

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Claim Report

Name: Donnie MacDonald (DON140) **Month/Year** Jan. 2024
District: 2

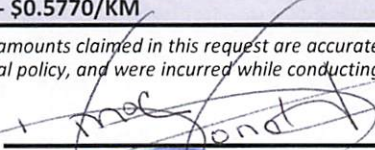
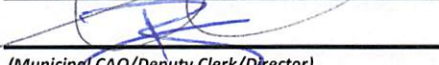
OFFICE USE ONLY
Paid by
Municipality

Date	Details of Expense	Km Travelled	TRAVEL (\$ TRV)	MEAL (\$ ML)	PROFESSIONAL DEVELOPMENT (\$ PL)	OTHER (\$ OTH)	Amount (\$)	AMOUNT
Jan. 04/24	A.R.E.M.O. Meeting	16	\$ 9.23				\$ 9.23	
Jan. 08/24	Antigonish Heritage Museum	12	\$ 6.92				\$ 6.92	
	Board Meeting		\$ -				\$ -	
Jan. 09/24	Committee Of The Whole	16	\$ 9.23				\$ 9.23	
	Municipal Council meeting		\$ -				\$ -	
Jan. 11/24	A.A.H.S. Finance Meeting	16	\$ 9.23				\$ 9.23	
Jan. 23/24	E.R.S.W. Management Meeting	142	\$ 81.93				\$ 81.93	
	Municipal Office Guysborough		\$ -				\$ -	
Jan. 23/24	Asset Management Committee	16	\$ 9.23				\$ 9.23	
	Committee Of The Whole							
Jan. 24/24	A.A.H.S. Strategic Planning	10	\$ 5.77				\$ 5.77	
	Session							
	Internet					\$ 22.50	\$ 22.50	
	Cell Phone Stipend					\$ 40.00	\$ 40.00	
TOTAL		228	\$ 131.56	\$ -	\$ -	\$ 62.50	\$ 194.06	\$ -

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 - \$0.5770/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: 
Approved by: 
 (Municipal CAO/Deputy Clerk/Director)

Date: Mar. 11/24

Office Use Only	
TRV - GL# - 10-210-2110-202123	\$ 131.56
ML- GL# - 10-210-2110-202123	\$ -
PD - GL# - 10-210-2110-202123	\$ -
OTH - GL# - 10-210-2110-202123	\$ 62.50
TOTAL	\$ 194.06