

**MUNICIPALITY OF THE COUNTY OF
ANTIGONISH**

Council Expense Claim Report

Name: **Harris McNamara (HAR015)** Month/Year: March-26
 District: **9**

**OFFICE USE ONLY
Paid by Municipality**

Date	Details of Expense	Km Travelled	TRAVEL(\$) TRV	MEAL (\$) ML	PROFESSIONAL DEVELOPMENT (\$) PD	OTHER (\$) OTH	Amount (\$)	AMOUNT
04-Mar-26	Governance & Roberts Rules	79.8	\$ 47.34				\$ 47.34	
10-Mar-26	Council/CoW	79.8	\$ 47.34				\$ 47.34	
10-Mar-26	BOD Meeting RK	82.6	\$ 49.00				\$ 49.00	
13-Mar-26	Meeting RK	82.6	\$ 49.00				\$ 49.00	
18-Mar-26	Infrastructure&Executive RK	82.6	\$ 49.00				\$ 49.00	
24-Mar-26	Cow/Asset Management	79.8	\$ 47.34				\$ 47.34	
26-Mar-26	BOD Meeting RK	79.8	\$ 47.34				\$ 47.34	
			\$ -				\$ -	
			\$ -				\$ -	
			\$ -				\$ -	
	Internet					\$ 22.50	\$ 22.50	
	Cell Phone Stipend					\$ 40.00	\$ 40.00	
TOTAL		567	\$ 336.34	\$ -	\$ -	\$ 62.50	\$ 398.84	\$ -

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.

District 9
 Signature: 
 Approved by: 
 (Municipal CAO/Deputy Clerk/Director)

Date: APRIL 28, 2026

Office Use Only	
TRV - GL# - 10-210-2110-202130	\$ 336.34
ML - GL# - 10-210-2110-202130	\$ -
PD - GL# - 10-210-2110-202130	\$ -
OTH - GL# - 10-210-2110-202130	\$ 62.50
TOTAL	\$ 398.84