



### Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 20-08-20 Month: July Year: 2020

General Council Related Business		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage)		One Way /Return	Mileage Claim km's-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total	GL Coding		
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr	CAT 2 Project CAT4
16-07-20	Homeland Housing Virtual Meeting									-							-			A11 Homeland Housing Found
22-07-20	Homeland Housing Meeting									-							-			A11 Homeland Housing Found
										-							-			
										-							-			
										-							-			
										-							-			
										-							-			
										-							-			
										-							-			
Sub-Total																	\$	-		

Professional Development		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding		
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project CAT4
										-							-			
										-							-			
										-							-			
										-							-			
										-							-			
										-							-			
Sub-Total																	\$	-		



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 20-08-20 Month: July Year: 2020

AUMA or FCM Convention or Board Expenses		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region... specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1221	1221	1222	1226	1227	1225	1224			ACCT	Cost Ctr	Project CAT4
										-							-				
										-							-				
										-							-				
										-							-				

Sub-Total \$ -

Office of the Mayor (Official Events & Duties)		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region... specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total	GL Coding				
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1220	1220	1225	1226	1221	1222	1222			ACCT	Cost Ctr	CAT3	CAT4
										-							-					
										-							-					
										-							-					
										-							-					

Sub-Total \$ -



Council Member Monthly Expense Claim Form

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Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 20-08-20 Month: July Year: 2020

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding				Expense Type
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project CAT7		
	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)						
07-05-20	Mobile Device	55.00	6404	1010	516108 N/A		Mobile Device Charge
07-01-20	Home Office Internet	70.00	6404	1010	516108 N/A		Office/Operating Supp

Sub-Total \$ 125.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
								-
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ -



### Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 20-08-20 Month: July Year: 2020

Expenses Paid Directly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
							-
							-
							-
							-
							-
							-
							-
							-
							-
							-

Sub-Total \$ -

- Claim Reminders:**  
**\*\* See Council Policy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses\*\***
1. Detailed receipts must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.
  2. Meter parking may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.
  3. A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location
  4. For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.
  5. It is recommended to claim mileage based on the standard mileage chart. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)
  6. Expense claims must be submitted within 10 days of the following month
  7. Incomplete expense claims will not be processed

Grand Total Expenses	\$	125.00
Less: BMO MasterCard	\$	-
Less: Expenses Paid	\$	-
Net to be paid to Councillor Joly	\$	125.00

Training and Development Activities		
Activity Name	Description of Activity Content and any learning/information worth sharing	
Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees)		
Date (DD/MM/YY)	Board, Committee, Agency Name	Updates
2020-07-17	Committee of the Whole	



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name:

Councillor Joly

Date Submitted

20-08-20

Month

July

Year

2020




### Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name:

Date Submitted:  Month:  Year:

**Authorizations & Approvals** Councillor Joly      July      2020

**Preparer**  
 If claim form was prepared by an individual other than the Council Member, sign and date below  
 This expense claim form was prepared in accordance with all information provided by the Council Member at the time of submission.

Rayann Laforce \_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_  
 Preparer's Signature

**Council Member**  
 I certify that the expenditures claimed on this form were incurred while conducting business on behalf of the City of St. Albert. I understand that submitting a fraudulent claim is a very serious matter. I understand that I am solely responsible for the details of the claim even if the form was completed by another individual. All applicable receipts have been attached.

\_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_  
 Council Member's Signature

**Accounts Payable**  
 I have reviewed this claim for mathematical accuracy and documentation support.

\_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_  
 Accounts Payable Personnel Signature

**Chief Financial Officer**  
 I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement

\_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_  
 Chief Financial Officer Signature

**Chief Administrative Officer (City Manager)**  
 I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement

\_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_  
 City Manager Signature

**From:** [REDACTED]  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** FW: Councillor Joly (July 2020 Expenses)  
**Date:** September 17, 2020 1:24:03 PM  
**Attachments:** [Councillor Joly Inv #July2020.pdf](#)

---

Hi Lynda,

Please see attached expenses for Councillor Joly.

[REDACTED]  
Administrative Assistant  
Office of the Chief Administrative Officer  
P: 780-418-6096 | [spreston@stalbert.ca](mailto:spreston@stalbert.ca)  
***Bringing Our Best to Cultivate An Amazing Community***

---

**From:** Kevin Scoble <[REDACTED]>  
**Sent:** September 17, 2020 12:49 PM  
**To:** [REDACTED]  
**Cc:** Sarah Preston <spreston@stalbert.ca>  
**Subject:** RE: Councillor Joly (July 2020 Expenses)

Approved

**Kevin Scoble**  
*Chief Administrative Officer*  
[REDACTED] [REDACTED]

***Bringing Our Best to Cultivate An Amazing Community***

---

**From:** [REDACTED]  
**Sent:** Friday, August 21, 2020 1:48 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** FW: Councillor Joly (July 2020 Expenses)

For approval

[REDACTED]  
*Senior Executive Assistant*  
*Office of the Chief Administrative Officer*  
[REDACTED] [REDACTED]

***Bringing Our Best to Cultivate An Amazing Community***

---

**From:** Diane McMordie <[dcmcardie@stalbert.ca](mailto:dcmcardie@stalbert.ca)>

**Sent:** Friday, August 21, 2020 1:00 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Fw: Councillor Joly (July 2020 Expenses)

approved, ready for Kevin's review and approval

## **Diane McMordie, CPA, CMA**

*Director of Finance & Assessment/CFO*

[REDACTED] | [REDACTED] | [REDACTED]

City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9

[REDACTED] | [www.stalbert.ca](http://www.stalbert.ca)

---

**From:** [REDACTED]  
**Sent:** August 21, 2020 10:08 AM  
**To:** Diane McMordie [REDACTED]  
**Subject:** Councillor Joly (July 2020 Expenses)

Hi Diane

Attached is Councillor Joly's expense claim for July. Could you please approve & forward to Kevin for approval.

Thank you

[REDACTED]  
*Accounts Payable Coordinator | Financial Services*  
P: 780-459-1626 | F: 780-459-1734

City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9

[REDACTED] | [www.stalbert.ca](http://www.stalbert.ca)

[www.facebook.com/cityofstalbert](https://www.facebook.com/cityofstalbert) | [www.twitter.com/cityofstalbert](https://www.twitter.com/cityofstalbert)



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Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 04-09-20 Month August Year 2020

General Council Related Business		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	Mileage Claim km's-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses * Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1220	1220	1225	1226	1221	1222	1222	ACCT	Cost Ctr	Project CAT4	
										-									A10	General Council Business
										-									A10	General Council Business
										-										
										-										
										-										
										-										
										-										
										-										
										-										
Sub-Total																\$	-			

Professional Development		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses * Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1221	1221	1222	1226	1227	1225	1224	ACCT	Cost Ctr	Project CAT4	
										-										
										-										
										-										
										-										
										-										
										-										
										-										
										-										
Sub-Total																\$	-			



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 04-09-20 Month: August Year: 2020

AUMA or FCM Convention or Board Expenses		In-Region Mileage Claim based on Chart		One Way (Return)	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way (Return)	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration (Event Ticket)	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	Project CAT4	
										-											
										-											
										-											
										-											
										-											

Sub-Total \$ -

Office of the Mayor (Official Events & Duties)		In-Region Mileage Claim based on Chart		One Way (Return)	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way (Return)	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration (Event Ticket)	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr	CAT3	CAT4
										-											
										-											
										-											
										-											
										-											

Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 04-09-20 Month August Year 2020

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding			
Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month) Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)			ACCT	Cost Ctr	Project CAT7	Expense Type
06/01/2019	Mobile Device	55.00	6404	1010	516108	N/A Mobile Device Charge
01/01/2019	Home Office Internet	70.00	6404	1010	516108	N/A Office/Operating Supp

Sub-Total \$ 125.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare *	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								-
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 04-09-20 Month August Year 2020

Table with columns: Date (DD/MM/YY), Expenses Paid Directly by the City (eg. Petty Cash), Other Transportation & Parking \*, Accommodations \*, Airfare\*, Meals \*, Registration /Event Ticket, General Expenses \*, Total

Sub-Total \$ -

- Claim Reminders: See Council Policy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses\*\*
1. Detailed receipts must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.
2. Meter parking may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.
3. A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location
4. For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.
5. It is recommended to claim mileage based on the standard mileage chart. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)
6. Expense claims must be submitted within 10 days of the following month
7. Incomplete expense claims will not be processed

Summary table: Grand Total Expenses \$ 125.00, Less: BMO MasterCard \$ -, Less: Expenses Paid \$ -, Net to be paid to Councillor Joly \$ 125.00

Training and Development Activities table with columns: Activity Name, Description of Activity Content and any learning/information worth sharing
Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees) table with columns: Date, Board, Committee, Agency Name, Updates



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 04-09-20 Month August Year 2020

Authorizations & Approvals Councillor Joly August 2020

Preparer  
If claim form was prepared by an individual other than the Council Member, sign and date below  
This expense claim form was prepared in accordance with all information provided by the Council Member at the time of submission.  
Preparer's Signature Date (DD/MM/YY)

Council Member  
I certify that the expenditures claimed on this form were incurred while conducting business on behalf of the City of St. Albert. I understand that submitting a fraudulent claim is a very serious matter. I understand that I am solely responsible for the details of the claim even if the form was completed by another individual. All applicable receipts have been attached.  
Council Member's Signature Date (DD/MM/YY)

Accounts Payable  
I have reviewed this claim for mathematical accuracy and documentation support.  
Accounts Payable Personnel Signature Date (DD/MM/YY)

Chief Financial Officer  
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement  
Chief Financial Officer Signature Date (DD/MM/YY)

Chief Administrative Officer (City Manager)  
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement  
City Manager Signature Date (DD/MM/YY)

**From:** [REDACTED]  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** FW: Cllr Joly August Expense Claim  
**Date:** Thursday, September 17, 2020 1:29:36 PM  
**Attachments:** [Joly VirginPDF-12.pdf](#)  
[Joly ShawInvoice.pdf](#)  
[Joly - Council Expense Claim.xlsm](#)

---

Hi Danielle,

Please see attached expenses for Councillor Joly.  
Thanks.

[REDACTED]  
Administrative Assistant  
Office of the Chief Administrative Officer

*Bringing Our Best to Cultivate An Amazing Community*

---

**From:** Kevin Scoble [REDACTED]  
**Sent:** September 17, 2020 12:52 PM  
**To:** [REDACTED]  
**Subject:** RE: Cllr Joly August Expense Claim

Approved

[REDACTED]  
*Chief Administrative Officer*

*Bringing Our Best to Cultivate An Amazing Community*

---

**From:** [REDACTED]  
**Sent:** Tuesday, September 1, 2020 1:34 PM  
**To:** [REDACTED]  
**Subject:** FW: Cllr Joly August Expense Claim

Hi Kevin,  
For approval.  
Thx.

[REDACTED]  
Administrative Assistant  
Office of the Chief Administrative Officer

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---

**From:** Diane McMordie [REDACTED]  
**Sent:** September 1, 2020 12:42 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** FW: Cllr Joly August Expense Claim

Approved by me. For Kevin's approval then back to Danielle Parsons with the email string.

Thanks

**Diane McMordie, CPA, CMA**  
*Director, Finance & Assessment / Chief Financial Officer*  
[REDACTED] [REDACTED]  
City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9  
[REDACTED] | [www.stalbert.ca](http://www.stalbert.ca)

---

**From:** Accounts\_Payable  
**Sent:** September 1, 2020 10:37 AM  
**To:** Diane McMordie [REDACTED]  
**Subject:** FW: Cllr Joly August Expense Claim

Good morning Diane,  
I have reviewed Councillor Joly's August expense claim for mathematical accuracy and back up. Please review and approve if all looks good to you.  
Thanks,

[REDACTED]  
*Accounts Payable Coordinator | Financial Services*  
[REDACTED] [REDACTED]

City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9  
[REDACTED] | [www.stalbert.ca](http://www.stalbert.ca)

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Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 02-10-20  
Month: September Year: 2020

General Council Related Business		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	Mileage Claim km's-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total	GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1220	1220	1225	1226	1221	1222	1222		ACCT Cost Ctr Project CAT4
Sub-Total																	\$	-

Professional Development		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1221	1221	1222	1226	1227	1225	1224		ACCT Cost Ctr Project CAT4
Sub-Total																	\$	-



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 02-10-20  
Month: September Year: 2020

AUMA or FCM Convention or Board Expenses		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region-specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To											ACCT	Cost Ctr	CAT 2 Project	CAT4
								CAT7		1221	1221	1222	1226	1227	1225	1224					
										-											
										-											
										-											
										-											
										-											

Sub-Total \$ -

Office of the Mayor (Official Events & Duties)		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region-specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To											ACCT	Cost Ctr	CAT3	CAT4
										1220	1220	1225	1226	1221	1222	1222					
										-											
										-											
										-											
										-											
										-											

Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 02-10-20 Month: September Year: 2020

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding			
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)						
06/01/2019	Mobile Device	55.00				
01/01/2019	Home Office Internet	70.00	6404	1010	516108 N/A	Mobile Device Charge
			6404	1010	516108 N/A	Office/Operating Supp

Sub-Total \$ 125.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								-
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 02-10-20  
Month: September Year: 2020

Expenses Paid Directly by the City (eg. Petty Cash)		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								-
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ -

Claim Reminders:

\*\* See Council Policy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses\*\*

- Detailed receipts must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.
- Meter parking may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.
- A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location
- For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.
- It is recommended to claim mileage based on the standard mileage chart. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)
- Expense claims must be submitted within 10 days of the following month
- Incomplete expense claims will not be processed

Grand Total Expenses	\$ 125.00
Less: BMO MasterCard	\$ -
Directly	\$ -
<b>Net to be paid to: Councillor Joly</b>	<b>\$ 125.00</b>

Training and Development Activities		
Activity Name	Description of Activity Content and any learning/information worth sharing	
Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees)		
Date	Meeting	Updates
02-09-20	Intermunicipal Committee Framework (Sturgeon County)	
16-09-20	Homeland Housing	
24-09-20	Environmental Advisory Committee	



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 02-10-20

Month September Year 2020

28-09-20	In Camera - Provincial Landscape	



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 02-10-20

Month September Year 2020

Authorizations & Approvals

Councillor Joly September 2020

**Preparer**  
If claim form was prepared by an individual other than the Council Member, sign and date below  
This expense claim form was prepared in accordance with all information provided by the Council Member at the time of submission.  
Preparer's Signature \_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_

**Council Member**  
I certify that the expenditures claimed on this form were incurred while conducting business on behalf of the City of St. Albert. I understand that submitting a fraudulent claim is a very serious matter. I understand that I am solely responsible for the details of the claim even if the form was completed by another individual. All applicable receipts have been attached.  
Council Member's Signature \_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_

**Accounts Payable**  
I have reviewed this claim for mathematical accuracy and documentation support.  
Accounts Payable Personnel Signature \_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_

**Chief Financial Officer**  
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement  
Chief Financial Officer Signature \_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_

**Chief Administrative Officer (City Manager)**  
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement  
City Manager Signature \_\_\_\_\_ Date (DD/MM/YY) \_\_\_\_\_

**From:** [REDACTED]  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** FW: FOR APPROVAL: Joly September Expense Claim - For Approval  
**Date:** Thursday, October 8, 2020 4:37:39 PM  
**Attachments:** [Joly Phone.pdf](#)  
[Joly Internet.pdf](#)  
[Joly - Council Expense Claim.xlsm](#)  
[Copy of Joly - Council Expense Claim.pdf](#)

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Approved below.

Thanks,

[REDACTED]  
*Senior Executive Assistant  
Office of the Chief Administrative Officer*  
[REDACTED] | [REDACTED]

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**From:** Kevin Scoble [REDACTED]  
**Sent:** Thursday, October 8, 2020 4:33 PM  
**To:** [REDACTED]  
**Subject:** RE: FOR APPROVAL: Joly September Expense Claim - For Approval

Approved

**Kevin Scoble**  
*Chief Administrative Officer*  
[REDACTED] [REDACTED]

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**From:** [REDACTED]  
**Sent:** Wednesday, October 7, 2020 11:45 AM  
**To:** Kevin Scoble [REDACTED]  
**Subject:** FOR APPROVAL: Joly September Expense Claim - For Approval

Hi,

For approval.

Thanks,

[REDACTED]  
*Senior Executive Assistant  
Office of the Chief Administrative Officer*  
[REDACTED] | [REDACTED].ca

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**From:** Diane McMordie [REDACTED]  
**Sent:** Wednesday, October 7, 2020 11:18 AM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** FW: Joly September Expense Claim - For Approval

I approve. For Kevin's review then back to Danielle

**Diane McMordie, CPA, CMA**  
*Director, Finance & Assessment / Chief Financial Officer*  
[REDACTED]  
City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9  
[REDACTED] | [www.stalbert.ca](http://www.stalbert.ca)

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**From:** [REDACTED]  
**Sent:** October 7, 2020 11:03 AM  
**To:** Diane McMordie [REDACTED]  
**Subject:** FW: Joly September Expense Claim - For Approval

Hi Diane,  
I have reviewed the attached September expense claim for Councillor Joly for back up and mathematical accuracy, and it looks good to me.  
Please review the attached and approve if all looks good.  
Thanks,

[REDACTED]  
*Accounts Payable Coordinator | Financial Services*  
[REDACTED]  
City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9  
[REDACTED] | [www.stalbert.ca](http://www.stalbert.ca)

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**From:** [REDACTED]  
**Sent:** Tuesday, October 6, 2020 12:38 PM  
**To:** [REDACTED]  
**Subject:** FW: Joly September Expense Claim Updated

Good morning,

Please see the below and attached.

Thank you,

[REDACTED]  
*Administrative Assistant  
Office of the Mayor and Councillors*  
[REDACTED]

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**From:** Natalie Joly  
**Sent:** October 6, 2020 12:37 PM  
**To:** [REDACTED]  
**Subject:** Re: Joly September Expense Claim Updated

Looks good, thanks.

**Natalie Joly**  
*City of St Albert Councillor*  
P: 780-240-2303 | [njoly@stalbert.ca](mailto:njoly@stalbert.ca) | [@nataliejolyT8N](https://twitter.com/nataliejolyT8N)

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**From:** [REDACTED]  
**Sent:** Tuesday, October 6, 2020 12:09 PM  
**To:** Natalie Joly <[njoly@stalbert.ca](mailto:njoly@stalbert.ca)>  
**Subject:** FW: Joly September Expense Claim Updated

Good morning,

Just a quick check on my part that you received the below/attached.

Thank you,

[REDACTED]  
*Administrative Assistant  
Office of the Mayor and Councillors*  
[REDACTED]

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**From:** [REDACTED]

**Sent:** October 2, 2020 11:48 AM

**To:** Natalie Joly <[njoly@stalbert.ca](mailto:njoly@stalbert.ca)>

**Subject:** RE: Joly September Expense Claim Updated

Good morning,

I removed the In Camera – Service level discussion from the bottom piece as the information was not available to the public.

I have attached the above mentioned here for your approval. Should there be any amendments please let me know.

Please accept this email as my authorization.

Thank you,

[REDACTED]  
*Administrative Assistant*  
*Office of the Mayor and Councillors*  
[REDACTED] [REDACTED]

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