

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Claim Report

Name: Richelle MacLaughlin (RIC020) **Month/Year** February-25
District: 3

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)
FEB 5/25	MTNG COUNTY OFFICE-FIRELOCH	24	\$ 14.01				\$ 14.01
FEB 6/25	MTNG PARC	22	\$ 12.84				\$ 12.84
FEB 11/25	REG MEETING VIA ZOOM	0	\$ -				\$ -
FEB 14/25	CNPRSA BOARD	22	\$ 12.84				\$ 12.84
FEB 19/25	JOINT COUNCIL MTNG	22	\$ 12.84				\$ 12.84
FEB 24/25	STRATEGIC PLANNING MTG	20	\$ 11.68				\$ 11.68
FEB 25/25	STRATEGIC PLANNING MTG	20	\$ 11.68				\$ 11.68
FEB 26/25	MTNG WC/SPECIAL	24	\$ 14.01				\$ 14.01
			\$ -				\$ -
			\$ -				\$ -
	Internet					\$ 22.50	\$ 22.50
	Cell Phone Stipend					\$ 40.00	\$ 40.00
TOTAL		154	\$ 89.91	\$ -	\$ -	\$ 62.50	\$ 152.41

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.

District 3
 Signature: 

Date: MARCH 11/25

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

Office Use Only	
TRV - GL# - 10-210-2110-202124	\$ 89.91
ML - GL# - 10-210-2110-202124	\$ -
PD - GL# - 10-210-2110-202124	\$ -
OTH - GL# - 10-210-2110-202124	\$ 62.50
TOTAL	\$ 152.41