

Select From List Do not enter in "Grey" cells

Name:

Councillor Watkins

Date Submitted 06-05-20

Month

Year

2020

General Council R	elated Business	In-Region Mileage Cl	aim based on Chart	Way	Mileage Claim km's (From Chart)	Out-of-Region Milea	ge Claim (or In-Region,		Mileage Claim km's- Specific	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		CAT7_		1220			1226	1221	1222	1222		ACCT	Cost Ctr	CAT 2 Project CA	√T4
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Sub-Total \$ -

Professional Dev		In-Region Mileage Cl		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileag	e Claim (or In-Region, mileage)	One Way	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	То			From	То	CAT7_		1221					1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4	1
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Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Year

Name:

Councillor Watkins

Date Submitted

06-05-20

Month April

2020

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cla	aim based on Chart			ge Claim (or In-Region, mileage)	One Way	Claim-	Amount @	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		From		CAT7_		1221		1 1222	1226	1227	1225	1224	1	ACCT	CAT 2 Cost Ctr Project	
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Sub-Total

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Office of the May	or (Official Events & Duties)	In-Region Mileage CI		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileae	ge Claim (or In-Region,	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	То			From		CAT7_		1220						1222		ACCT	Cost Ctr CAT3	CAT4
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Sub-Total \$ -



Select From List
Do not enter in "Grey" cell

Name:

Councillor Watkins

Date Submitted 06-05-20 Month April 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*	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
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Sub-Total -\$ 432.85

$\mathcal{Q}_{\mathcal{Q}}$	City of
SPX	llbert
06/	WU (

Select From List
Do not enter in "Grey" cells

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Councillor Watkins

Date Submitted 06-05-20 Month April Year 202

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

Training and Dev	elopment Activities	
Activity Name	Description of Activity Content and any learning/int	formation worth sharing
Board, Committee	e, Agency meetings attended (Includes both Cou	ncil 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	



Councillor Watkins

Name:

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

17/04/20	Annexation Negotiation Committee - Virtual Meeting	

Date Submitted

06-05-20

Month



Select From Lis
Do not enter in "Grey" ce

Name: Councillor Watkins

Date Submitted 06-05-20 Month April Year 20

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 Preparer's Signature				
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	ne 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 prov	rided 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 prov	rided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
City Manager Signature	Date (DD/MM/YY)			

From: To:

Cc: 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

Senior Executive Assistant
Office of the Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

From: Kevin Scoble

Sent: Friday, May 22, 2020 7:06 AM

To:

Subject: RE: FOR APPROVAL: Cllr Watkins - April Expenses

Approved.

Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

From:

Sent: Thursday, May 7, 2020 10:38 AM **To:** Kevin Scoble

Subject: FOR APPROVAL : Cllr Watkins - April Expenses

Please provide email approval for the attached.

Thanks,

Senior Executive Assistant
Office of the Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

From: Brenda Barclay

Sent: Thursday, May 7, 2020 9:12 AM

To:

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.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 | <u>rlaforce@stalbert.ca</u>

Bringing Our Best to Cultivate An Amazing Community

From: Ray Watkins

Sent: May 6, 2020 3:59 PM

To:

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 | www.stalbert.ca

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



From:

Sent: May 6, 2020 2:28 PM

To: Ray Watkins < <u>rwatkins@stalbert.ca</u>> **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

Executive Assistant | Office of the Mayor and Council

Bringing Our Best to Cultivate An Amazing Community



Select From List Do not

Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 01-06-20 Month May Year 2020

General Council F	Related Business	In-Region Mileage C	laim based on Chart	One Way	Mileage Claim km's (From Chart)	Out-of-Region 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	То			From	То	CAT7_		1220			5 12	26 122	1 122	2 1222	2	ACCT	Cost Ctr	CAT 2 Project C	AT4
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Professional Dev	velopment	In-Region Mileage (Claim based on Chart	One Way	/ Mileage Claim (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region,	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 Coding
Date (DD/MM/YY) Nature of Event/Meeting	From	То			From	То	CAT7_		122	122	21 1222	1226	1227	7 1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4
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Select From List

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"Grey" cells

Name: Councillor Watkins

Date Submitted 01-0

Date Submitted 01-06-20 Month May Year 2020

AUMA or FCM Cor	evention or Board Expenses	In-Region Mileage Cl	aim based on Chart	One Way /Return	/ Mileage Claim (From Chart)	Out-of-Reg	gion Mileage specific n	e Claim (or In-Region, nileage)	One Way	Claim-	Mileage Amount @ 0.505/km	Other Transportation & Parking *	& Accommodations *	Airfare*		or Course Registration /Event Ticket *	General Expenses	* Total		GL	_ Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	-	То	CAT7_		122	1 122	1 122	2 122	6 1227	7 1225	5 122	24	ACCT	Cost Ctr	CAT 2 Project (CAT4
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Sub-Total \$

Office of the Mayo	or (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Miles	age Claim (or In-Region, ïc mileage)	One Way /Return	Mileage Claim- Specific		Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket *	General Expenses *	Total		GL Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From		CAT7_		1220	1220	1225	1226	1221	1222	1222	2	ACCT	Cost Ctr CAT3 CA	AT4
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Sub-Total \$ -



Select From List	
Do not enter in "Grey" cells	

Name:

Councillor Watkins

Date Submitted 01-06-20 Month May Year 2020

Operating Supplie	perating 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) Total									
Date (DD/MM/YY)	Detailed Description			ACCT	GL C	CAT 2	Expense Type			

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
							-
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							-
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							-

Sub-Total -\$ 432.85



Select Fron
Do not enter in "Grey" cells

Name:	Councillor Watkins	Date Submitted	01-06-20	_	May	Year	2020	
						/		

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

Training and De	velopment Activities	
A ativity Name	Doministra of Authority Contract and any language for	
Activity Name	Description of Activity Content and any learning/inf	ormation worth sharing
05/06/2020	Public Open House - Range Road 260 ASP Amen	dment
05/21/2020	Legacy Park Development Workshop	
Board. Committe	ee, Agency meetings attended (Includes both Cour	incil appointed and other approved committees)
,		
Date of Meeting	Name of Meeting	Updates
05/04/2020	Regular Council Meeting	
05/05/2020	Agenda Planning	
05/06/2020	YAC Meeting	
05/11/2020	Special Council Meeting	



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		Select From List		
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h	May	Year	2020	

Name:	Councillor Watkins																						ı	Date	Subn	itted		0	-06-2	20	Мс	onth	Ma	ay	Yea	r		20	020	
05/12/2020	Agenda Planning															_															 									
05/14/2020	Edmonton Metropolitan Region Board Meeting	ıg																													 									
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																														 									



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

Name: Councillor Watkins

Date Submitted 01-06-20 Month May Year

Authorizations & Approvals		Councillor Watkins	May 2
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 M	lember 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 behawas completed by another individual. All applicable receipts have been attached.	alf of the City of St. Albert. I understand that subn	mitting 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	
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 docum	nentation 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 docum	entation provided are in accordance with Council	policy C-CC-03 Council Remuneration and Expense Reimbursement	
City Manager Signature	Date (DD/MM/YY)		

C:\Users\Bmarrese\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\2LNQLPOE\\Watkins - Council Expense Claim - Editable.xlsm]Claim Form

From:

Accounts Payable

To: 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

Executive Assistant | Office of the Mayor and Council

Bringing Our Best to Cultivate An Amazing Community

From: Ray Watkins

Sent: June 2, 2020 9:26 AM

To:

Subject: RE: FOR APPROVAL - Cllr Watkins Expense Claim

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: 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!

Executive Assistant | Office of the Mayor and Council

Bringing Our Best to Cultivate An Amazing Community

From:
To:
Cc:

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.

Senior Executive Assistant
Office of the Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

From: Kevin Scoble

Sent: Friday, June 19, 2020 1:37 PM

To:

Subject: RE: FOR APPROVAL: Councillor Watkins May Expense Claim

Approved.

Kevin Scoble

Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

From:

Sent: Wednesday, June 17, 2020 11:38 AM

To: Kevin Scoble

Subject: FOR APPROVAL: Councillor Watkins May Expense Claim

For approval

Senior Executive Assistant
Office of the Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

From: Diane McMordie

Sent: Tuesday, June 16, 2020 10:17 AM

To:

Cc:

Subject: FW: Councillor Watkins May Expense Claim

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:

Sent: Monday, June 15, 2020 1:39 PM

To:

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:

Accounts Payable

To:

FW: June Expense Claim - For your review

Subject: 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

Bringing Our Best to Cultivate An Amazing Community

From: Ray Watkins < rwatkins@stalbert.ca>

Sent: July 9, 2020 10:34 AM

Subject: RE: June Expense Claim - For your review

Approved.

Ray Watkins Councillor



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



From:

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

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, In-Region Mileage Claim based on Chart /Return Chart) One Way km's (From Out-of-Region Mileage Claim for In-Region, Specific mileage)	In-Region Mileage Claim based on Chart / Chart / Mileage Claim / One Way / Mileage Claim / One Way / Mileage Claim / One Way / Return / Chart / Specific mileage / Preturn / Chart / Specific mileag	In-Region Mileage Claim based on Chart One Way Rm's (From Chart) In-Region Mileage Claim based on Chart Mileage Claim One Way Mileage Claim (or In-Region, One Way Km's-Km's-Specific One Way Mileage Claim (or In-Region, One Way Km's-Km's-Km's-Km's-Km's-Km's-Km's-Km's-	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	⁻ 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



Select From List

Do not enter in
"Grey" cells

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 ⁻ Cost Ctr Proj	T 2 ect CAT4
										_							_			
										-							-	-		
										-							-	_		
										-							-			
										_										

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
									_							_			
									_							_			

Sub-Total \$ -



Select From List
Do not enter in "Grey" cells

_			
Ja	me	٠.	

Councillor Watkins

Date Submitted	08-06-20	Month	June	Year	2020	

Operating Supplie	es/Telephone/Internet/Sponsorships	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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							-

Sub-Total \$ -



Select Fron
Do not enter in "Grey" cells

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	



			1	
		Select From List		
		Do not enter in "Grey" cells		
		i		_
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							



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

Name: Councillor Watkins

Date Submitted 08-06-20 Month June Year 2020

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 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)			
			•	

C:\Users\Bmarrese\AppData\Local\Microsoft\Windows\INetCache\Content.Outlook\2LNQLPOE\Watkins - Council Expense Claim - Editable (002).xlsm]Claim Form

From:
To:
Cc:

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

Senior Executive Assistant
Office of the Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

Approved

Kevin Scoble

Chief Administrative Officer

Bringing Our Best to Cultivate An Amazing Community

From: Diane McMordie

Sent: Monday, July 13, 2020 8:13 AM

To:

Cc:

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



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

www.stalbert.ca

From:

Sent: July 10, 2020 4:13 PM

To: Diane McMordie

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

Sent: July 10, 2020 3:45 PM

To:

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

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

From:

Sent: July 10, 2020 2:47 PM

To: Diane McMordie

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

Sent: July 10, 2020 9:11 AM

To:

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

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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