MUNICIPALITY OF THE COUNTY OF
ANTIGONISH

Council Expense Report

Name: Shirlyn Donovan (SHI130) **Month/Year** September-25

CAO

OFFICE USE ONLY
Paid by Municipality

Date	Details of Expense	Km Travelled	TRAVEL($) TRV	MEAL ($) ML	PROFESSIONAL DEVELOPMENT ($) PD	OTHER ($) OTH	Amount ($)	AMOUNT
2025-09-02	Meeting with Friends of Cribbons Bea	44	$ 26.10				$ 26.10	
2025-09-11	Meeting with Contractor at Cribbons	44	$ 26.10				$ 26.10	
			$ -				$ -	
			$ -				$ -	
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			$ -				$ -	
			$ -				$ -	
	TOTAL	88	$ 52.20	$ -	$ -	$ -	$ 52.20	$ -

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 - $0.5932/KM

Per Diem Rates	
Meal	Rate per Day
Incidental	$ 10.00
Breakfast	$ 15.00
Lunch	$ 25.00
Dinner	$ 40.00
Total per day	$ 90.00

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:** Nov. 3/25

Approved by: M. MacDonald