

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Claim Report

Name: **Owen McCarron (OWE040)** Month/Year August-24
 District: **6**

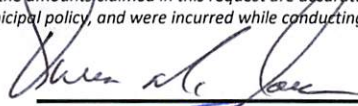
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Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
Aug 6/24	Emancipation Day	22	\$ 12.84				\$ 12.84	
Aug 7/24	Meet with Dr. Hendricks	18	\$ 10.51				\$ 10.51	
Aug 8/24	DQ Miracle treat day	20	\$ 11.68				\$ 11.68	
Aug 8/24	Meet with Brendan Doyle Arena	22	\$ 12.84				\$ 12.84	
Aug 15/24	Indian Independence day	22	\$ 12.84				\$ 12.84	
Aug 20/24	XFM radio ad	22	\$ 12.84				\$ 12.84	
Aug 22/24	Eastern Cdn Softball Championsh	23	\$ 13.43				\$ 13.43	
Aug 26/24	RK Meeting	22	\$ 12.84				\$ 12.84	
27-Aug-24	Meeting SF Smith	18	\$ 10.51				\$ 10.51	
28-Aug-24	ENSE Grand opening	22	\$ 12.84				\$ 12.84	
29-Aug-24	Affordable housing announcemer	23	\$ 13.43				\$ 13.43	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
	Internet					\$ 22.50	\$ 22.50	
TOTAL		234	\$ 136.61	\$ -	\$ -	\$ 22.50	\$ 159.11	\$ -

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- \$0.5838/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 6
 Signature: 

Date: Sept 24/2024

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

Office Use Only	
TRV - GL# - 10-210-2110-202127	\$ 136.61
ML- GL# - 10-210-2110-202127	\$ -
PD - GL# - 10-210-2110-202127	\$ -
OTH - GL# - 10-210-2110-202127	\$ 22.50
TOTAL	\$ 159.11

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