- 01	T. Cirvof
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00	Cultivate Life

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Councillor Brodhead

Date Submitted 09/02/22 Month January Year 2022

General Council F	Related Business	In-Region Mileage Cl	aim based on Chart	One Way	Mileage Claim km's (From Chart)	Out-of-Region Mileau	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 Coo	ding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220			1226	1221	1222	1222	!	ACCT	Cost Ctr P	CAT 2 roject CAT4	
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Sub-Total \$

Professional Deve	elopment	In-Region Mileage C	laim based on Chart	One Wa	Mileage Claim (From Chart)	Out-of-Region Milea	ge Claim (or In-Region, c mileage)	One Way	Mileage Claim- Specific	Mileage Amount @ 0.505/km	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	ļ	ACCT	Cost Ctr	CAT 2 Project CAT4
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Sub-Total	\$

	City of	Council Member Monthly Expense Claim Form			1	
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Name:	Councillor Brodhead	Date Submitted 09/02/22 Month	January	Year	2022	

AUMA or FCM (onvention or Board Expenses	In-Region Mileage Cl	aim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region,	One Way /Return	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		or Course Registration /Event Ticket	General Expenses *	Total		GL Co		
Date (DD/MM/Y) Nature of Event/Meeting	From	То			From	То	CAT7_		122	1 122	122	1226	1227	1225	1224		ACCT	Cost Ctr P	CAT 2 roject CAT4	
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Sub-Total \$ -

Office of the Mayo	or (Official Events & Duties)	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	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	!	ACCT Cost Ctr CAT3 CAT4
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Sub-Total \$ -

	City of	Council Member Monthly Expense Claim Form				1	
St	Cultivate Life		l		Select From List		
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Name:	Councillor Brodhead	Date Submitted 09/02/22	Month	January	Year	2022	

Operating Supp	pplies/Telephone/Internet/Sponsorships Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (M.)	ax \$1,000/Year see policy C-CC-21 Council Sponsorship) Total	G	SL Coding	
Date (DD/MM/YY	(Y) Detailed Description		ACCT Cost Ctr	CAT 2 r Project CAT7	Expense Type
18/01/2	1/22 Home Internet - Shaw	70.00	6404 1010	516104 N/A	Mobile Device Ch
25/01/2	1/22 Mobile Device - Bell Mobility	55.00	1010	516104 N/A	Mobile Device Ch

Sub-Total \$ 125.00

BMO MasterCard E	expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)							
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Sub-Total \$ -

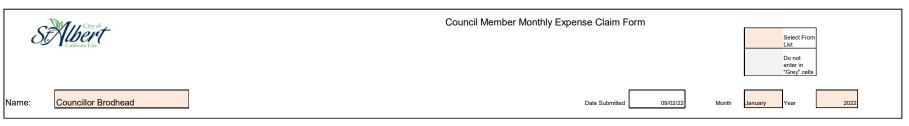
St	Counce Co	il Member Monthly Expense Claim F	Form				Select From List Do not enter in "Grey" cells	_		
Name:	Councillor Brodhead	Date Submitted	09/02/22]	Month	January	Year	202	2	
Expenses Paid [Directly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total		
Date (DD/MM/YY)										
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Claim Reminders:	Collicy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses**	·				Sub-Total	•	\$ -	Ξ	
Detailed receip	its must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.			_						
	may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.				Total Exp					5.00
	eage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location nses, 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 sh	ould be listed on the back of the receipt.			BMO Mas Expenses					
	ded 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				,					

6. Expense claims must be submitted within 10 days of the following month

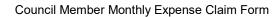
7. Incomplete expense claims will not be processed

Net to be paid to: Councillor Brodhead

\$ 125.00



Authorizations & Approvals		Councillor Brodhead	January	20
Proparer 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 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 was completed by another individual. All applicable receipts have been attached.	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	e claim even if the form		
Wes Brodhead (Feb 9, 2022 12:46 MST)				
Council Member's Signature	Date (DD/MMYY)			
Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support.				
L. Lavalloo				
LLavallee (Feb 9, 2022 13:10 MST) Accounts Payable Personnel Signature	Date (DD/MM/YY)			
Accounts t ayable t crowning orginature	Data (Dollman 11)			
			1	
Chief Financial Officer				
l have reviewed this claim and am satisfied that the expenses listed and the information and documentation provi	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
Anne Victoor (Feb 9, 2022 14:52 MST)				
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 provi	ded 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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P\Mavor's Office\Expenses - F00\2022\1lanuar\Brodhead\Clir Brodhead Council Expense Claim Form - MAS	NTER D. '. IN			





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Name: Councillor Brodhead

Date Submitted 04/03/22 Month February

ary Year 2022

Seneral Council R	elated Business	In-Region Mileage Cl	aim based on Chart	Way	Mileage Claim km's (From Chart)	Out-of-Region Mileag	e Claim (or In-Region, mileage)		Mileage Claim km's- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total		GL Codir CA	g
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222	!	ACCT	CA Cost Ctr Proj	T 2 ect CAT4
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Sub-Total \$ -

Professional Dev	elopment	In-Region Mileage Cl		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 Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	7 1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4
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2022

Name:

Councillor Brodhead

Date Submitted 04/03/22 Month February Year

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl	aim based on Chart			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	1	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	Way		ige Claim (or In-Region, c mileage)	One Way /Return		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 \$ -



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Name:

Councillor Brodhead

Date Submitted

Month

04/03/22

February Year

2022

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	
18/02/22 Home Internet - Shaw		70.00	6404 1010	516104 N/A	Mobile De	evice Charge
25/02/22 Mobile Device - Bell		55.00	1010	516104 N/A	Mobile De	evice Charge

Sub-Total \$ 125.00

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses * To	⁻ otal
Date (DD/MM/YY)							
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Name:

Councillor Brodhead

04/03/22 February 2022 Date Submitted Month Year

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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- <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



Name:

Councillor Brodhead

Council Member Monthly Expense Claim Form

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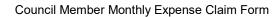
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2022

Date Submitted 04/03/22 Month February Year

Councillor Brodhead February 2022 Authorizations & Approvals 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. Date (DD/MM/YY) Council Member 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 another individual. All applicable receipts have been attached. Council Member's Signature Date (DD/MM/YY) Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support.

L. LAVAULEE L. Lavallee (Mar 7, 2022 08:00 MST) Accounts Payable Personnel Signature Date (DD/MM/YY) Chief Financial Officer 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 nne Victoor (Mar 7, 2022 14:26 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 Kerry Hilts (Mar 7, 2022 14:27 MST) City Manager Signature Date (DD/MM/YY)





Select From List Do not enter in "Grey" cells

Name: Councillor Brodhead

Date Submitted 07/04/22 Month March Year 2022

General Council Related Business	In-Region Mileage C	laim based on Chart	One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mile	eage Claim (or In-Region, ific mileage)	One Way /Return	Mileage Claim km's- Specific	Amount @	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	122	1226	1221	1222	1222		ACCT	Cost Ctr	CAT 2 Project CAT4
14/03/22 Presentation to Edmonton City Council					St. Albert	Edmonton	One Way	15.20	7.68							7.68	6140	1010	516104
14/03/22 Council Strategic Planning					Edmonton	Smoky Lake	One Way	120.00	60.60							60.60	6140	1010	516104
16/03/22 Council Strategic Planning					Smoky Lake	St. Albert	One Way	114.00	57.57							57.57	6140	1010	516104
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Professional Dev	relopment	In-Region Mileage C	laim based on Chart	One Way /Return		ge Claim (or In-Region,		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	122	1 1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4	_
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Name:

Councillor Brodhead

Date Submitted

Month

07/04/22

March Year

2022

AUMA or FCM Cor	nvention or Board Expenses	In-Region Mileage Cl	aim based on Chart	Way	Mileage Claim (From Chart)		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 CA ⁻	.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	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		ACCT	Cost Ctr CAT3	CAT4
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Sub-Total

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Name:

Councillor Brodhead

Date Submitted 07/04/22

Month Ma

March Year

2022

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 C	CAT 2 tr Project C/	AT7	Expense Type	
18/03/22 Home Internet - Shaw		70.00	6404 1010	516104	N/A	Mobile De	vice Charge
25/03/22 Mobile Device - Bell		55.00	1010	516104	N/A	Mobile De	vice Charge

Sub-Total \$ 125.00

BMO MasterCard I	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
29/03/22	State of the City Edmonton Ticket					103.95		103.95
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Sub-Total

\$ 103.95

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Name:

Councillor Brodhead

07/04/22 2022 Date Submitted Month March 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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<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 354.80 Less: BMO MasterCard 103.95 -\$ Less: Expenses Paid Net to be paid to: Councillor Brodhead 250.85



Select From List

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"Grey" cells

Name: Councillor Brodhead

Date Submitted 07/04/22 Month March Year 2022

Authorizations & Approvals		Councillor Brodhead	March	2022
Preparer If claim form was prepared by an individual other than the Council Member, sign and date below This expense dain form was prepared in accordance with all information provided by the Council Member at the preparer's Signature Preparer's Signature	he time of submission. Date (DD/MM/YY)			
was completed by apother individual. All applicable receipts have been attached. **MeS broaneau**	ity 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		
Wes Brodhead (Apr 11, 2022 14:37 MDT) Council Member's Signature	Date (DD/MM/YY)			
Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support. L. Lavallee L. Lavallee (Apr 11, 2022 14:43 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 processes and the information and documentation processes. Anne Victor (Apr 11, 2022 15:38 MDT)	rovided 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 revigued this claim and am satisfied that the expenses listed and the information and documentation pure Kerry Hilts (Apr 11, 2022 15:39 MDT)	ovided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
City Manager Signature	Date (DD/MM/YY)			