

Select From List

Do not enter in "Grey" cells

Mayor Heron Name:

16-11-21 Date Submitted

October Month

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 Mileag	e 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			From	То	CAT7_		1220	1220	1225	5 1226	1221	1222	1222	2	ACCT Cost Ctr Project	2 ct CAT4
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Sub-Total \$ -

Professional Dev	elopment	In-Region Mileage Ch	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 8 Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket	General Expenses *	Total		GL C	Coding	
Date (DD/MM/YY)		From	То			From	То	CAT7_		1221	1221	1222	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: Mayor Heron

Date Submitted 16-11-21

Month October

2021

AUMA or FCM	Convention or Board Expenses	In-Region Mileage Cl	laim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileag	e Claim (or In-Region. mileage)	One Way	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket	General Expenses *	Total		GL Coding	
Date (DD/MM/Y	Y) Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224	4	ACCT	CAT 2 Cost Ctr Project	
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Sub-Total \$ -

Office of the May	or (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	One Way		ge Claim (or In-Region,	One Way	Mileage Claim- 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	То	CAT7_		1220	1220	1225	1226	1221	1222	1222	2	ACCT Cost Ctr CAT3 CA	AT4
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ub-Total \$ -



Mayor Heron

Name:

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Date Submitted

October Month

16-11-21

2021

	Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)  Total	(	GL Coding	
Detailed Description	A	CCT Cost Ct	CAT 2 r Project CAT	Expense T7 Type
Felus Mobility - Mobile Device Charges	18.30	6404 1010	516112	N/A
Shaw - Home Office Internet (Mayor to charge one hird of the allotted maximum)	23.00	6404 1010	516112 N	N/A
	S/Telephone/Internet/Sponsorships  Mobile Device (Max \$55)  Detailed Description  Telus Mobility - Mobile Device Charges  Shaw - Home Office Internet (Mayor to charge one third of the allotted maximum)	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)  Petalled Description  Total  A  Telus Mobility - Mobile Device Charges Shaw - Home Office Internet (Mayor to charge one	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)  Detailed Description  Total  ACCT Cost Ct  Telus Mobility - Mobile Device Charges  Shaw - Home Office Internet (Mayor to charge one	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           Detailed Description         ACCT         Cost Cr         Project CAT           Telus Mobility - Mobile Device Charges         18.30         6404 1010         516112         N           Shaw - Home Office Internet (Mayor to charge one         516112         N

Sub-Total \$ 41.30

BMO MasterCard I	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)							
04-10-21	Hotel refund from Fairmont Banff Springs Hotel				\$339.59	,	339.59
04-10-21	Socrates Final Council Dinner				\$163.01		163.01
19-10-21	Books for Council Gifts				\$143.39	,	143.39
19-10-21	Paint the Town Purple Breakfast ticket				\$25.00	J	25.00
							_
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\$ 670.99 Sub-Total



Select From List Do not ente in "Grey"

October

Sub-Total

Name:	Mayor Heron	Date Submitted	16-11-21	
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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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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	\$	712.29
Less: BMO MasterCard	-\$	670.99
Less: Expenses Paid	\$	-
Net to be paid to Mayor Heron	\$	41.30

\$ -

Training and Dev	relopment Activities									
Activity Name	Description of Activity Content and any learning/info	Transition worth sharing								
According Intelline	Description of Activity Content and any learning/into	matter staring								
Poord Committee	ee, Agency meetings attended (Includes both Coun	hall appointed and other approved committees								
Doard, Committee	se, Agency meetings attended (meddes both coun	to appointed and other approved committees)								
	Date of Meeting	Updates								
	1									



Select From List

Do not enter in "Grey"
cells

Name:

Mayor Heron

Date Submitted 16-11-21

Month October

er Year

2021

Authorizations & Approvals		Mayor Heron	October	20:
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 tin  Revent Latoric (Nov 16, 2021 15:53 MST)	ne of submission.			
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 was completed by another individual. All applicable receipts have been attached.	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 clai	m even if the form		
Cathy Heroin (Nov 22, 2021 12:43 MST)  Council Member's Signature	Date (DD/MMYY)			
Accounts Payable  I have reviewed this claim for mathematical accuracy and documentation support.  LYMAL LAVALUEE  LYMICA LAVIBLE (160-22, 2021 10:48 MST)				
Accounts Payable Personnel Signature	Date (DD/MM/YY)			
			1	
Chief Financial Officer  I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provide   Diane McMordie (Nov. 22, 2021 17:03 MST)	d are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
Chief Financial Officer Signature	Date (DD/MMYY)			
Chief Administrative Officer (City Manager)				
have reviewed tris characters am satisfied that the expenses listed and the information and documentation provide ### The Clark  T	d are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
City Manager Signature	Date (DD/MM/YY)			
C:\Users\riloyd\Desktop\Council Expense Claims\Monthly Expense Claims\Mayor\October\[October - Council Expe	nse Claim Form.xlsm]Claim Form			

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General Council Related Business

08/11/2021

12/11/2021

16/11/2021

29/11/2021

25/11/2021

Date (DD/MM/YY) Nature of Event/Meeting

## Council Member Monthly Expense Claim Form

Out-of-Region Mileage Claim (or In-Region, Specific mileage)

Mileage Claim
One Way
I/Return
Specific mileage)

Mileage
Claim
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Mileage
Claim
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Select From List Do not enter in "Grey"

ame:	Mayor Heron

Meeting - Mayor Gamble/Mayor Heron

Meeting - Mayor Acker/Mayor Heron

Coffee Meeting - Mayor Craddock/Mayor Heron

Meeting - Mayor Sohi/Mayor Heron

EMRB parking

Mileage
Claim km's
One Way (From
In-Region Mileage Claim based on Chart
Mileage
Claim this

Edmonton-Downtown

Edmonton-

St. Albert

Parkland (County) Return

68.00

30.00

15.00

86.00

06-12-21 Date Submitted

Mileage Other Amount @ Transportation &

15.15

43.43

ember	Year	2021					
				I			
stration nt Ticket	General Expenses *	Total		GL	Coding		
1222	1222		ACCT	Cost Ctr	CAT 2 Project	CAT4	
		34.34	6140	1010	516112		
		15.15	6140	1010	516112		
		7.58	6140	1010	516112		
		43.43	6140	1010	516112		
		36.35	6140	1010	516112		
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Sub-Total \$ 136.85

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 /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding CAT 2
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From		CAT7_		1221			1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4
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\$ -Sub-Total

1 of 5

SEX	Ubert
09	Cultivate Life

Select From List Do not enter in "Grey" cells

Name:

Mayor Heron

Date Submitted

06-12-21

AUMA or FCM Co	onvention or Board Expenses	In-Region Mileage Cla	aim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileage	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 Codir	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	2 1226	1227	1225	1224		ACCT	CA Cost Ctr Proj	
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\$ -

Office of the Mayo	or (Official Events & Duties)	In-Region Mileage	Claim based on Chart	One Way	Mileage Claim (From Chart)		ge Claim (or In-Region,	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	122	1222	1222	!	ACCT	Cost Ctr CAT3 C	CAT4
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\$ -Sub-Total



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Mayor Heron

Date Submitted 06-12-21 Month No

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 CAT7	Expense Type
21-11-21	I Telus Mobility - Mobile Device Charges		18.30		6404 1010	516112 N/	Α.
01-11-21	Shaw - Home Office Internet (Mayor to charge one I third of the allotted maximum)		23.00		6404 1010	516112 N/	Α.
				1			
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Sub-Total \$ 41.30

BMO MasterCard	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY								
13/11/2021	Christmas Tree Sponsorship (Mayor)						150.00	150.00
15/11/2021	Pins						178.71	
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Sub-Total

\$ 328.71

SEMULE City of California Califor	Council Member Monthly Expe	ense Claim F	orm				Select From List  Do not ente in "Grey" cells	-
Name: Mayor Heron		Date Submitted	06-12-21	1	Month	November	Year	2021
Expenses Paid Directly by the City (eg. Petty Cash)		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Jate (DD/MM/YY)								_
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<u>Saim Reminders:</u> "See Council Policy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable	expenses**					Sub-Total		\$ -

- 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.
- 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

County Total Francisco	s	506.86
Grand Total Expenses	-	
Less: BMO MasterCard	-\$	328.71
Less: Expenses Paid	\$	-
Net to be paid to Mayor Heron	\$	178.15

Training and Deve	elopment Activities	
Activity Name	Description of Activity Content and any learning/infor	rmation worth sharing
Board, Committee	e, Agency meetings attended (Includes both Coun-	cil appointed and other approved committees)
	Date of Meeting	Updates



Select From List

Do not enter in "Grey"
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Va	me	

Mayor Heron

Date Submitted	06-12-21	Month	November	Year	L

uthorizations & Approvals		Mayor Heron	November	2021
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 time	of submission.			
ayann Laforce (Dec 6, 2021 11:26 MST) eparer's Signature	Date (DD/MM/YY)			
<u>ouncil Member</u> Earlify that the expenditures claimed on this form were incurred while conducting business on behalf of the City of St as completed by another individual. All applicable receipts have been attached.	a. 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		
buncil Member's Signature	Date (DD/MM/YY)			
cocunts Payable  lave reviewed this claim for mathematical accuracy and documentation support.  LYMA LAVAUCE  yida Lavallee (Dec 6, 2021 14:19 MST)				
ccounts Payable Personnel Signature	Date (DD/MM/YY)			
hief Financial Officer  have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided a compared to the co	are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
hief Financial Officer Signature	Date (DD/MM/YY)			
hief Administrative Officer (City Manager)  Analy reviewed this ramand am 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			
ty Manager Signature	Date (DD/MM/YY)			

C:\Users\rlloyd\Desktop\Council Expense Claims\Monthly Expense Claims\Mayor\November 2021\[November - Council Expense Claim Form.xlsm]Claim Form

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Select From List

Do not enter in "Grey" cells

Mayor Heron Name:

14-01-22 Date Submitted

Month December Year

2021

General Council F	Related Business	In-Region Mileage Cla	aim based on Chart	One Way	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	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	5 1226	1221	1222	1222		ACCT	CAT 2 Cost Ctr Project	t CAT4
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Sub-Total \$ -

Professional Devel	lopment	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	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket	General Expenses *	Total		GL C	
Date (DD/MM/YY)		From	То			From	То	CAT7_		1221	1221	1222	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: Mayor Heron

Date Submitted

Month E

14-01-22

December 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 Mileac	ne Claim (or In-Region.	One Way	Mileage Claim- Specific	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		CAT7_		1221			1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project	
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Sub-Total \$ -

Office of the May	or (Official Events & Duties)	In-Region Mileage Cl		One Way	Mileage Claim (From Chart)		ge Claim (or In-Region, mileage)	One Way	Mileage Claim- 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	То	CAT7_		1220	1220	) 1225	1226	1221	1222	1222	2	ACCT	Cost Ctr CAT3 CAT	4
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ub-Total \$ -



Select From List

Do not enter in "Grey" cells

Name: Mayor Heron

14-01-22 Date Submitted

Month December Year 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	Coding	
Date (DD/MM/YY)	Detailed Description			ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
21-12-21	Telus Mobility - Mobile Device Charges		18.30	6	6404 1010	516112 N/A	
	Shaw - Home Office Internet (Mayor to charge one third of the allotted maximum)		23.00	6	6404 1010	516112 N/A	

\$ 41.30 Sub-Total

BMO MasterCard		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)								
11/16/2021	Craft Beer - Mid Sized Cities Social				417.70			417.70
11/17/2021	Fairmont Hotel McDonald				220.54			220.54
12/03/2021	Globe Forum FCM Attendee					\$195.00		
11/23/2021	Impark	40.00						40.00
11/15/2021	AUMA Pins						259.64	259.64
								_
								_
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Sub-Total

\$ 937.88



Select From List Do not ente in "Grey"

2021

December Year

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	\$	979.18
Less: BMO MasterCard	-\$	937.88
Less: Expenses Paid	\$	
Net to be paid to Mayor Heron	\$	41.30
Net to be paid to Mayor Heron	\$	41.3

Sub-Total

Training and Deve	elopment Activities					
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)						
	Date of Meeting	Updates				
	1					



Select From List

Do not enter in "Grey" cells

Name:

Mayor Heron

Date Submitted 14-01-22

Month

December Year

2021

Authorizations & Approvals		Mayor Heron	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 Rayann Laterce (Jan 14, 2022 11:25 MST)  Preparer's Signature	er at the time of submission.  Date (DD/MM/YY)			
Council Member			1	
I certify that the expenditures claimed on this form were incurred while conducting business on behalf of was completed by another individual. All applicable receipts have been attached.  Cathy Heron (Jan 14, 2022 11:46 MST)	the City of St. Albert. I understand that submitting a fraudulent cl	aim 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			J 1	
Luxuallee (Jan 17, 2022 07:55 MST)				
Accounts Payable Personnel Signature	Date (DD/MM/YY)			
			1	
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  Annue Victory (Jan 17, 202) 10:37 MST)				
Chief Financial Officer Signature	Date (DD/MM/YY)			
			1	
Chief Administrative Officer (City Manager)  I have reviewed this culim and am satisfied that the expenses listed and the information and documenta	ion provided are in accordance with Council policy C-CC-03 Coun	til Remuneration and Expense Reimbursement		
kersy Hilts (Jan 17, 2022 10:39 MST)				
City Manager Signature	Date (DD/MM/YY)			
C:\Users\rllovd\Desktop\Council Expense Claims\Monthly Expense Claims\Mayor\December 2021\[Nov	ember - Council Expense Claim Form xlsm1Claim Form			