





Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor MacKay

Date Submitted 11/02/2021

Month January Year 2021

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			
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 \$ -



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Month January Year 2021

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding				Expense Type
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project	CAT7	
	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)						
26/01/2021	Home Office Internet	70.00		6404 1010	516109	N/A	Mobile Device Charge Office/Operating Supp

Sub-Total \$ 70.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
28-01-21	Taste of Africa ticket					11.62		11.62
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ 11.62





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01/18/2021	CLSC	
01/18/2021	CGISC	
01/19/2021	St. Albert Housing Association Meeting	
01/20/2021	COVID-19 Recovery Task Force	
01/25/2021	Council Meeting	
01/26/2021	Policing Committee	
01/29/2021	EMAC	



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Date Submitted 11/02/2021

Month January Year 2021

Authorizations & Approvals

Councillor MacKay January 2021

**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.  
Christina Shouls 11-02-21  
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.  
Ken MacKay  
Council Member's Signature Date (DD/MM/YY)

**Accounts Payable**  
I have reviewed this claim for mathematical accuracy and documentation support.  
Danielle Parsons  
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  
Diane McMordie  
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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Name: Councillor MacKay

Date Submitted: 03/12/2021 Month: February Year: 2021

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

Sub-Total \$ -

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

Sub-Total \$ -





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Name: Councillor MacKay

Date Submitted: 03/12/2021 Month: February Year: 2021

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)		Total	GL Coding				
Date (DDMMYY)	Detailed Description				ACCT	Cost Ctr	CAT 2 Project	CAT7	Expense Type
26/02/2021	Home Office Internet			70.00		6404 1010	516109	N/A	Mobile Device Charges
									Office/Operating Suppl

Sub-Total \$ 70.00

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

Sub-Total \$ -



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Name: Councillor MacKay

Date Submitted: 03/12/2021 Month: February Year: 2021

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

Sub-Total \$ -

Claim Reminders:

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

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

Summary table: Grand Total Expenses \$ 70.00, Less: BMO MasterCard \$ -, Less: Expenses Paid \$ -, Net to be paid to Councillor MacKay \$ 70.00

Training and Development Activities

Table with columns: Activity Name, Description of Activity Content and any learning/information worth sharing

Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees)

Table with columns: Date of Meeting, Name of Meeting, Updates



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Name: Councillor MacKay

Date Submitted 03/12/2021

Month February Year 2021



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Do not enter in "Grey" cells

Name: Councillor MacKay

Date Submitted: 03/12/2021 Month: February Year: 2021

Authorizations & Approvals Councillor MacKay February 2021

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. [Signature] Date (DDMMYY)

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. [Signature] Date (DDMMYY)

Accounts Payable: I have reviewed this claim for mathematical accuracy and documentation support. [Signature] Date (DDMMYY)

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. [Signature] Date (DDMMYY)

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. [Signature] Date (DDMMYY)



**Council Member Monthly Expense Claim Form**

Select From List  
Do not enter in "Grey" cells

Name:

Date Submitted:

Month:  Year:

General Council Related Business		In-Region Mileage Claim based on Chart		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 @ 0.50\$/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										ACCT	Cost Ctr	Project CAT4
									-							-			
									-							-			
									-							-			
									-							-			
									-							-			
									-							-			
									-							-			
									-							-			
Sub-Total																\$	-		

Professional Development		In-Region Mileage Claim based on Chart		Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way (Return)	Mileage Claim-Specific	Mileage Amount @ 0.50\$/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										ACCT	Cost Ctr	Project CAT4
									-							-			
									-							-			
									-							-			
									-							-			
									-							-			
									-							-			
									-							-			
Sub-Total																\$	-		



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Name: Councillor MacKay

Date Submitted: 03/12/2021 Month: March Year: 2021

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

Sub-Total \$ -

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

Sub-Total \$ -



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Name: Councillor MacKay

Date Submitted: 03/12/2021 Month: March Year: 2021

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)		Total	GL Coding				
Date (DDMMYY)	Detailed Description				ACCT	Cost Ctr	CAT 2 Project	CAT7	Expense Type
26/03/2021	Home Office Internet			70.00		6404 1010	516109	N/A	Mobile Device Charges
									Office/Operating Suppl

Sub-Total \$ 70.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare *	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DDMMYY)	Description							
03/19/2021	Edmonton Chamber event Registration					26.25		26.25
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ 26.25



### Council Member Monthly Expense Claim Form

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Name:

Date Submitted:  Month:  Year:

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

Sub-Total  \$ -

- Claim Reminders:  
 \*\* See Council Policy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses\*\*  
 1. Detailed receipts must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.  
 2. Meter parking may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.  
 3. A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location.  
 4. For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.  
 5. It is recommended to claim mileage based on the standard mileage chart. If you choose to claim specific mileage you must provide a Google map printout with the details 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	\$	96.25
Less: BMO MasterCard	-\$	26.25
Less: Expenses Paid	\$	-
Net to be paid to Councillor MacKay	\$	<u>70.00</u>

Activity Name	Description of Activity Content and any learning/information worth sharing
03/12/2021	Council Offsite Levy Workshop

  

Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees)		
Date of Meeting	Name of Meeting	Updates
03/01/2021	City Council Meeting	
03/03/2021	Recovery Task Force Meeting	
03/08/2021	Community Living Standing Committee Meeting	
03/08/2021	Community Growth & Infrastructure Standing Committee	
03/09/2021	Recovery Task Force Meeting	
03/19/2021	Annual ESAB Meeting with Council	
03/11/2021	Council / OIC / Policing Committee Meeting	
03/15/2021	City Council Meeting	
03/18/2021	ERWAC Meeting	
03/19/2021	ACRWC Board Meeting	
03/22/2021	Special City Council Meeting	
03/23/2021	Policing Committee Meeting	
03/24/2021	Recovery Task Force Meeting	
03/24/2021	EAC Interviews	
03/26/2021	ACRWC Leadership Transition Committee Meeting	





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Date Submitted: 03/12/2021

Month: March Year: 2021

03/26/2021	Special Board Meeting - Board Charter and Policies	



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Authorizations & Approvals Councillor MacKay March 2021

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. [Signature] [Date: 03/12/2021]

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. [Signature] [Date: 03/14/2021]

Accounts Payable: I have reviewed this claim for mathematical accuracy and documentation support. [Signature: Danielle Parsons] [Date: 03/14/2021]

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. [Signature: Diane McMordie] [Date: 03/14/2021]

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. [Signature] [Date]