

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Report

Name: Neil Corbett (NEI020)

Month/Year: March 2020

District: 9

**OFFICE USE ONLY
Paid by Municipality**

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)
04-Mar-20	Pall.Care Lecture. Dr Blackwell AN	86	\$ 39.43				\$ 39.43
09-Mar-20	Cow/Council	82	\$ 37.60				\$ 37.60
	Internet					\$ 22.50	\$ 22.50
	Cell Phone Stipend					\$ 40.00	\$ 40.00
TOTAL		168	\$ 77.03	\$ -	\$ -	\$ 62.50	\$ 139.53

AMOUNT
\$ -

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 - \$0.4585/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 9

Signature: _____

Date: April 14/2020

Approved by: _____

(Municipal Clerk/Deputy Clerk/Director)

Office Use Only	
TRV - GL# - 10-210-2110-202130	\$ 77.03
ML - GL# - 10-210-2110-202130	\$ -
PD - GL# - 10-210-2110-202130	\$ -
OTH - GL# - 10-210-2110-202130	\$ 62.50
TOTAL	\$ 139.53