

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Report

Name: Gary Mattie (GAR010)

Month/Year: October-19

District: 8


OFFICE USE ONLY
Paid by Municipality

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
01-Oct-19	Asset Management/CoW	68	\$ 31.18				\$ 31.18	
15-Oct-19	Council/CoW	68	\$ 31.18				\$ 31.18	
			\$ -				\$ -	
	Internet					\$ 22.50	\$ 22.50	
	Cell Phone Stipend					\$ 40.00	\$ 40.00	
TOTAL		136	\$ 62.36	\$ -	\$ -	\$ 62.50	\$ 124.86	\$ -

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	\$ 62.36
ML- GL# - 10-210-2110-202129	\$ -
PD - GL# - 10-210-2110-202129	\$ -
OTH - GL# - 10-210-2110-202129	\$ 62.50
TOTAL	\$ 124.86