MUNICIPALITY OF THE COUNTY OF
# ANTIGONISH

## Council Expense Report

**Name:** Shirlyn Donovan (SHI130) **Month/Year** July-24

**Municipal Clerk/Treasurer**

OFFICE USE ONLY
Paid by Municipality

| Date | Details of Expense | Km Travelled | TRAVEL($) TRV | MEAL ($) ML | PROFESSIONAL DEVELOPMENT ($) PD | OTHER ($) OTH | Amount ($) | AMOUNT |
|---|---|---|---|---|---|---|---|---|
| | Nothing to Claim | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | | | $ - | | | | $ - | |
| | TOTAL | 0 | $ - | $ - | $ - | $ - | $ 0.00 | $ - |

| 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.*

**Signature:** Shirlyn Donovan **Date:** Sept. 16 2024

**Approved by:** [illegible]

| Office Use Only | |
|---|---|
| TRV - GL# - 10-210-2123-201116 | $ - |
| ML- GL# - 10-210-2123-201116 | $ - |
| PD - GL# - 10-210-2123-201116 | $ - |
| OTH - GL# - 10-210-2123-201116 | $ - |
| TOTAL | $ 0.00 |