

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey"
cells

Name: Councillor Hansen

Date Submitted 05/07/2021

Month July

2021

General Council F	Related Business	In-Region Mileage C	laim based on Chart	One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileag	e Claim (or In-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	3
Date (DD/MM/YY)	Nature of Event/Meeting	From	То					CAT7_		122			1226	1221	1222	2 1222	2	ACCT	CAT Cost Ctr Proje	F2 ect CAT4
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Sub-Total

\$ -

Professional Dev	elopment	In-Region Mileage C	aim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileag	e Claim (or In-Region, mileage)	One Way /Return	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding	
Date (DD/MM/YY	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Projec	2 t CAT4
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Sub-Total



Select From List

Do not enter in "Grey" cells

Name:

Councillor Hansen

Date Submitted 05/07/2021

Month July

2021

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cla		Mileage Claim (From Chart)		e Claim (or In-Region, mileage)	One Way	Claim-	Mileage Amount @ 0.505/km	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	То	CAT7_		1221	1221	1 1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Projec	2 ct CAT4
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Sub-Total

\$ -

Office of the Mayo	or (Official Events & Duties)	In-Region Mileage Cl		One Way	Mileage Claim (From Chart)	Out-of-Region Mileage	e Claim (or In-Region, mileage)	One Way	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Codir	ng	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222	2	ACCT	Cost Ctr CAT3	CAT4	
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Sub-Total



Select From List

Do not enter in "Grey"
cells

Name:

Councillor Hansen

Date Submitted 05/07/2021

Month July

2021

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	L Coding			
Date (DD/MM/YY)	Detailed Description			ACCT	Cost Ctr	CAT 2 Project C/		Expense Type	
07/10/2021	Telus Mobility - Councillor Mobile Device		55.00	64	104 1010	516110	N/A	Mobile Device Cl	harges
07/22/2021	Telus Internet - Councillor Home Office Internet		70.00	64	104 1010	516110	N/A	Office/Operating	g Suppl
				1					

Sub-Total :

\$ 125.00

BMO MasterCard I	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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Select From Do not enter in "Grey"

					,		
Name:	Councillor Hansen	Date Submitted	05/07/2021		Year	2021	

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.
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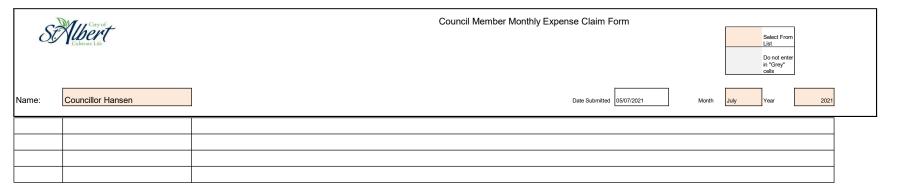
- 2. Meter parking may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.
- 3. A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location
- 4. For meal expenses, the event/description section 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 Hansen	\$ 125.00

\$ -

Sub-Total

Training and D	evelopment Activities	
Activity Name	Description of Activity Content and any learning/ii	nformation worth sharing
07/05/2021	Council Workshop: Community Amenities Project	at and Recreation Needs Assessment
Board, Commi	ttee, Agency meetings attended (Includes both Co	ouncil appointed and other approved committees)
Date	Meeting	Updates Updates
07/05/2021	City Council Meeting	
07/12/2021	Community Growth and Infrastructure	
07/22/2021	Environmental Advisory Committee	
07/30/2021	Recovery Task Force Meeting	





Select From List

Do not enter in "Grey" cells

Name:

Councillor Hansen

ate Submitted	05/07/2021

Month Ju

thorizations & Approvals		Councillor Hansen	July	2021
sparer laim form was prepared by an individual other than the Council Member, sign and date below is expense claim form was prepared in accordance with all information provided by the Council Member at the time ayann La	of submission. Date (DD/MM/YY)			
nuncil Member entify that the expenditures claimed on this form were incurred while conducting business on behalf of the City of St s completed by another individual. All applicable receipts have been attached.	: 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 clair	n even if the form		
uncil Member's Signature	Date (DD/MM/YY)			
counts Payable ave reviewed this claim for mathematical accuracy and documentation support. Danielle Paysous antille Paysons (Aug.g., 2021 5:33 MDT)				
counts Payable Personnel Signature	Date (DD/MM/YY)			
average was a satisfied that the expenses listed and the information and documentation provided a	are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
ne Victoor (Aug 10, 2021 09:31 MDT)				
lief Financial Officer Signature	Date (DD/MM/YY)			
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ilef Administrative Officer (City Manager) any reviewed this claim and arm satisfied that the expenses listed and the information and documentation provided a	are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
y Manager Signature	Date (DD/MM/YY)			
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C:\Users\rlloyd\Desktop\Council Expense Claims\Monthly Expense Claims\Cllr Hansen\July\[Hansen - July Council Expense Claim.xlsm]Claim Form



Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted 15/08/2021

Month August

2021

General Council R	elated Business	In-Region Mileage Cl	aim based on Chart	One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileag specific	e Claim (or In-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 Co	oding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То					CAT7_		122			1226	1221	1222	2 1222	2	ACCT	Cost Ctr I	CAT 2 Project CAT4	
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Sub-Total

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Professional Dev	relopment	In-Region Mileage Cl	aim based on Chart	One Way	Mileage Claim (From Chart)		e Claim (or In-Region, mileage)	One Way /Return	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding	
Date (DD/MM/YY	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project C	AT4
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Sub-Total



Select From List

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cells

Name:

Councillor Hansen

Date Submitted 15/08/2021

Month August

2021

AUMA or FCM Cor	nvention or Board Expenses	In-Region Mileage Cl		One Way	Mileage Claim (From Chart)	Out-of-Region Mileag		One Way	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224	1	ACCT	CAT : Cost Ctr Project	2 ct CAT4
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Sub-Total

\$ -

Office of the May	or (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	Mileage Claim (From Chart)		e Claim (or In-Region, mileage)	One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Coding	ı	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr CAT3	CAT4	
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Sub-Total



Select From List

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cells

Name:

Councillor Hansen

Date Submitted 15/08/2021

Month August

2021

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		GI	Coding		
Date (DD/MM/YY)	Detailed Description			ACCT	Cost Ctr	CAT 2 Project CA		xpense ype
08/10/2021	Telus Mobility - Councillor Mobile Device		55.00		6404 1010	516110	N/A M	Mobile Device Charge
08/22/2021	Telus Internet - Councillor Home Office Internet		70.00		6404 1010	516110	N/A	Office/Operating Sup

Sub-Total

\$ 125.00

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



Select From Do not enter in "Grey"

Name:	Councillor Hansen	Date Submitted	15/08/2021

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.
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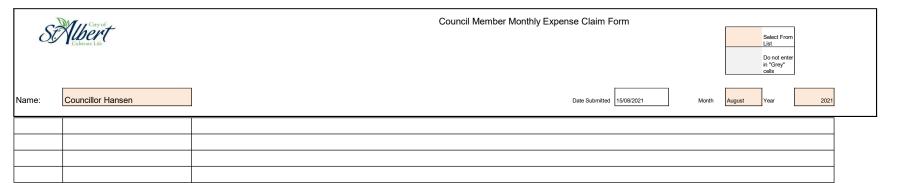
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- 6. Expense claims must be submitted within 10 days of the following month
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Grand Total Expenses	\$ 125.00
Less: BMO MasterCard	\$ -
Less: Expenses Paid	\$ -
Net to be paid to Councillor Hansen	\$ 125.00

\$ -

Sub-Total

Training and De	evelopment Activities	
Activity Name	Description of Activity Content and any learning/info	rmation worth sharing
Board, Commit	tee, Agency meetings attended (Includes both Cour	cil appointed and other approved committees)
Date	Meeting	Updates
08/10/2021	Agenda Planning	
08/16/2021	Council Meeting	
08/17/2021	Agenda Planning	
08/23/2021	Community Growth and Infrastructure	
08/24/2021	Agenda Planning	
08/25/2021	Not for Profit Meetings with Council	
08/27/2021	Edmonton Global Shareholder Virtual Briefing	
08/30/2021	Council Meeting	





Select From List

Do not enter in "Grey"
cells

Name:

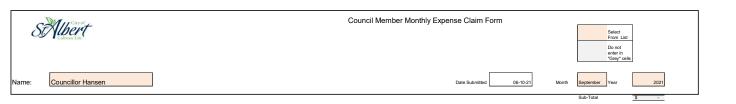
Councillor Hansen

ate Submitted	15/08/2021	Month	August	Year	20
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uthorizations & Approvals		Councillor Hansen	August	2021
eparer claim form was prepared by an individual other than the Council Member, sign and date below				
is expense claim form was prepared in accordance with all information provided by the Council Member at the t	me of submission.			
ayann Lalorce (Sep 15, 2021 14:00 MDT) eparer's Signature	Date (DD/MM/YY)			
epant a signature	Date (Dummi 11)			
ouncil Member				
ertify that the expenditures claimed on this form were incurred while conducting business on behalf of the City on The completed by another individual. All applicable receipts have been attached.	f 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		
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ouncil Member's Signature	Date (DD/MM/YY)			
unui manua s agnature	Date (DD/MINI 11)			
counts Payable lave reviewed this claim for mathematical accuracy and documentation support.				
Danielle Parsons				
anielle Parsons (Sep 16, 2021 08:24 MDT)				
counts Payable Personnel Signature	Date (DD/MM/YY)			
nief Financial Officer				
have reviewed this claim and am satisfied that the expenses listed and the information and documentation provid	ed are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
riane McMordie				
ane McMordie (Sep 16, 2021 08:26 MDT)				
nief Financial Officer Signature	Date (DD/MM/YY)			
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nief Administrative Officer (City Manager)				
have/reviewed this claim and am satisfied that the expenses listed and the information and documentation provid	ed are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
tendoble				
ty Manager Signature	Date (DD/MM/YY)			
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St	Albert Colorae Life						Council M	ember	Monthly	y Expen	se Claim F	Form				Select From List Do not enter in "Grey" cells				
Name:	Councillor Hansen										Date Submitted	06-10-21]	Month	September	Year	2021]		
General Council F	Related Business	In-Region Mileage Cla	aim hasari on Chart	One Way	Mileage Claim km's (From Chart)	Out-of-Region Mileage specific i	a Claim (or In-Region.	One Way	Mileage Claim km's- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total		GI Coding	
D-4- (DD##4000)	Nature of Event/Meeting	From	T-	// CCCCIIII	Onany			CAT7_	Оресино	1220					1222		TOWN		GL Coding CAT 2	
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Professional Deve	elopment	In-Region Mileage Cla	aim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage	e Claim (or In-Region, nileage)	One Way /Return	Mileage Claim- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	or Course Registration /Event Ticket	General Expenses *	Total		GL Coding CAT 2	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr Project CAT4	
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SE	Albert Cultivate Life						Council M	lember	Monthl	y Expen	se Claim F	orm				Select From List Do not enter in "Grey" cells			
Name:	Councillor Hansen										Date Submitted	06-10-21]	Month	September	Year	202	1	
AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage C	aim based on Chart	One Way	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 *	or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding CAT 2
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr Project CAT4
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Office of the May	or (Official Events & Duties)				Mileage				Mileage	Mileage	Other				Registration /Event Ticket				
Onice of the may	(Official Events & Duties)	In-Region Mileage C	aim based on Chart	One Way /Return	Claim (From Chart)	Out-of-Region Mileag specific	e Claim (or In-Region, mileage)	One Way /Return	Claim- Specific	Amount @ 0.505/km	Transportation & Parking *	Accommodations *	Airfare*	Meals *	/Event Ticket	General Expenses *	Total		GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То					CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr CAT3 CAT4
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Sub-Total \$ -

ST	Alhout	Council Member Monthly Exper	nse Claim F	orm		Г									
06	Cultivate Life							Select From List Do not							
								enter in "Grey" cells							
Name:	Councillor Hansen	1	Date Submitted	06-10-21	м	onth	September	Year	202	21					
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 CAT 2			
Date (DD/MM/YY)	Detailed Description									ACCT	Cost C	CAT 2 tr Project CA	AT7	Expense Type	
10-09-21	Telus Mobility - Councillor Mobile Device								55.00	0	6404 1010	516110	N/A	Mobile Devio	e Charge
22-09-21	Telus - Councillor Home Office Internet								70.00	0	6404 1010	516110	N/A	Office/Opera	ting Supr
										_					
						8	Sub-Total		\$ 125.00	0					
BMO MasterCard	Expenses		Other Transportation & Parking *	Accommodations *	Airfare* M	Fals *	Registration /Event Ticket	General Expenses *	Total						
Date (DD/MMYY)															
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Sub-Total

St	Albert Calrivare Life	Council Member Monthly	y Expense Claim F	Form				Select From List Do not enter in "Grey" cells		
Name:	Councillor Hansen		Date Submitted	06-10-21]	Month	September	Year	2021	
Expenses Paid D	Pirectly 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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Meter parking r A standard mile For meal exper It is recommen Expense claims	Claim Remindees: **See Council Pentry C-C-C-3 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses** 1. Detailed necepts must be provided for all expenses. Credit Card slay 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 \$5. Abert 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 chart. If It you choose to claim specific mileage you must provide a Google map printout with the detailed to and from bostons identified (i.e. Street Address) 6. Expense claims must be submitted with 10 days of the following month Net to be paid to Councillor Hansen Net to be paid to Councillor Hansen									\$ 125.00 \$ - \$ - \$ 125.00
Training and Dev	relopment Activities									ı
Activity Name	Description of Activity Content and any learning/in	formation worth sharing								
Board Committee	a. Agency meetings attended (Includes both Cou	uncil appointed and other approved committees)								
Date	Meeting	Updates								
09/01/2021	Youth Council									
09/01/2021	Special Council Meeting									
09/03/2021	Agenda Planning									
09/07/2021	NSWA Communications & Engagement Committee									
09/13/2021	Council Meeting									

S	TALLE City of J Collevon Life	Council Member Monthly Expense Claim Form Select From List Do not enter in "Groy" cells
Name:	Councillor Hansen	Date Submitted 06-10-21 Month September Year 2021
09/15/2021	AUMA Sustainability & Environment Committee	
09/16/2021	Special Council Meeting	
09/16/2021	ICFSP	
09/22/2021	NSWA Board Meeting	
09/29/2021	SRWA SC Meeting	
09/29/2021	ICFSP	

Name: Councillor Hansen		Select From List Do not Inter in the interior colls. Year 2021
Authorizations & Approvals	Councillor Hansen	September 2021
Properer if diam form was prepared by an individual other than the Council Member, sign and date below this expense claim form was prepared in accordance with a information provided by the Council Member at the fire properer is Signature.	me of submission. 06-10-21 Date (COMMYY)	
Council Member Lordify that the expandituse claimed on this form were incurred while conducting business on behalf of the City of water completed by another individual. All applicable receipts have been attached. Jacquire Council Member's Signature Council Member's Signature	f 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 Oct 14, 2021 Date (DDMMYY)	
Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support. Daniel Pay Sons Jamelin Formon (OC18, 2021 55-24 MOT) Accounts Payable Personnel Signature	Oct 18, 2021 Date (DD/MMYY)	
Chief Financial Officer I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provide Diane Moderatie (CNC181, 2021 1548 MOT) Chief Financial Officer Signature	led are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement Oct 18, 2021 Date (CDMMYYY)	
Chief Administrative Officer (Chy Manager) Thave reviewed this claim and am satisfied that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation provided that the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and documentation and the expenses listed and the information and the expenses listed an	red are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement Oct 25, 2021 Date (CDIMMYY)	