

**MUNICIPALITY OF THE COUNTY OF  
ANTIGONISH**

**Council Expense Report**

Name: **Mary MacLellan (MAR120)**

Month/Year

January 2020

**OFFICE USE ONLY**  
Paid by  
Municipality

District: **1**

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
01-Jan-20	New Years Levee	54	\$ 24.76				\$ 24.76	
13-Jan-20	CoW/Council	61	\$ 27.97				\$ 27.97	
20-Jan-20	Forestry	61	\$ 27.97				\$ 27.97	
22-Jan-20	ACALA	54	\$ 24.76				\$ 24.76	
27-Jan-20	Asset Mgmt/CoW	61	\$ 27.97				\$ 27.97	
28-Jan-20	Planning Advisory	61	\$ 27.97				\$ 27.97	
29-Jan-20	Maples Tour	54	\$ 24.76				\$ 24.76	
01-Jan-39	R.K. Nursing Home	54	\$ 24.76				\$ 24.76	
	Internet					\$ 22.50	\$ 22.50	
	Cell Phone Stipend					\$ 40.00	\$ 40.00	
<b>TOTAL</b>		<b>460</b>	<b>\$ 210.91</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 62.50</b>	<b>\$ 273.41</b>	<b>\$ -</b>

TYPES OF EXPENSE:
<b>Expense Codes</b>
TRV - Travel -Mileage, Parking, Hotel, Taxi
ML - Meal Expenses
PD - Professional Development (training/conference)
OTH - Other - ie: Phone, Internet, Incidentals
Mileage Rate - \$0.4585/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 1

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Mary MacLellan Feb. 17 - 2020*

Approved by: \_\_\_\_\_

(Municipal Clerk/Deputy Clerk/Director)

Office Use Only	
TRV - GL# - 10-210-2110-202111	\$ 210.91
ML- GL# - 10-210-2110-202111	\$ -
PD - GL# - 10-210-2110-202111	\$ -
OTH - GL# - 10-210-2110-202111	\$ 62.50
<b>TOTAL</b>	<b>\$ 273.41</b>