



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Councillor Brodhead

Date Submitted 04-05-21

Month April 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
										-							-				A8 AUMA
										-							-				
										-							-				
										-							-				
										-							-				

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:

Date Submitted

Month Year

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 (DD/MM/YY)	Detailed Description			ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
25-04-21	Bell Mobility - Office Mobile		55.00	6404	1010	516104 N/A	Mobile Device Charge
18-04-21	Shaw - Home Office Internet		70.00	6404	1010	516104 N/A	Office/Operating Supp

Sub-Total \$ 125.00

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

Sub-Total \$ -



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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 (DD/MM/YY)								
								-
								-
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ -

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

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

Training and Development Activities	
Activity Name	Description of Activity Content and any learning/information worth sharing
10/01/19-11/01/19	Council Retreat

Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees)		
Date	Meeting	Updates
06/04/2021	Council Meeting	
07/04/2021	EMTSC	
08/04/2021	EMTSC	
09/04/2021	EMTSC	
09/04/2021	Internal Audit Steering Committee	
12/04/2021	EMTSC	



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Month April Year 2021

12/04/2021	CGISC	
14/04/2021	EMTSC	
19/04/2021	Council Meeting	
22/04/2021	EMTSC	
23/04/2021	Edmonton Salutes	
23/04/2021	EMTSC	
26/04/2021	EMTSC	
28/04/2021	EMTSC	
30/04/2021	CUTA	



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Name: Councillor Brodhead

Date Submitted 04-05-21

Month April Year 2021

Authorizations & Approvals Councillor Brodhead April 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.
 04-05-21
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.
 May 10, 2021
Wes Brodhead (May 10, 2021 09:14 MDT)
Council Member's Signature Date (DD/MM/YY)

Accounts Payable
I have reviewed this claim for mathematical accuracy and documentation support.
 May 10, 2021
Lynda Lavallee (May 10, 2021 10:11 MDT)
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
 May 10, 2021
Diane McMordie (May 10, 2021 11:14 MDT)
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
 May 13, 2021
City Manager Signature Date (DD/MM/YY)



Council Member Monthly Expense Claim Form

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Name: Councillor Brodhead

Date Submitted 08-06-21

Month May 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 CAT2	CAT4
										-							-				A8 AUMA
										-							-				
										-							-				
										-							-				
										-							-				

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 \$ -



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Name:

Date Submitted

Month Year

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 (DD/MM/YY)	Detailed Description			ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
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Sub-Total \$ 125.00

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 \$ -



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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 (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****

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- A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location
- For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.
- It is recommended to claim mileage based on the standard mileage chart. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)
- Expense claims must be submitted within 10 days of the following month
- Incomplete expense claims will not be processed

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

Training and Development Activities	
Date	Description of Activity Content and any learning/information worth sharing
10/05/2021	Council 10 Year Growth Workshop

Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees)		
Date	Meeting	Updates
03/05/2021	Council Meeting	
05/05/2021	EMTSC	
07/05/2021	EMTSC	
10/05/2021	CUTA Spring Summit & AGM	
11/05/2021	EMTSC	
11/05/2021	Annual Chamber of Commerce meeting with Council	



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Name: Councillor Brodhead

Date Submitted 08-06-21

Month May Year 2021

11/05/2021	CUTA Spring Summit & AGM	
12/05/2021	EMTSC	
12/05/2021	EMTSC	
13/05/2021	EMRB Audit & Finance Committee	
17/05/2021	Council Meeting	
19/05/2021	EMTSC	
20/05/2021	CUTA	
20/05/2021	EMTSC	
20/05/2021	Annual Library Board meeting with Council	
21/05/2021	EMTSC	
25/05/2021	Public Engagement Session	
27/05/2021	EMTSC	
27/05/2021	Public Engagement Session	
28/05/2021	Edmonton Salutes	
28/05/2021	EMTSC	
29/05/2021	Public Engagement Session	
31/05/2021	FCM	
31/05/2021	Council Meeting	



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Name: Councillor Brodhead

Date Submitted 08-06-21

Month May Year 2021

Authorizations & Approvals Councillor Brodhead May 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]
Preparer's Signature Date (DD/MM/YY) 08-06-21

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.
Wes Brodhead
Wes Brodhead (Jun 8, 2021 18:09 MDT)
Council Member's Signature Date (DD/MM/YY) Jun 8, 2021

Accounts Payable
I have reviewed this claim for mathematical accuracy and documentation support.
Lynda Lavallee
Lynda Lavallee (Jun 9, 2021 07:57 MDT)
Accounts Payable Personnel Signature Date (DD/MM/YY) Jun 9, 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
Diane McMordie
Diane McMordie (Jun 9, 2021 09:08 MDT)
Chief Financial Officer Signature Date (DD/MM/YY) Jun 9, 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]
City Manager Signature Date (DD/MM/YY) Jun 11, 2021



Council Member Monthly Expense Claim Form

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Name: Councillor Brodhead

Date Submitted 06-07-21 Month June 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 *	Registration /Event Ticket *	General Expenses *	Total	GL Coding				
Date (DDMMYY)	Nature of Event/Meeting	From	To			From	To	CAT7		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2	Project CAT4	
										-											A8	AUMA
										-												
										-												
										-												
										-												

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 (DDMMYY)	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 \$ -



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Name: Councillor Brodhead

Date Submitted 06-07-21

Month June Year 2021

06/14/2021	CGISC	
06/15/2021	Council & AHF Annual Meeting	
06/17/2021	EMTSC	
06/18/2021	EMTSC	
06/21/2021	Council Meeting	
06/25/2021	Edmonton Salutes	



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Name: Councillor Brodhead

Date Submitted 06-07-21 Month June Year 2021

Authorizations & Approvals Councillor Brodhead June 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] 06/07/2021 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] Jul 7, 2021 Date (DDMMYY)

Accounts Payable: I have reviewed this claim for mathematical accuracy and documentation support. [Signature] Jul 8, 2021 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] Jul 8, 2021 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] Jul 8, 2021 Date (DDMMYY)