

Select From List Do not enter in "Grey" cells

Name:	Councillor Brodhead

Date Submitted 17/11/2021 Month October Year 2021

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General Council I	Related Business	In-Region Mileage Cla	aim based on Chart	One Way	Mileage Claim km's (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region, mileage)	One Way	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					CAT7_		1220					1222	1222		CAT 2 ACCT Cost Ctr Project CAT4
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Professional Dev	elopment	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	Mileage Claim- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		or Course Registration /Event Ticket	General Expenses *	¹ Total	GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224	4	ACCT Cost Ctr Project CAT4
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Sub-Total	\$ -



Select From List Do not enter in "Grey" cells

Name: Councillor Brodhead

Date Submitted 17/11/2021

October Year

2021

AUMA or FCM Co	nvention or Board Expenses	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	Claim-	Amount @	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_		1221	1221	1222	1226	1227	1225	5 1224	1	ACCT	CAT 2 Cost Ctr Project	CAT4	
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Sub-Total \$ -

Office of the May	or (Official Events & Duties)	In-Region Mileage Cl			Out-of-Region Mileag	e Claim (or In-Region, mileage)	One Way	Mileage Claim- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1220	1220) 1225	1226	1221	1222	1222	2	ACCT C	ost Ctr CAT3 CAT4	
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Select From List
Do not enter in "Grey" cells

Name:	Councillor Brodhead

Date Submitted 17/11/2021 Month October Year 2021

Operating Suppli	ies/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 Co:	CAT 2 t Ctr Project		Expense Type	
25-10-2	1 Bell Mobility - Office Mobile		55.00	6404 101	0 516104	N/A	Mobile De	evice Charge
18-10-2	1 Shaw - Home Office Internet		70.00	6404 101	0 516104	N/A	Office/Ope	erating Sup

Sub-Total \$ 125.00

BMO MasterCard	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)								
20-10-21	Paint the Town Purple Breakfast ticket					25.00		25.00
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Sub-Total \$ 25.00





Name:	Councillor Brodhead	Date Submitted	17/11/2021]	Month	October	Year	202	21
Expenses Paid D	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

Grand Total Expenses Less: BMO MasterCard Less: Expenses Paid	\$ 150.00 25.00
Net to be paid to Councillor Brodhead	\$ 125.00

Training and Dev	elopment Activities	
Activity Name	Description of Activity Content and any learning/in	formation worth sharing
Board, Committe	e, Agency meetings attended (Includes both Cou	ncil appointed and other approved committees)
Date	Meeting	Updates

Sŧ	Abert Cultivate Life	Council Member Monthly Expense Claim Form Select From List Do not enter in "Grey" cells	
Name:	Councillor Brodhead	Date Submitted 17/11/2021 Month October Year	2021



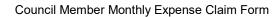


Name: Councillor Brodhead

Date Submitted 17/11/2021 Month October Year 202

Authorizations & Approvals	Counc	cillor Brodhead	October	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 Coun	e time of submission. 17-11-21 Date (DD/MMYYY)			
Council Member I certify that the expenditures claimed on this form were incurred while conducting business on behalf of the Cil was completed by another individual. All applicable receipts have been attached. Wes Brodhead (Nov 18, 2021 13:38 MST)	y 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 Nov 18, 2021	ven if the form		
Council Member's Signature	Date (DD/MMYY)			
Accounts Pavable I have reviewed this claim for mathematical accuracy and documentation support. LYNAA LAVAUCE (LYNA LAVAUCE)	Nov 18, 2021			
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 pro Diane McMordie (Nov 18, 2021 16:29 MST)	vided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement Nov 18, 2021			
Chief Financial Officer Signature	Date (DD/MMYY)			
Chief Administrative Officer (City Manager) I have reviewed this claim-and am satisfied that the expenses listed and the information and documentation pro	vided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement Nov 23, 2021			
City Manager Signature	Date (DD/MM/YY)			

P:\Mayor's Office\Expenses - F00\2021\10- October\Brodhead\[Brodhead - October Council Expense Claim.xlsm]Claim Form





Select From List Do not enter in "Grey" cells

Councillor Brodhead Name:

2021 Date Submitted 08-12-21 Month November Year

General Council Related Business	In-Region Mileage Cl	aim based on Chart	One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-R specific mileage)	Region, One Way	Mileage Claim km's- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total		GL C	oding
Date (DD/MM/YY) Nature of Event/Meeting	From	То			From To	CAT7_		1220	1220	1225	1226	1221	1222	2 1222		ACCT		CAT 2 Project CAT4
17-11-21 AUMA Convention	St. Albert	Edmonton- Downtown	Return	30.00				15.15	20.00						35.15	6140	1010 5	16104
18-11-21 AUMA Convention	St. Albert	Edmonton- Downtown	Return	30.00				15.15	45.50						60.65	6140	1010 5	16104
19-11-21 AUMA Convention	St. Albert	Edmonton- Downtown	Return	30.00				15.15	15.00						30.15	6140	1010 5	16104
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													Sub-Total		\$ 125.95			

Professional Dev	elopment	In-Region Mileage Cl			Out-of-Region Mileag	e 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	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4
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Sub-Total



Select From List Do not enter in "Grey" cells

Name:

Councillor Brodhead

Date Submitted

Month

08-12-21

November Year

2021

AUMA or FCM Cor	nvention or Board Expenses	In-Region Mileage Cl	aim based on Chart	Way		e Claim (or In-Region, mileage)		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	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project CAT	T4
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Sub-Total

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Office of the Mayo	or (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	Way		e Claim (or In-Region, mileage)	One Way /Return	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Coding	
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 Do not enter in "Grey" cells

Name: Councillor Brodhead

Date Submitted

Month

08-12-21

November 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 (DD/MM/YY) Detailed Description			ACCT Cost (CAT 2 Ctr Project CAT7	Expense Type	
18-11-21 Home Internet		70.00	6502 1010	516104 N/A	Office/Opera	ating Supp
25-11-21 Mobile Device		55.00	1010	516104 N/A	Mobile Device	ce Charge
			-			

Sub-Total \$ 125.00

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)					_		
18-11-21 Chamber Christmas Luncheon Ticket					41.67		41.67
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Sub-Total

\$ 41.67

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Select From List Do not enter in "Grey" cells

Name:

Councillor Brodhead

08-12-21 November 2021 Date Submitted Month Year

Expenses Paid D	irectly 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

Grand Total Expenses 292.62 Less: BMO MasterCard 41.67 -\$ Less: Expenses Paid Net to be paid to: Councillor Brodhead 250.95



Select From List Do not enter in "Grey" cells

Name: Councillor Brodhead

Date Submitted 08-12-21 Month November Year 2021

Authorizations & Approvals		Councillor Brodhead	November	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 Preparer's Signature	time of submission. 09/12/21 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 was completed by apother individual. All applicable receipts have been attached. Wes Brodhead (Dec 10, 2021 11:46 MST)	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 t	he 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. Wallie				
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 Diane McMordie Diane McMordie (Dec 13, 2021 08:38 MST)	ded 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	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
City Manager Signature	Date (DD/MM/YY)			



Select From List	
Do not enter in "Grey" cells	

Name:

Councillor Brodhead

Date Submitted 05/01/22 Month December Year 2021

General Council R	elated Business	In-Region Mileage Cl	aim based on Chart	One Way	Mileage Claim km's (From Chart)	Out-of-Region Mileac	ge Claim (or In-Region,	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 CAT 2
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT Cost Ctr Project CAT4
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Professional Dev	·	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 *	Accommodations *	Airfare*	Meals *	or Course Registration /Event Ticket	General Expenses *	Total			
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		_	From		CAT7_		1221						1224	4	ACCT	CAT4	
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Select From List

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Name: Councillor Brodhead

Date Submitted 05/01/22 Month December Year 2021

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl	laim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileac	ge Claim (or In-Region, mileage)	One Way	Claim-	Amount @	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_		1221	1221	1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project	t CAT4
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Sub-Total \$ -

Office of the Mayo	or (Official Events & Duties)	In-Region Mileage Cl		One Way		ge Claim (or In-Region, mileage)	One Way /Return	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket G * E:	eneral xpenses *	Total		GL Codin	g
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		 From	То	CAT7_		1220	122	0 1225	1226	1221	1222	1222		ACCT	Cost Ctr CAT3	CAT4
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Select From List
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Name:

Councillor Brodhead

Date Submitted 05/01/22 Month December Year 2021

Operating Suppli	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	Cost Ctr	CAT 2 Project CAT	Expens Type	e
18/12/21	Home Internet - Shaw		70.00		6404 1010	516104 N	'A Mobile	Device Charge
25/12/21	Mobile Device - Bell		55.00		1010	516104 N	'A Mobile	Device Charge

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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Name: Councillor Brodhead Date Submitted 05/01/22

1	xpenses Paid Di	rectly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
	ate (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

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



Select
From List

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enter in
"Grey" cells

Name:	Councillor Brodhead	Date Submitted	05/01/22	Month	December	Year	2021	

Authorizations & Approvals		Councillor Brodhead	December	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.			
Preparer's Signatule	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 t	he claim even if the form		
was completed by another individual. All applicable receipts have been attached. Wes brodhead (Jan 5, 2022 18:26 MST)				
Council Member's Signature	Date (DD/MM/YY)			
Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support. LYNAA LAVAULE Lynda Lavallee (Jan 6, 2022 07:43 MST)				
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 Diane McMordie (Jan 6, 2022 08:00 MST)				
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 Kersy Hilts (Jan 6, 2022 10:10 MST)				
City Manager Signature	Date (DD/MM/YY)			

P:\Mayor's Office\Expenses - F00\2021\12 - December\Brodhead\[Cllr Brodhead Council Expense Claim Form - MASTER Revised November 2021.xlsm]Claim Form