total per day

Office Use Only	
TRV - GL# - 10-210-2110-202130	\$ 115.10
ML- GL# - 10-210-2110-202130	\$ -
PD - GL# - 10-210-2110-202130	\$
OTH - GL# - 10-210-2110-202130	\$ 62.50
TOTAL	\$ 177.60