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MUNICIPALITY OF THE COUNTY OF  
**ANTIGONISH**

Council Expense Claim Report

Name: Sterling Garvie Month/Year: 01/2025  
District: 10

OFFICE USE ONLY  
Paid by  
Municipality

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
Jan 17/2025	NSFM Code of conduct - PH	116	\$ 67.72				\$ 67.72	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
	Internet					\$ 22.50	\$ 22.50	
<b>TOTAL</b>		<b>116</b>	<b>\$ 67.72</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 22.50</b>	<b>\$ 90.22</b>	<b>\$ -</b>

TYPES OF EXPENSE	
Expense Codes	
TRV - Travel - Mileage, Parking, Hotel, Taxi	
ML - Meal Expenses	
PD - Professional Development (training/conference)	
OTH - Other - le-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 10  
Signature: 

Date: Feb 26, 2025

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

Office Use Only	
TRV - GL# - 10-210-2110-202131	\$ 67.72
ML - GL# - 10-210-2110-202131	\$ -
PD - GL# - 10-210-2110-202131	\$ -
OTH - GL# - 10-210-2110-202131	\$ 22.50
<b>TOTAL</b>	<b>\$ 90.22</b>

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FEB 19 2025

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