

MUNICIPALITY OF THE COUNTY OF ANTIGONISH

Council Expense Claim Report

Name: Donnie MacDonald (DON140)

Month/Year June-22

District: 2

OFFICE USE ONLY
Paid by
Municipality

Date	Details of Expense	Km Travelled	TRAVEL (\$ TRV)	MEAL (\$ ML)	PROFESSIONAL DEVELOPMENT (\$ PL)	OTHER (\$ OTH)	Amount (\$)	AMOUNT
June 06/22	Anntigonish Museum Board	12	\$ 6.14				\$ 6.14	
June 07/22	Committee Of The Whole	16	\$ 8.18				\$ 8.18	
	Council Meeting		\$ -				\$ -	
June 14/22	Committee Of The Whole	16	\$ 8.18				\$ 8.18	
	Municipal Council Meeting		\$ -				\$ -	
June 15/22	A.A.H.S. AGM Board Meeting	6	\$ 3.07				\$ 3.07	
June 20/22	Draft Planning Arisaig	48	\$ 24.54				\$ 24.54	
June 21/22	Draft Planning Lakevale	56	\$ 28.63				\$ 28.63	
June 28/22	Asset Mgmt. Meeting	16	\$ 8.18				\$ 8.18	
	Committee Of The Whole		\$ -				\$ -	
	Municipal Council Meeting							
	Internet					\$ 22.50	\$ 22.50	
	Cell Phone Stipend					\$ 40.00	\$ 40.00	
TOTAL		170	\$ 86.92	\$ -	\$ -	\$ 62.50	\$ 149.42	\$ -

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 - \$0.4615/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 2

Signature: 

Date: July 13/22

Approved by: _____
(Municipal CAO/Deputy Clerk/Director)

Office Use Only	
TRV - GL# - 10-210-2110-202123	\$ 86.92
ML- GL# - 10-210-2110-202123	\$ -
PD - GL# - 10-210-2110-202123	\$ -
OTH - GL# - 10-210-2110-202123	\$ 62.50
TOTAL	\$ 149.42