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	Cultivate Life

Select From List

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Councillor Brodhead

Date Submitted 05/05/22 Month April Year 2022

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					Mileage Claim km's				Mileage Claim	Milene	044				Danistantian						
General Council I	Related Business				Claim kins				Ciaim	Mileage	Other A				Registration /Event Ticket	0					
				One Way	(From	Out-of-Region Mileag	e Claim (or In-Region, mileage)	One way	Km's-	Amount @	Transportation &				/Event licket	General				~	
		In-Region Mileage Cl	aim based on Chart	/Return	Chart)	specific	mileage)	/Return	Specific	0.505/km	Parking *	Accommodations *	Airtare*	Meals *	-	Expenses *	lotal		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 CA	T4
Apr 1-7, 2022	CUTA Spring Conference					St. Albert	Edmonton	Return	102.00	51.51	129.35	1,920.66	646.41	300.00		13.51	3,061.44	6140	1010	516104	
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Sub-Total \$ 3,061.44

Professional Deve	olopment	In-Region Mileage C	laim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region, mileage)	One Way	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*		or Course Registration /Event Ticket	General Expenses * 1	Fotal		GL C	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project CAT4
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ub-Total	\$ -

0	City of	Council Member Monthly Expense Claim Form					
St	Cultivate Life				Select From List		
					Do not enter in "Grey" cells		
Name:	Councillor Brodhead	Date Submitted 05/05/22	Month	April	Year	2022	

AUMA or FCM	Convention or Board Expenses	In-Region Mileage C	laim based on Chart	One Way	Mileage / Claim (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region,	One Way /Return	Claim-	Amount @	Other Transportation 8 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 1221	122	1226	1227	1225	1224	ı	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 \$ -



Select From List

Do not enter in
"Grey" cells

Name: Councillor Brodhead

Date Submitted 05/05/22 Month April Year

Operating Suppl	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 Cost	CAT 2 Ctr Project C		Expense Type	
18/04/2	2 Home Internet - Shaw		70.00	6404 1010	516104	N/A	Mobile Device C	Charge
25/04/2	2 Mobile Device - Bell		55.00	1010	516104	N/A	Mobile Device C	Charge

Sub-Total \$ 125.00

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses * Tota	tal
Date (DD/MMYY)							
01/04/22 Edmonton Mayor's State of the City Ticket					103.95		103.95
12/04/22 Chamber Business@Lunch Ticket					40.00		40.00
21/04/22 Business Breakfast Ticket					31.50		31.50
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Sub-Total \$ 175.45

St	Sity of Culevate Life	Council Member Monthly Expe	nse Claim F	Form				Select From List Do not enter in "Grey" cells		
Name:	Councillor Brodhead		Date Submitted	05/05/22	2	Month	April	Year	20	122
xpenses Paid D	Directly by the City (eg. Petty Cash)		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total	
ate (DD/MM/YY)				T.		_				
							ļ	↓		
laim Reminders: See Council Po Detailed receip	. Collcy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses** Its must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.		ı			1	Sub-Total		\$	<u>-</u> = ——
. Meter parking n	may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.					Total Exp				\$ 3,
	eage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location					BMO Mas	sterCard			-\$

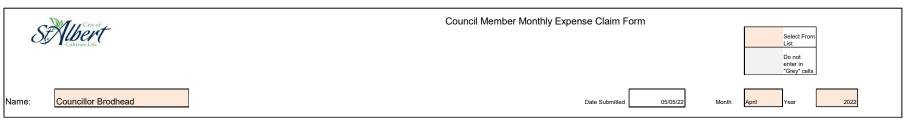
5. It is recommended to claim mileage based on the standard mileage chart. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)

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

7. Incomplete expense claims will not be processed

Net to be paid to: Councillor Brodhead

\$ 3,186.44



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.	Councillor Brodhead	April	
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.			
The should be the same of the			
Preparer's Stylhatife Date (DD/MMYY)			
council Member		1	
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 r	responsible for the details of the claim even if the form		
as completed by another individual. All applicable receipts have been attached.			
(GCV)(S) (S) (2021 (8:53 MOT)			
Council Member's Signature Date (DD/MM/YY)			
(
ccounts Payable			
have reviewed this claim for mathematical accuracy and documentation support.			
L. Lavallee (Nay 9, 2022 08:15 MOT)			
Accounts Payable Personnel Signature Date (DD/MM/YY)			
hief Financial Officer			
nave 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			
Lie- Vete 164-7			
hief Financial Officer Signature Date (DD/MM/YY)			
Chief Administrative Officer (City Manager)			
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			
\mathcal{K}			
(erry Hilts (May 9, 2022 08:54 MDT)			
thy Manager Signature Date (DD/MMYYY)			

P:\Mayor's Office\Expenses - F00\2022\4 - April\Brodhead\[Clir Brodhead Council Expense Claim Form - MASTER Revised November 2021.xlsm]Claim Form



Select From List Do not enter in "Grey" cells

Name: Councillor Brodhead

Date Submitted 15/06/22 Month May Year 202

					Mileage				Mileage												
General Council I	Polatod Rusinoss				Mileage Claim km's	Out-of-Region Mileac specific			Claim	Mileage	Other				Registration						
General Council	Velated Dusilless			One Way	(From	Out-of-Region Mileag	e Claim (or In-Region.	One Way	km's-	Amount @	Transportation				/Event Ticket	General					
	1	In-Region Mileage Cla	aim based on Chart	/Return	(Chart)	specific	mileage)	/Return	Specific	0,505/km	& Parking *	Accommodations *	Airtare*	Meals *	-	Expenses *	Lotal		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 C.	AT4
13/05/22	EMRB Welcome to the Region					St. Albert	Morinville	Return	42.40	21.41							21.41	6140	1010	516104	
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Sub-Total \$ 21.41

Professional Dev	velopment	In-Region Mileag	ge Claim based on Chart	One Way	Out-of-Region Mileas	ge Claim (or In-Region, mileage)	One Way	Mileage Claim- Specific	Mi l eage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*		or Course Registration /Event Ticket *	Genera l Expenses *	· 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	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 15/06/22

Month May

2022

AUMA or FCM Cor	vention or Board Expenses	In-Region Mileage Cla	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*		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	
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Sub-Total \$

Office of the May	or (Official Events & Duties)	In-Region Mileage Cla	aim based on Chart	One Way	Mileage y 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 Codi	ng
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From		CAT7_		1220			1226	1221	1222	1222	:	ACCT	Cost Ctr CAT	3 CAT4
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Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name:	Councillor Brodhead

Date Submitted 15/06/22 Month May Year

Operating Suppli	les/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 C		Expense Type	
18/05/22	2 Home Internet - Shaw		70.00	6404	1010	516104	N/A	Mobile De	evice Charge
25/05/22	2 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 *	Total
Date (DD/MM/YY)								
10/05/22	Sturgeon County Mayor's Golf Tournament					183,75		183.75
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Sub-Total \$ 183.75



Councillor Brodhead

Council Member Monthly Expense Claim Form

Date Submitted

15/06/22

Do not enter in "Grey" cells

Other Registration Expenses Paid Directly by the City (eg. Petty Cash) Event Ticket & Parking * Date (DD/MM/YY)

Name:

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	\$	330.16
Less: BMO MasterCard Less: Expenses Paid	-\$ \$	183.75
Net to be paid to Councillor Brodhead	\$	146.41

Sub-Total





Councillor Brodhead Name:

Authorizations & Approvals

Date Submitted 15/06/22 Month

Councillor Brodhead

May

2022

Preparer Preparer		1
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	t the time of submission.	
(D) MANUEL CO		
Preparer's Signature	Date (DD/MM/YY)	
Council Member		1
	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.		
was completed by another individual. All applicable receipts have been attached. WES BROANEAA		
Wes Brodhead (Jun 15, 2022 16:48 MDT)		
Council Member's Signature	Date (DD/MMYY)	
		1
Accounts Pavable I have reviewed this claim for mathematical accuracy and documentation support.		
Danielle Parsons Danielle Parsons (Jun 16, 2022 11:56 MDT)		
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	
Anne Victoor (Jun 16, 2022 15:20 MDT)		
Chief Financial Officer Signature	Date (DD/MM/YY)	
•		
		1
Chief Administrative Officer (City Manager)		
	and the country of th	
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	
WHECC		
City Manager Cignature	Patr (PDMMOV)	
City Manager Signature	Date (DD/MM/YY)	
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Select Fron List Do not enter in "Grey" cells

Name:

Councillor Brodhead

Date Submitted

Month

05/07/22

2022

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					Mileage Claim km's		e Claim (or In-Region. mileage)		Claim	Mileage	Other				Registration					
General Council R	Related Business			One Way	(From	Out-of-Region Mileag	e Claim (or In-Region.	One Way	km's-	Amount @	Transportation &				Registration /Event Ticket	General				
		In-Region Mileage Cl	aim based on Chart	/Return	Chart)	specific	mileage)	/Return	Specific	0.505/km	Parking *	Accommodations *	Airfare*	Meals *	*	Expenses *	Total		GL Coding	
								I											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
			Edmonton-																	
09/06/22	EMTSC Meeting	St. Albert	Downtown	Return	30.00					15.15							15.15	6140	1010 51610	
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															Sub-Total		£ 15.15			
															Sup-10tal		\$ 15.15			

Professional Dev	velopment	In-Region Mileage C	laim based on Chart	One Wa	Mileage by Claim (From Chart)	Out-of-Region Mileag	ne Claim (or In-Region. mileage)			Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding CAT	9
Date (DD/MM/YY	Nature of Event/Meeting	From	То		•	From		CAT7_	1221			1226	1227			·	ACCT	CAT Cost Ctr Proje	CAT4
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Sub-Total



Select From List Do not enter in "Grey" cells

Name:

Councillor Brodhead

Date Submitted

Month

05/07/22

2022

AUMA or FCM Co	onvention or Board Expenses	In-Region Mileage CI		One Way		ge 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	То	CAT7_		122			1226	1227	1225	1224	AC	CAT 2 CCT Cost Ctr Project CAT4
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Sub-Total \$ -

Office of the Mayo	or (Official Events & Duties)	In-Region Mileage C	laim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region, mileage)	One Way	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket Ge * Ex	eneral xpenses *	Total		GL Codii	pg
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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"Grey" cells

2022

Date Submitted 05/07/22 Month June Year

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 C	CAT 2 tr Project CAT7	Expense Type		
18/06/22	2 Home Internet - Shaw	70.00	6404 1010	516104 N/	A Mobile De	evice Charge	
25/06/22	2 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 *	Total
Date (DD/MM/YY)								
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Sub-Total \$ -

SE	Council Member Mo	onthly Expense Claim For	m			Select From List Do not enter in		
Name:	Councillor Brodhead	Date Submitted	05/07/22	Month	June	"Grey" cells Year	2022	
Expenses Paid Di	rectly by the City (eg. Petty Cash)	Other Transportation & Parking * Acc	commodations * A	irfare* Meals	Registration /Event Ticket	General Expenses *]	Гotal	
Date (DD/MM/YY)					1		_	
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					Cub Tata'		-	
Detailed receipts	licy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses** must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.		Г		Sub-Total	-	\$	
	ay be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section. age chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location		Grand Total Expenses \$ 1. Less: BMO MasterCard \$					

Directly

Net to be paid to: Councillor Brodhead

\$ 140.15

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

7. Incomplete expense claims will not be processed

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)



Date Submitted

05/07/22

Month



2022

Name:

Councillor Brodhead

Authorizations & Approvals		Councillor Brodhead	June	2022
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	Date (DD/MMYY)			
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. WES Brodnead Wes Brodnead (Jul 6, 2022 10:59 MDT)	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 o	of the claim even if the form		
Council Member's Signature	Date (DD/MMYY)			
Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support. Lynda Lavallee Lynda Lavallee (Jul 6, 2022 11:03 MOT)				
Accounts Payable Personnel Signature	Date (DD/MMYY)			
Chief Financial Officer				
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provi Sugarke That July 1.00 1.00 1.00 1.00 1.00 Sugarke That July 1.00 1.00 1.00 1.00 1.00 1.00 1.00 Sugarke That July 1.00 1.00 1.00 1.00 1.00 1.00 Sugarke That July 1.00 1.00 1.00 1.00 1.00 Sugarke That July 1.00 1.00 1.00 1.00 Sugarke That July 1.00 1.00 1.00 Sugarke That July 1.00 1.00 Sugarke That July 1.00 1.00 Sugarke That July 1.00 Sugarke That 1.00 Sugarke	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
Chief Financial Officer Signature	Date (DD/MMYY)			
			1	
Chief Administrative Officer (City Manager)				
thave 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)			

\talbert.local\Public\Mayor's Office\Expenses - F00\2022\6 - June\Brodhead\Clir Brodhead Council Expense Claim Form - MASTER Revised November 2021.xism]Claim Form