



	Select From List
	Do not enter in "Grey" cells

Name:	Councillor Watkins
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Date Submitted	06-05-20	Month	April	Year	2020
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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
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										-							-				
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
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																		Sub-Total			\$	-						



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted06-05-20

MonthApril

Year2020

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	CAT 2 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-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
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										-							-				

Sub-Total\$ -



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:

Councillor Watkins

Date Submitted:

06-05-20

Month:

April

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)		Total	ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
Date (DD/MM/YY)	Detailed Description					

Sub-Total

\$ -

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
16/03/20	UDI Luncheon Refund					- 54.97		- 54.97
04-01-20	FCM Hotel Deposit Refund					- 327.88		- 327.88
16/03	Edmonton Prayer Breakfast Refund					- 50.00		- 50.00
								-
								-
								-
								-
								-

Sub-Total

-\$ 432.85



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted06-05-20MonthAprilYear2020

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)								
								-
								-
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- 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	-\$	432.85
Less: BMO MasterCard	\$	432.85
Less: Expenses Paid	\$	-
Net to be paid to Councillor Watkins	\$	-

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 of Meeting	Name of Meeting	Updates
2020-07-04	Annexation Negotiation Committee	
15/04/20	Inter-City Framework with Sturgeon County Pre-Briefing	



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:

Councillor Watkins

Date Submitted:

06-05-20

Month:

April

Year:

2020

17/04/20	Annexation Negotiation Committee - Virtual Meeting	



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 06-05-20 Month April Year 2020

Authorizations & Approvals Councillor Watkins April 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	20-05-06
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 : Cllr Watkins - April Expenses
Date: May 22, 2020 8:31:54 AM
Attachments: [Watkins - Council Expense Claim.xlsx](#)

Approved by Kevin below

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

Bringing Our Best to Cultivate An Amazing Community

From: Kevin Scoble [REDACTED]
Sent: Friday, May 22, 2020 7:06 AM
To: [REDACTED]
Subject: RE: FOR APPROVAL : Cllr Watkins - April Expenses

Approved.

[REDACTED]
Chief Administrative Officer
[REDACTED] | [REDACTED]

Bringing Our Best to Cultivate An Amazing Community

From: [REDACTED]
Sent: Thursday, May 7, 2020 10:38 AM
To: Kevin Scoble [REDACTED]
Subject: FOR APPROVAL : Cllr Watkins - April Expenses

Please provide email approval for the attached.

Thanks,

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

Bringing Our Best to Cultivate An Amazing Community

From: Brenda Barclay [REDACTED]
Sent: Thursday, May 7, 2020 9:12 AM
To: [REDACTED]

Subject: FW: Cllr Watkins - April Expenses

This is approved.

Thanks

Brenda Barclay CPA, CMA
Manager | Financial Operations and Reporting





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: May-07-20 9:01 AM
To: 
Subject: FW: Cllr Watkins - April Expenses

Hi Brenda,
I have verified this claim (zero dollars). Please approve and forward to Alayna for Kevin's approval.

Thanks,
Barb

From: 
Sent: May 6, 2020 4:01 PM
To: 

Subject: FW: Cllr Watkins - April Expenses

Hi ladies,

Please find attached Cllr Watkins approved April expenses.

Kind Regards,

Rayann



Executive Assistant | Office of the Mayor and Council

P: 780-459-1605 | rlaforce@stalbert.ca

Bringing Our Best to Cultivate An Amazing Community

From: Ray Watkins

Sent: May 6, 2020 3:59 PM

To: [REDACTED]

Subject: FW: Cllr Watkins - April Expenses

Approved.

Ray Watkins

Councillor

P: 780-459-1697 | F: 780-459-1591

C: 780-863-2391

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

[REDACTED] | www.stalbert.ca

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



From: [REDACTED]

Sent: May 6, 2020 2:28 PM

To: Ray Watkins <rwatkins@stalbert.ca>

Subject: Cllr Watkins - April Expenses

Hi Cllr Watkins:

Please review the attached, and let me know via email if you approve this, or advise of the needed edits. I will then forward it to Finance for processing.

Kind Regards,

Rayann

[REDACTED]

Executive Assistant | Office of the Mayor and Council

[REDACTED] [REDACTED]

Bringing Our Best to Cultivate An Amazing Community



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 01-06-20 Month May 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
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										-							-			
										-							-			
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
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Sub-Total																	\$	-		



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 01-06-20 Month May 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	CAT 2 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-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
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Sub-Total \$ -



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:

Councillor Watkins

Date Submitted:

01-06-20

Month:

May

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	CAT 2 Project CAT7	Expense Type
Date (DD/MM/YY)	Detailed Description					

Sub-Total

\$ -

BMO MasterCard Expenses					Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)											
									- 54.97		- 54.97
									- 327.88		- 327.88
									- 50.00		- 50.00
											-
											-
											-
											-
											-

Sub-Total

-\$ 432.85



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:	Councillor Watkins	Date Submitted	01-06-20	Month	May	Year	2020
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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)								
								-
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								-

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	-\$	432.85
Less: BMO MasterCard	\$	432.85
Less: Expenses Paid	\$	-
Net to be paid to: Councillor Watkins	\$	-

Training and Development Activities		
Activity Name	Description of Activity Content and any learning/information worth sharing	
05/06/2020	Public Open House - Range Road 260 ASP Amendment	
05/21/2020	Legacy Park Development Workshop	



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:	Councillor Watkins	Date Submitted	01-06-20	Month	May	Year	2020
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05/12/2020	Agenda Planning	
05/14/2020	Edmonton Metropolitan Region Board Meeting	
05/14/2020	Edm Global Shareholder Virtual Briefing	
05/15/2020	Special Council Meeting	
05/19/2020	City Council Meeting	
05/20/2020	Policing Committee Meeting	
05/25/2020	Annexation Negotiation Committee	
05/28/2020	Senior's Advisory Committee Meeting	



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:	Councillor Watkins	Date Submitted	01-06-20	Month	May	Year	2020
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Authorizations & Approvals	Councillor Watkins	May	2020
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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	01-06-20 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 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: [Accounts Payable](#)
Subject: FW: FOR APPROVAL - Cllr Watkins Expense Claim
Date: June 2, 2020 9:30:34 AM
Attachments: [Watkins - Council Expense Claim - Editable.xlsm](#)

Good morning:

Please find attached Cllr Watkin's approved expense claim.

Thanks!

Rayann

[REDACTED]
Executive Assistant | Office of the Mayor and Council
[REDACTED] [REDACTED]

Bringing Our Best to Cultivate An Amazing Community

From: Ray Watkins
Sent: June 2, 2020 9:26 AM
To: [REDACTED]
Subject: RE: FOR APPROVAL - Cllr Watkins Expense Claim

Approved.

Ray Watkins
Councillor

[REDACTED] [REDACTED]
[REDACTED]

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

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



From: [REDACTED]
Sent: June 1, 2020 4:28 PM
To: Ray Watkins <rwatkins@stalbert.ca>
Subject: FOR APPROVAL - Cllr Watkins Expense Claim

Cllr Watkins:

Please review the attached expense claim for approval.

Thanks!

[REDACTED]
Executive Assistant | Office of the Mayor and Council
[REDACTED] [REDACTED]

Bringing Our Best to Cultivate An Amazing Community

From: [REDACTED]
To: [REDACTED]
Cc: [REDACTED]
Subject: FW: FOR APPROVAL: Councillor Watkins May Expense Claim
Date: June 22, 2020 1:48:54 PM
Attachments: [Councillor Watkins May Expense Claim.pdf](#)

approved by Kevin below.

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

Bringing Our Best to Cultivate An Amazing Community

From: Kevin Scoble [REDACTED]
Sent: Friday, June 19, 2020 1:37 PM
To: [REDACTED]
Subject: RE: FOR APPROVAL: Councillor Watkins May Expense Claim

Approved.

Kevin Scoble
Chief Administrative Officer
[REDACTED] [REDACTED]

Bringing Our Best to Cultivate An Amazing Community

From: [REDACTED]
Sent: Wednesday, June 17, 2020 11:38 AM
To: Kevin Scoble [REDACTED]
Subject: FOR APPROVAL: Councillor Watkins May Expense Claim

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 [REDACTED]
Sent: Tuesday, June 16, 2020 10:17 AM
To: [REDACTED]
Cc: [REDACTED]
Subject: FW: Councillor Watkins May Expense Claim

I have approved. Please forward to Kevin

Diane McMordie, CPA, CMA

Director, Finance & Assessment / Chief Financial Officer

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

From: [REDACTED]
Sent: Monday, June 15, 2020 1:39 PM
To: [REDACTED]
Subject: Councillor Watkins May Expense Claim

Hi Diane,

I have reviewed this claim and AP approve.

Thanks ,
Barb

(Working from home)

Ba

Accounts Payable Coordinator | Financial Services

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: [REDACTED]
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

[REDACTED]
Executive Assistant | Office of the Mayor and Council
[REDACTED] [REDACTED]

Bringing Our Best to Cultivate An Amazing Community

From: Ray Watkins <rwatkins@stalbert.ca>
Sent: July 9, 2020 10:34 AM
To: [REDACTED]
Subject: RE: June Expense Claim - For your review

Approved.

Ray Watkins
Councillor

[REDACTED] [REDACTED]
[REDACTED]

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

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



From: [REDACTED]
Sent: July 8, 2020 4:40 PM
To: Ray Watkins <rwatkins@stalbert.ca>
Subject: June Expense Claim - For your review

Hi Cllr Watkins,

Please see the attached expenses for your review.

Thanks!

Rayann

[REDACTED]

Executive Assistant | Office of the Mayor and Council

[REDACTED]

[REDACTED]

Bringing Our Best to Cultivate An Amazing Community



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 08-06-20 Month June 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
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										-							-			
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
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										-							-			
										-							-			
										-							-			
										-							-			
										-							-			
										-							-			
Sub-Total																	\$	-		



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 08-06-20 Month June 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	CAT 2 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			
																		ACCT	Cost Ctr	CAT3	CAT4
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 Watkins

Date Submitted:

08-06-20

Month:

June

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)					

Sub-Total

\$ -

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 Watkins

Date Submitted

08-06-20

Month

June

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

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 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	



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:	Councillor Watkins	Date Submitted	08-06-20	Month	June	Year	2020
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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	



Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name:	Councillor Watkins	Date Submitted	08-06-20	Month	June	Year	2020
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Authorizations & Approvals	Councillor Watkins	June	2020
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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 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: Councillor Watkin's June 2020 Expense Claim
Date: August 13, 2020 2:05:34 PM
Attachments: [Councillor Watkins Approved June 2020 Claim.pdf](#)

Approved below

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

[REDACTED] | [REDACTED]

Bringing Our Best to Cultivate An Amazing Community

Approved

Kevin Scoble
Chief Administrative Officer

[REDACTED] [REDACTED]

Bringing Our Best to Cultivate An Amazing Community

From: Diane McMordie [REDACTED]
Sent: Monday, July 13, 2020 8:13 AM
To: [REDACTED]
Cc: [REDACTED]
Subject: Fw: Councillor Watkin's June 2020 Expense Claim

Approved. Please forward for Kevin's sign-off.

Thanks

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

From: [REDACTED] [REDACTED]

Sent: July 10, 2020 4:13 PM
To: Diane McMordie [REDACTED]
Subject: RE: Councillor Watkin's June 2020 Expense Claim

Diane,

The attached has been reviewed by AP for your approval. The Excel sheet is attached as you cannot open Rayann's.

Barb

From: Diane McMordie [REDACTED]
Sent: July 10, 2020 3:45 PM
To: [REDACTED]
Subject: RE: Councillor Watkin's June 2020 Expense Claim

Yes but can you attach the file.

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

From: [REDACTED]
Sent: July 10, 2020 2:47 PM
To: Diane McMordie [REDACTED]
Subject: RE: Councillor Watkin's June 2020 Expense Claim

Yes , You approve and then it is sent to Kevin. Councillor Watkins often has 0.00 claims.

Barb

From: Diane McMordie [REDACTED]
Sent: July 10, 2020 9:11 AM
To: [REDACTED]
Subject: Re: Councillor Watkin's June 2020 Expense Claim

Were you meaning to send the document even though its \$0?. It should still go through the email string for audit purposes

Diane McMordie, CPA, CMA
Director of Finance & Assessment/CFO

■ ■ ■

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

■ www.stalbert.ca

From: ■
Sent: July 10, 2020 8:21 AM
To: ■
Subject: Councillor Watkin's June 2020 Expense Claim

Hi Diane ,

Reviewed by AP for your approval, 0.00 expense claim

(Working from home)

■
Accounts Payable Coordinator | Financial Services

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

■ | www.stalbert.ca

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