

Council Expense Claim Report

Name: Shawn Brophy (SHA030)

District:

Month/Year

November-24

OFFICE USE ONLY
Paid by
Municipality

Date	Details of Expense	Km Travelled	TR	AVEL(\$) TRV	MEAL (\$) M	PROFESSIONAL DEVELOPMENT (\$) L PD	OTHER (\$)	A	mount (\$)	4	AMOUNT
12-Nov-24	Council/Swearing in	14.4	\$	8.41				\$	8.41		Note to the
25-Nov-24	CoW/Council	14.4	-								
November 26 - 28	NSFM Halifax/Return	446	\$	260.37				\$	260.37		
November 26 - 28	NSFM Hotel Westin		\$		ka and t			\$		\$	435
28-Nov-24	RK MacDonald meeting	14.6	\$	8.52				\$	8.52		
			\$					\$	•		
			\$			200		\$			
			\$					\$	-		77-7-
			\$	-				\$	-		
			\$	-				\$	-		
			\$					\$	-		
	Internet						\$ 22.50	\$	22.50		
	Cell Phone Stipend						\$ 40.00	\$	40.00		
	TOTAL	489.4	\$	277.31	\$ -	\$ -	\$ 62.50	\$	339.81	\$	435

TYPES OF EXPENSE
Expense Codes
TRV - Travel -Mileage, Parking, Hotel, Taxi
ML - Meal Expenses
PD - Professional Development (training/conference
PD - Professional Development (training/conference OTH - Other - Ie-Phone, Internet, Incidentals
Mileage Rate - \$0.5838/KM

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 4

Signature:

Shown Broghy

Date:

Dec 20/2024

Per Diem Rates

\$

\$

Rate per Day

10.00

15.00

20.00

36.00

81.00

Meal

Lunch

Dinner

Incidental

Breakfast

Total per day

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

Office Use Only	
TRV - GL# - 10-210-2110-202125	\$ 277.31
ML- GL# - 10-210-2110-202125	\$
PD - GL# - 10-210-2110-202125	\$
OTH - GL# - 10-210-2110-202125	\$ 62.50
TOTAL	\$ 339.81