

**MUNICIPALITY OF THE COUNTY OF  
ANTIGONISH**

**Council Expense Claim Report**

Name: Owen McCarron (OWE040) Month/Year October-24

District: **6**

**OFFICE USE ONLY**  
Paid by  
Municipality

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
Oct2/24	Meeting with Mary MacLellan	18	\$ 10.51				\$ 10.51	
Oct 3/24	Meeting James RiverCommunity	45	\$ 26.27				\$ 26.27	
Oct 4/24	Radio Ads XFM	24	\$ 14.01				\$ 14.01	
Oct 7/24	Arena Manager Interviews	18	\$ 10.51				\$ 10.51	
Oct 8/24	Reg Council Mtg	18	\$ 10.51				\$ 10.51	
Oct 11/24	County office signing paperwork	18	\$ 10.51				\$ 10.51	
Oct 15/24	Sign Documents Lawn firm	17	\$ 9.92				\$ 9.92	
Oct 16/24	Arena board mtg	22	\$ 12.84				\$ 12.84	
Oct 17/24	Recreation Conference STFX	22	\$ 12.84				\$ 12.84	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
	Internet					\$ 22.50	\$ 22.50	
<b>TOTAL</b>		<b>202</b>	<b>\$ 117.93</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 22.50</b>	<b>\$ 140.43</b>	<b>\$ -</b>

TYPES OF EXPENSE
<b>Expense Codes</b>
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: NOV 12/24

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

Office Use Only	
TRV - GL# - 10-210-2110-202127	\$ 117.93
ML - GL# - 10-210-2110-202127	\$ -
PD - GL# - 10-210-2110-202127	\$ -
OTH - GL# - 10-210-2110-202127	\$ 22.50
<b>TOTAL</b>	<b>\$ 140.43</b>