From: To:

Accounts Payable

**Subject:** FW: June Expense Claim - For your review

**Date:** July 9, 2020 10:38:18 AM

Attachments: Watkins - Council Expense Claim - Editable.xlsm

Good morning,

Please find attached Cllr Watkin's approved expense claim form.

Kind Regards,

Rayann

Executive Assistant | Office of the Mayor and Council

P:

Bringing Our Best to Cultivate An Amazing Community

From: Ray Watkins < <a href="mailto:rwatkins@stalbert.ca">rwatkins@stalbert.ca</a>>

Sent: July 9, 2020 10:34 AM

To:

Subject: RE: June Expense Claim - For your review

Approved.

Ray Watkins Councillor



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

www.facebook.com/cityofstalbert | www.twitter.com/cityofstalbert



From:

**Sent:** July 8, 2020 4:40 PM

**To:** Ray Watkins < <a href="mailto:rwatkins@stalbert.ca">rwatkins@stalbert.ca</a>>

Subject: June Expense Claim - For your review

Hi Cllr Watkins,

Please see the attached expenses for your review.

Thanks!

Rayann

Executive Assistant | Office of the Mayor and Council

Bringing Our Best to Cultivate An Amazing Community



Select From List Do not

enter in "Grey" cells

Councillor Watkins Name:

2020 Date Submitted 08-06-20 Month

In-Region Milea	ge Claim based on Chart	One Way /Return Chart)	Out-of-Region Milea	ge Claim (or In-Region,	One Way /Return	Mileage Claim km's- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare* Me		ation Ticket General Expenses	* Total		GL Coding	
From	То		From	То	CAT7_		1220	1220	122	5 1226	1221	1222 12	22	ACCT	CAT : Cost Ctr Project	2 ct CAT4
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			In-Region Mileage Claim based on Chart (Return Chart)	In-Region Mileage Claim based on Chart / (Return Chart) specific	One Way km's (From Out-of-Region Mileage Claim for In-Region, Return Chart)  One Way km's (From Out-of-Region Mileage Claim for In-Region, Specific mileage)	Mileage Claim   Mileage Claim   One Way   Mileage Claim   One Way   Mileage Claim   One Way   Mileage Claim   One Way   One	In-Region Mileage Claim based on Chart   One Way   Mileage Claim (or In-Region Mileage	Mileage Claim one Way km's (From Return Chart)  From To  From To  Catry  Catry	Mileage Claim   One Way   Km's (From   Return   Chart)   One Way   Km's (From   Return   Chart)   One Way   Return   Chart   One Way   Return   One Way   Return   Chart   One Way   Return   Chart   One Way   Return   Chart   One Way   Return   Chart   One Way   Return   One Way   One Way   Return   One Way   One Wa	Mileage Claim   Mileage Clai	In-Region Mileage Claim based on Chart   Mileage Claim (One Way   Km's (From Return   Chart)   Neturn   Netur	Mileage Claim   Mileage Claim   Marks (From   Return   Chart)   Method   Method	Registration   One Way   Kin's (From   Chart)   From   To   To   CAT7   120   120   120   121   122   120	Note	In-Region Mileage Claim   Dine Way   Return   Chart   Dine Way   Return   Chart   Specific mileage)   Prom   To   CAT7   120   1220   1225   1226   1221   1222   1222   ACCT	New   Control   Control

Sub-Total \$ -

Professional Dev	elopment	In-Region Mileage C	laim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Milea	ge Claim (or In-Region,	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation Parking *	& Accommodations *	Airfare*		conterence or Course Registration /Event Ticket *	eneral xpenses * To	<sup>-</sup> otal		GL	Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221			1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project CAT4
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Sub-Total



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Name:

Councillor Watkins

Date Submitted 08-06-20 Month June Year 2020

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage C	aim based on Chart	One Way N	Mileage Claim (From Chart)	Out-of-Region Mileag	e Claim (or In-Region, mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations	* Airfare		or Course Registration /Event Ticket *	General Expenses *	Total		GL Codin	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	122	1 12	222 1	226 122	7 1225	1224	ļ	ACCT	CA <sup>-</sup> Cost Ctr Proj	T 2 ect CAT4
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Sub-Total \$

Office of the Mayor (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileag	e Claim (or In-Region, mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	R Accommodations *	Airfare*		Registration /Event Ticket *	t General Expenses *	Total		GL Coding	
Date (DD/MM/YY) Nature of Event/Meeting	From	То			From		CAT7_		1220		0 1225	1226	1221	122	2 1222	2	ACCT	Cost Ctr CAT3	CAT4
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Ja	me	٠.	

Councillor Watkins

Date Submitted	08-06-20	Month	June	Year	2020	

Operating Supplie	es/Telephone/Internet/Sponsorships	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)	Total		GL Coding	
Date (DD/MM/YY)	Detailed Description			ACCT	CAT 2 Cost Ctr Project CAT7	Expense Type

Sub-Total \$

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
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Name:	Councillor Watkins	Date Submitted	08-06-20		Month	June	Year	2020	
Expenses Paid Dir	rectly by the City (eg. Petty Cash)	Other Transportation & Parking Ac	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses * 1	Total	

Expenses Paid Directly by the City (eg. Petty Cash)	Transportation & Parking * A	Accommodations *	Airfare*	Meals *	/Event Ticket	General Expenses *	Total
Date (DD/MM/YY)							
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<u>Claim Reminders:</u>
\*\* 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

Sub-Total

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

Training and Dev	elopment Activities	
Activity Name	Description of Activity Content and any learning/inf	formation worth sharing
	Secondaria (17 central)	- Transfer Hotel H
Board, Committe	e, Agency meetings attended (Includes both Cour	ncil appointed and other approved committees)
Date of Meeting	Name of Meeting	Updates
06/01/2020	City Council Meeting	
06/02/2020	Agenda Planning	
06/03/2020	Youth Advisory Committee Meeting	
06/09/2020	Community Growth and Infrastructure	



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h	June	Year	202	20

Name:	Councillor Watkins	Date Submitted	08-06-20	Month	June	Year	2020	
06/10/2020	Agenda Planning							
06/15/2020	City Council Meeting							
06/16/2020	Policing Committee Meeting							
06/22/2020	City Council - Public Hearing							
06/23/2020	Agenda Planning							
06/25/2020	Senior's Committee							
06/26/2020	Annexation Negotiation Committee							
06/29/2020	City Council							
06/30/2020	Council Workshop - Committee of the Whole							
06/30/2020	Agenda Planning							



Date Submitted

08-06-20

		Select From List		
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Month	June	Year	2020	

Name: Councillor Watkins

Authorizations & Approvals		Councillor Watkins	June	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 Preparer's Signature	08-07-20 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 was completed by another individual. All applicable receipts have been attached.	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	e claim even if the form		
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 provi	ded 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 provi	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
City Manager Signature	Date (DD/MM/YY)			

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Name:

Councillor Watkins

Date Submitted 31-08-20 Month August Year 2020

Common   C	GL Coding
	CAT 2 tr Project CAT4

Professional Deve	olopment	In-Region Mileage (	Claim based on Chart	One Way	/ Mileage Claim (From Chart)	Out-of-Region Milea specifi	ige Claim (or In-Region, c mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation Parking *	a & Accommodations *	Airfare*		conference or Course Registration /Event Ticket *	eneral xpenses *	Total		GL Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	12	21 1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4	
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Name:

Councillor Watkins

Date Submitted 31-08-20 Month August Year 2020

AUMA or FCM Cor	evention or Board Expenses	In-Region Mileage C	laim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileas specific	ge Claim (or In-Region, mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation 8 Parking *	Accommodations *	Airfare*		or Course Registration /Event Ticket *	eneral kpenses * T	<sup>-</sup> otal		GL Cod	ing
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	12:	22 1220	1227	1225	1224		ACCT	Cost Ctr Pr	A I 2 oject CAT4
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Sub-Total \$ -

Office of the Mayor (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileag	e Claim (or In-Region, mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	R Accommodations *	Airfare*		Registration /Event Ticket *	t General Expenses *	Total		GL Coding	ı
Date (DD/MM/YY) Nature of Event/Meeting	From	То			From		CAT7_		1220		0 1225	1226	1221	122	2 1222	2	ACCT	Cost Ctr CAT3	CAT4
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Name:

Councillor Watkins

Date Submitted	31-08-20	Month	August	Year	2020	

Operating Supplies	s/Telephone/Internet/Sponsorships	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)	Total		GL (	Coding	
Date (DD/MM/YY)				ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
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Sub-Total \$

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
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Name:	Councillor Watkins	Date Submitted	31-08-20	Monti	August	Year	2020	
Expenses Paid Di	rectly by the City (eg. Petty Cash)	Other Transportation & Parking *		Airfare* Meals	Registration /Event Tick		Total	ı
		r arking	Accommodations	Alliare	,	Lxperises	Total	

Expenses Paid Dir	ectly by the City (eg. Petty Cash)	Transportation & Parking *	Accommodations *	Airfare*	Meals *	/Event Ticket Kepenses	* Total
Date (DD/MM/YY)							
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<u>Claim Reminders:</u>
\*\* 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

Sub-Total

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

Training and Deve	lopment Activities	
Activity Name	Description of Activity Content and any learning/info	ormation worth sharing
Board, Committee	, Agency meetings attended (Includes both Coun	cil appointed and other approved committees)
Date of Meeting	Name of Meeting	Updates
2020-08-05	Youth Advisory Committee	
2020-08-07	Annexation Negotiation Committee Meeting	
2020-08-11	Agenda Planning	
	Committee of the Whole	



Select From List

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"Grey" cells

Name:	Councillor Watkins	Date Submitted 31-08-20 Month August Year 202	20



		Select From List  Do not enter in  "Grey" cells		
<i>M</i> onth	August	Year	2020	

Councillor Watkins Name: Date Submitted 31-08-20

Authorizations & Approvals		Councillor Watkins	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	ne 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 was completed by another individual. All applicable receipts have been attached.	St. Albert. I understand that submitting a fraudulent claim is a very serious matter. I understand that submitting a fraudulent claim is a very serious matter.	and that I am solely responsible for the details of the claim even if the form		
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)			
			1	
Chief Financial Officer  I have reviewed this claim and am satisfied that the expenses listed and the information and documentation prov	ed are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimb	pursement		
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 prov	ed are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimb	pursement		
City Manager Signature	Date (DD/MM/YY)			
C:\Users\Bmarrese\AnnData\u oca\\Microsoft\Windows\UNetCache\Content Outlook\2LNOLPOF\\Watkins - Counc				

From: To: Cc:

Subject: Date: Attachments:

FW: August Expense Claim - For Approval September 21, 2020 4:30:22 PM Watkins - Council Expense Claim.xlsm

Good afternoon.

Please see the below authorizations and the attached.

Thank you,

Administrative Assistant Office of the Mayor and Councillors

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

From:

**Sent:** August 21, 2020 11:05 AM

Subject: FW: August Expense Claim - For Approval

Good morning,

Please see the below authorizations for Councillor Watkins' expense claim.

Thank you,

Administrative Assistant Office of the Mayor and Councillors

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

From:

**Sent:** August 21, 2020 10:48 AM

Subject: RE: August Expense Claim - For Approval

Looks good to me.

Ray

Ray Watkins Councillor

City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9 <a href="mailto:rww.stalbert.ca">rwatkins@stalbert.ca</a> | <a href="mailto:www.stalbert.ca">www.stalbert.ca</a>

www.facebook.com/cityofstalbert | www.twitter.com/cityofstalbert



From:

**Sent:** August 19, 2020 11:15 AM

To: Ray Watkins < rwatkins@stalbert.ca>

Subject: August Expense Claim - For Approval

Good morning Councillor Watkins,

Please see the attached Council Expense Claim for your review. Please reply with your authorization or any necessary amendments.

Please accept this email as my authorizing signature.

Thank you and have a wonderful day:

Administrative Assistant
Office of the Mayor and Councillors

Bringing Our Best to Cultivate An Amazing Community

From:
To:
Accounts Payable

**Subject:** FW: Watkins September Expense Claim

 Date:
 October 5, 2020 10:09:14 AM

 Attachments:
 Watkins - Council Expense Claim.xlsm

Good morning,

Please see the below and attached.

Thank you,

Administrative Assistant
Office of the Mayor and Councillors

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

From: Ray Watkins

**Sent:** October 5, 2020 9:43 AM

To:

Subject: RE: Watkins September Expense Claim

I am in agreement with the expense account prepared. Sorry haven't been feeling well since Wednesday.

Ray

Ray Watkins
Councillor

City of St. Albert | 5 St. Anne Street | St. Albert, AB | T8N 3Z9 <a href="mailto:rwatkins@stalbert.ca">rwatkins@stalbert.ca</a> | <a href="mailto:www.stalbert.ca">www.stalbert.ca</a>

www.facebook.com/cityofstalbert | www.twitter.com/cityofstalbert



From:

Sent: October 2, 2020 11:58 AM

10:

Subject: Watkins September Expense Claim

Good morning,

I have attached the above mentioned for your review and approval. Please accept this email as my authorization.

Thank you,

Administrative Assistant
Office of the Mayor and Councillors

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



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Sub-Total

Name:

Councillor Watkins

Date Submitted 02-10-20 Month September Year 2020

General Council Related Business	In-Region Mileage Claim based on C	One Way km's (From Chart)	im Out-of-Region M spe	lileage Claim (or In-Region, ecific mileage)	One Way	Mileage Claim km's- Specific	Mileage ( Amount @ 1 0.505/km F	Other Fransportation & Parking *	Accommodations *	Airfare*	Registration /Event Tick Meals *	n et General Expenses * <sup>-</sup>	Total		GL Coding	
Date (DD/MM/YY) Nature of Event/Meeting	From To		From	То	CAT7_		1220	1220		1226	1221 12	22 1222		ACCT	CAT 2 Cost Ctr Projec	ct CAT4
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Professional Dev	elopment	<u>In-Region Mileage C</u>	laim based on Chart	One Way Milea /Return (Fron	ge Claim <u>Out-of-Re</u> n Chart)	gion Mileage specific m	Claim (or In-Region, ileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation Parking *	& Accommodations *	Airfare*	C   F   /	Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	Т		CAT7_		1221			1226	3 1227	1225	5 1224		ACCT	CAT 2 Cost Ctr Project CAT4
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o-Total	\$ -



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Name:

Councillor Watkins

Date Submitted 02-10-20 Month September Year 2020

AUMA or FCM Convention or Board Expenses	In-Region Mileage Cl	aim based on Chart	One Way Mileao /Return (From	ge Claim ı Chart)	Out-of-Region Mileagon Specific	e Claim (or In-Region, mileage)	One Way /Return	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding	
Date (DD/MM/YY) Nature of Event/Meeting	From	То		F	- rom	То	CAT7_		1221	1221	1222	1226	1227	1225	1224	ļ	ACCT	CAT 2 Cost Ctr Project (	CAT4
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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-Regio	n Mileage Claim (or In-Regior specific mileage)	n, One Way /Return	Claim-	Mileage Amount @ 0.505/km	Other Transportation & Parking *	& Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Coding	
Date (DD/MM/YY) Nature of Event/Meeting	From	То			From	То	CAT7_		122	0 1220	0 1225	1226	5 1221	1222	2 1222	2	ACCT	Cost Ctr CAT3 CAT4	
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Name:

Councillor Watkins

Date Submitted 02-10-20 Month September Year 2020

Operating Supplies/Telephone/Internet/Sponsorships	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)  Tota		GL Coding	
	Mobile Bevide (Max \$66/Mohar) From Michaely, eponodiship (Max \$1,000/Fed) dee policy of CO 21 Codition openiodiship)		CAT 2	Expense
Date (DD/MM/YY) Detailed Description		ACC		Туре
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Sub-Total \$ -

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations * Ai	rfare* Meals *	Registration /Event Ticket General * Expenses *	* Total
Date (DD/MM/YY)					
30-09-20 FCM Sustainable Communities Conference				79.10	79.10
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Sub-Total \$ 79.10



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Name:	Councillor Watkins	Date Submitted	02-10-20	Month	September	Year	2020	

Expenses Paid Directly by the City (eg. Petty Cash)	Other Transportation 8 Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket General * Expenses *	Total
Date (DD/MM/YY)						
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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	\$	79.10
Less: BMO MasterCard	-\$	79.10
Directly	\$	-
Net to be paid to: Councillor Watkins	\$	-

<b>Training and Deve</b>	elopment Activities	
A ativity ( Name	Description of Activity Content and any learning link	'armatian worth aboring
	Description of Activity Content and any learning/info	ormation worth sharing
September 23-25, 2020		
2020	AUMA Virtual Convention	
_		
Board, Committee	, Agency meetings attended (Includes both Coun	ncil appointed and other approved committees)
Date of Meeting	Name of Meeting	Updates
_ 3.00 01 1110011119		
	l <u>-</u>	
2020-09-01	Agenda Planning	
	Intermunicipal Committee Framework (Sturgeon	
2020-09-02		
	, ,,	



	Select From List		
	Do not enter in "Grey" cells		
September	Year	2020	

Name:

Councillor Watkins 02-10-20 Month

2020-09-02 Youth Advisory Committee	
2020-09-09 Agenda Planning	
2020-09-15 Agenda Planning	
2020-09-24 Seniors' Advisory Committee	
2020-09-24 Seniors Advisory Committee	
2020-09-28 In-Camera Provincial Landscape Workshop	
2020-09-29 Agenda Planning	
2020-09-30 Policing Committee	



		Select From List		
		Do not enter in "Grey" cells		
		1		
nth	September	Year	2020	

Name: Councillor Watkins		Date Submitted	02-10-20 Month September Ye	ear 2020	
Authorizations & Approvals			Councillor Watkins	September	2020
<u>Preparer</u> If claim form was prepared by an individual other than the Council Member, sign and d This expense claim form was prepared in accordance with all information provided by t					
Preparer's Signature	Date (DD/MM/YY)				
Council Member  I certify that the expenditures claimed on this form were incurred while conducting busi was completed by another individual. All applicable receipts have been attached.	ness on behalf of the City of St. Albert. I understand that submitting a fraudulent claim is a ve	ery serious matter. I understand that I am solely responsible for the de	tails of the claim even if the form		
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)

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