

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Report

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

OFFICE USE ONLY
Paid by Municipality

Date		Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
2024-12-06	Roberts Rules of Order Training Bible Hill	226	\$ 131.94				\$ 131.94	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
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			\$ -				\$ -	
			\$ -				\$ -	
TOTAL		226	\$ 131.94	\$ -	\$ -	\$ -	\$ 131.94	\$ -

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: Dec. 17/24

Approved by: [Signature]

Office Use Only	
TRV - GL# - 10-210-2123-201116	\$ 131.94
ML - GL# - 10-210-2123-201116	\$ -
PD - GL# - 10-210-2123-201116	\$ -
OTH - GL# - 10-210-2123-201116	\$ -
TOTAL	\$ 131.94