

Select From List Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted

Month

19/08/22

ly Year

2022

General Council I	Related Business	In-Region Mileage Cla	aim based on Chart	One Way /Return	Mileage Claim km's (From Chart)		ge 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		GL (	Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT		CAT 2 Project CAT4	
10/07/22	MidSized Mayor's Stampede Event					Pigeon Lake	Calgary	One Way	255.00	128.78	11.78						140.56	6140	1010	516112	
12/07/22	MidSized Mayor's Stampede Event					Calgary	St. Albert	One Way	322.00	162.61							162.61	6140	1010	516112	
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Sub-Total \$ 303.17

Professional Dev	elopment	In-Region Mileage C	laim based on Chart	One Way /Return	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		CAT7_		1221			1226	1227	1225	1224		CAT 2 ACCT Cost Ctr Project CAT4

Sub-Total



Select From List Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted	19/08/22	Month	July	Year	2022

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cla			Out-of-Region Mileag	e Claim (or In-Region,	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	CAT4
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Sub-Total \$ -

Office of the Ma	yor (Official Events & Duties)	In-Region Mileage (	Claim based on Chart			ge Claim (or In-Region. mileage)	One Way		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total		GL Codin	g	
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: Mayor

Mayor Heron

Date Submitted

Month

19/08/22

y Year

2022

Operating Suppli	es/Telephone/Internet/Sponsorships	ibile 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 CA		Expense Type	
01/07/22	Home Internet - Shaw (Mayor to charge one third the alloted maximum)		23.33	6404	1010	516112	N/A	Mobile Device	Charge
21/07/22	Mobile Device - Telus		18.33		1010	516112	N/A	Mobile Device	Charge

Sub-Total

\$ 41.66

BMO MasterCard	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
10/07/22	MidSized Mayors Stampede Event	30.00			6.99			36.99
18/07/22	Fresh Flowers & More						86.05	
18/07/22	MidSized Mayors Stampede Event		- 473.89					- 473.89
	Surrey Meetings	206.15	294.64					500.79
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Sub-Total

\$ 149.94





19/08/22 Mayor Heron Name: Date Submitted

Expenses Paid Dir	recuy by the Oity (eg. Fetty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
29/07/22	Tickets for Rotary Club of Morinville 25th Anniversary Gala					100.00		100.00
								_
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								_
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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	\$	594.77
Less: BMO MasterCard	-\$	149.94
Less: Expenses Paid	-\$	100.00
Net to be paid to: Mayor Heron	\$	344.83
	'-	

\$ 100.00

Sub-Total





19/08/22

Date Submitted

Name: Ma

Mayor Heron

Authorizations & Approvals		Mayor Heron	July	2022
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  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.  Huor	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		
Council Member's Signature	Date (DD/MMYY)			
Accounts Pavable  I have reviewed this claim for mathematical accuracy and documentation support.  L. LAYALUE  L. LAYAILUE  L. LAYAILUE				
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 provi  Anne Victoor (Aug 23, 2022 08:37 MDT)	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 provi	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
City Manager Cinartura	Poto (DD/MM/VV)			

\talbert.local\Public\Mayor's Office\Expenses - F00\2022\6 - June\Mayor\Councii\[Mayor Heron Councii Expense Claim Form - June 2022.xlsm]Claim Form



Select
From List
Do not
enter in
"Grey" cells

Name:

Mayor Heron

Date Submitted 16/09/22 Month August Year

				_	Mileage Claim km's				Mileage											
General Council R	telated Business			One	Claim km's				Claim	Mileage	Other	Accommodations *			Registration /Event Ticket	_				
				Way	(From	Out-of-Region Mileage	e Claim (or In-Region.	One Way	km's-	Amount @	Transportation				/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 CAT 2	
		_																	CAT 2	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_	_	1220	1220	1225	1226	1221	1222	1222	2	ACCT	Cost Ctr Project	t CAT4
			Edmonton-																	
26/08/22	EMRB Special Board Meeting	St. Albert	Kingsway	One Way	13.00					6.57							6.57	6140	1010 51611:	)
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Professional Dev	elopment	In-Region Mileage C	laim based on Chart	One Way /Return	Out-of-Region Mileage	e Claim (or In-Region. mileage)			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	То	CAT7_	1221	1221	1222	1226	1227	1225	1224		ACCT Cost Ctr Project CAT4
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Select From List Do not enter in "Grey" cells

Name:

Mayor Heron

Date Submitted

16/09/22

Month August

2022

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl	aim based on Chart	One Way /Return	Mileage Claim (From Chart)		ne Claim (or In-Region.	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_		122	1 1221	1222	1226	1227	1225	1224	ACCT	CAT 2 Cost Ctr Project CAT4	
										-									
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Sub-Total \$

Office of the Mayo	or (Official Events & Duties)	In-Region Mileage C		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*		Registration /Event Ticket Ge * Exp	eneral	Total		GL Codi	ng
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	122	1 1222	1222		ACCT	Cost Ctr CATS	3 CAT4
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Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name:	Mayor Heron
vame:	Mayor Heron

Date Submitted

Month

16/09/22

2022

Operating Supplie	As/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	G	GL Coding	
Date (DD/MM/YY)	Detailed Description		ACCT Cost Ct	CAT 2 r Project CAT7	Expense Type
01/08/22	Home Internet - Shaw (Mayor to charge one third the alloted maximum)	23.33	6404 1010	516112 N/A	Mobile Device Cha
21/08/22	Mobile Device - Telus	18.33	1010	516112 N/A	Mobile Device Cha

Sub-Total

\$ 41.66

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)							
15/08/22 Endeavour Coffee Roasters - Council in the Community prize						39.00	39.00
							_
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							-

Sub-Total

\$ 39.00

SE	Council City of Council Counci	I Member Monthly Expense Claim	Form				Select From List Do not enter in "Grey" cells		
Name:	Mayor Heron	Date Submitted	16/09/22		Month	August	Year	2022	
Expenses Paid Dir	rectly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare* N	Meals *	Registration /Event Ticket	General Expenses * To	tal	
Date (DD/MM/YY)									
								_	
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Claim Reminders: ** See Council Pol 1. 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.	1				Sub-Total	\$	-	
	ay be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.		Grand To				\$		
3. A standard milea	age chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location			Less: BN	иO Mast	terCard		-5	\$

Directly

Net to be paid to: Mayor Heron

\$ 48.23

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.

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

7. Incomplete expense claims will not be processed

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)





2022

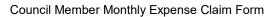
16/09/22

Date Submitted

Name: Mayor Heron

Mayor Heron 2022 Authorizations & Approvals August If claim form was prepared by an individual other than the Council Member, sign and date below
This expense શ્રીલાંભે 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 was completed by another individual. All applicable receipts have been attached. : Heron Council Member's Signature Date (DD/MM/YY) Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support. L. Lavallee 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 an Viel Chief 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 ANSCH Date (DD/MM/YY) City Manager Signature

P:\Mayor's Office\Expenses - F00\2022\8 - August\Mayor\Council\(Mayor Heron Council Expense Claim Form - August 2022.xlsm)\(Claim Form - August 2022.xlsm)\(Cl





Select
From List

Do not
enter in
"Grey" cells

Name: Mayor Heron

Date Submitted Month September Year 2022

General Council R	Related Business	In-Region Mileage C	Claim based on Chart	One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Milea	age Claim (or In-Region,	One Way /Return	Mileage Claim km's- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*	R /E 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	25 1226	6 1221	1222	2 1222		ACCT	Cost Ctr	CAT 2 Project C	AT4
	Rotary Club of Morinville Sturgeon 25th Anniversary Gala	St. Albert	Morinville	Return	38.00					19.19							19.19	6140	1010	516112	
16/09/22	EMRB Committee of the Whole	St. Albert	Edmonton- Kingsway	Return	26.00					13.13							13.13	6140	1010	516112	
28/09/22	Edmonton Global	St. Albert	Edmonton- Downtown	Return	30.00					15.15							15.15	6140	1010	516112	
29/09/22	UDI Luncheon	St. Albert	Edmonton-South	Return	72.00					36.36							36.36	6140	1010	516112	
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Sub-Total \$83.83

Registration	GL Coding
227 1225 1224	CAT 2 ACCT Cost Ctr Project CAT4
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-	-
	/Event Ticket   General *   Expenses *   Total

Sub-Total \$



Select
From List

Do not
enter in
"Grey" cells

Name:

Mayor Heron

Date Submitted Month September Year 2022

AUMA or FCM Cor	evention or Board Expenses	In-Region Mileage Cla		Way	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		CAT7_		122		1222	1226	5 1227	1225	1224	4	ACCT	CAT 2 Cost Ctr Project	CAT4
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Sub-Total

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Office of the Ma	yor (Official Events & Duties)	In-Region Mileage C	laim based on Chart	Way	Out-of-Region Mileag	e Claim (or In-Region, mileage)	One Way /Return	Claim-		Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket Ger * Exp	neral enses * Tota	al		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:

Mayor Heron

Date Submitted Month September Year 2022

Operating Supplie	s/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
	Home Internet - Shaw (Mayor to charge one third the alloted maximum)	23.33	#N/A	1010	516112 N/A	
21/09/22	Mobile Device - Telus	18.33		1010	516112 N/A	

Sub-Total \$ 41.66

DimO master Caru Experises		Other Transportation & Parking *	Accommodations *	Airfare*	Registration /Event Ticket *	General Expenses *	Γotal
Date (DD/MM/YY)							
19/09/22 Standing	ng Desk Converter					167.86	167.86
26/09/22 ICSC M	Membership				185.07		185.07
26/09/22 ICSC Co	Conference Registration				502.58		502.58
26/09/22 Paint the	ne Town Purple Kickoff Ticket				25.00		25.00
26/09/22 Chambe	per Business Excellence Week Rotary Breakfast				20.00		20.00
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Sub-Total \$ 900.51

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17	llbert
00	Culrivare Life

Select From List Do not enter in "Grey" cells

Name:

Mayor Heron

2022 Date Submitted Month September 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)		ï						
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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 \$ 1,026.00 Less: BMO MasterCard 900.51 -\$ Less: Expenses Paid Net to be paid to: Mayor Heron 125.49

Sub-Total



Select From List Do not enter in "Grey" cells

lame:	Mayor Heron	Date Submitted		September	Year	2022	

Authorizations & Approvals		Mayor Heron	September	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	time of submission.			
Preparer's Signature	Date (DD/MM/YY)			
Council Member			1	
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	f the claim even if the form		
C. Heron				
Council Member's Signature	Date (DD/MM/YY)			
Accounts Payable			1	
I have reviewed this claim for mathematical accuracy and documentation support.  Lynda Lavallee Lynda Lavallee (Oct 17, 2022 13:34 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 prov	vided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
Anne Victoor (Oct 18, 2022 08:43 MDT)	·			
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	vided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
William Fletcher (Oct 18, 2022 09:13 MDT)				
City Manager Signature	Date (DD/MM/YY)			
			•	