

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Report

Name: Gary Mattie (GAR010)

Month/Year: June 2020

District: 8

OFFICE USE ONLY
Paid by
Municipality

Date	Details of Expense	Km Travelled	TRAVEL(\$)		MEAL (\$) ML	PROFESSIONAL	OTHER (\$)	Amount (\$)
			TRV			DEVELOPMENT (\$) PD	OTH	
	No meetings - Covid-19		\$ -					\$ -
	Internet						\$ 22.50	\$ 22.50
	Cell Phone Stipend						\$ 40.00	\$ 40.00
TOTAL		0	\$ -	\$ -	\$ -	\$ -	\$ 62.50	\$ 62.50

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 8

Signature: _____

Date: _____

Approved by: _____

(Municipal Clerk/Deputy Clerk/Director)

Office Use Only	
TRV - GL# - 10-210-2110-202129	\$ -
ML - GL# - 10-210-2110-202129	\$ -
PD - GL# - 10-210-2110-202129	\$ -
OTH - GL# - 10-210-2110-202129	\$ 62.50
TOTAL	\$ 62.50