

Select From List Do not enter in "Grey" cells

Year

Name:	Counc
varrie.	Couric

Councillor Killick

Date Submitted

08/11/22

Month October

2022

					Mileage				Mileage												
General Council I	Related Business			One Way	Claim km's	Out of Boolea Miles	Claim (as la Dania	0== 14/=	Claim	Mileage	Other Transportation				Registration /Event Ticket	C					
		In-Region Mileage Cl	aim based on Chart	/Return	(From Chart)	Out-of-Region Mileag specific	mileage)	/Return	Specific	0.505/km	& Parking *	Accommodations *	Airfare*	Meals *	*	Expenses *	Total		GL	Coding	
																				CAT 2	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		1	From	То	CAT7_		1220	1220	1225 T	1226	1221	1222	1222		ACCT	Cost Ctr	Project CA	14
20/10/22	UDI Luncheon	St. Albert	Edmonton-South	Return	72.00					36.36							36.36	6140	1010	516114	
																	-				
										-							-				
										-			-				-				
										_											
										-							-				
										-							-	l I			
										-							-				
																	_				
																	_				
							+			-			+		-		-				
										-							-				

Sub-Total \$ 36.36

Professional Dev	velopment	In-Region Mileage CI	aim based on Chart	Way		ne 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		CAT 2 ACCT Cost Ctr Project CAT4
															,		
									_								
																-	
									-							-	
									-							-	

b-Total \$ -



Select From List Do not enter in "Grey" cells

Name: C

Councillor Killick

Date Submitted

Month

08/11/22

October Year

2022

AUMA or FCM Co	onvention or Board Expenses	In-Region Mileage Cl	aim 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 C		
Date (DD/MM/YY	) Nature of Event/Meeting	From	То			From	То	CAT7_		122	1 1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project CAT4	
	-																				
										-								†			
										-	-						-	-			
										_							-				
										-											
										-							-				

Sub-Total \$ -

Office of the May	vor (Official Events & Duties)	ial Events & Duties)  In-Region Mileage Claim base		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region, mileage)	One Way	Mileage Claim- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Coding	1
Date (DD/MM/YY	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	122	1 1222	1222	!	ACCT	Cost Ctr CAT3	CAT4
																		1		
										-								1		
										-							-	†		
										-							-	+		
										-										

Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name:	Councillor Killick
varrio.	Oddriellor Killiek

Date Submitted 08/11/22 Month October Year 2022

Operating Supplie	hs/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 CA	Exper 7 Type	
13/10/22	Mobile Device - Telus	43.00	6	404 1010	516114 I	/A Mobile	le Device Charge
19/10/22	Home Internet - Telus	66.15		1010	516114 I	/A Mobile	le Device Charge

Sub-Total \$ 109.15

BMO MasterCard I	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)								
05/10/22	Chamber Business@Breakfast					20.00		20.00
11/10/22	Chamber Business Excellence Awards					47.25		47.25
								_
								_
								_
								-
								_
								_

Sub-Total \$ 67.25

D	1 . Cinual
SFX	lbert
09	Cultivate Life

Select From List
Do not enter in "Grey" cell

lame:	Councillor Killick

Date Submitted

08/11/22

Sub-Total

Expenses Paid D	recuy by the only (eg. ) etcy death)	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
								_
								-
								-
								-
								-
								-
								-

<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	\$	212.76
Less: BMO MasterCard	-\$	67.25
Less: Expenses Paid	\$	-
Net to be paid to: Councillor Killick	\$	145.51





2022

08/11/22

Month

Date Submitted

lame:	Councillor Killick	

Councillor Killick October 2022 Authorizations & Approvals If claim form was prepared by an individual other than the Council Member, sign and date below
This exageige 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 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 the claim even if the form was completed by another individual. All applicable receipts have been attached. Millich Council Member's Signature Date (DD/MM/YY) I have reviewed this claim for mathematical accuracy and documentation support. Danielle Parsons Date (DD/MM/YY) Accounts Payable Personnel Signature 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-C-03 Council Remuneration and Expense Reimbursement Anne Victoor (Nov 15, 2022 16:48 MST) Chief Financial Officer Signature Date (DD/MM/YY) Chief Administrative Officer (City Manager) 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 Date (DD/MM/YY) City Manager Signature

P:\Mayor's Office\Expenses - F00\2022\10- October\Killick\[Clir Killick Council Expense Claim Form - MASTER Revised November 2021.xlsm]Claim Form



Select
From List

Do not
enter in
"Grey" cells

Name:	Coun
	Oddii

Councillor Killick

Date Submitted

Month

06/12/22

November Year

2022

General Council I	Related Business			Way	Mileage Claim km's (From	Out-of-Region Mileag	ge Claim (or In-Region, mileage)	One Way	Mileage Claim km's-	Mileage Amount @	Other Transportation		 	Registration /Event Ticket	General				
Date (DD/MM/YY)	Nature of Event/Meeting	In-Region Mileage Cl	To Chart	/Return		From	To	CAT7	Specific	1220		Accommodations *		•	Expenses *		ACCT	GL Coding CAT Cost Ctr Proje	2
																	7.001	0001 00	
										-						-			
										-						-	1		
										-						-			
										-						-	1		
										-						-	1		
										-						-			
				-						-						-			
										-						-			
										-						-			
										-						_			
										-						_			
																_			
																_			
										-						-			

Sub-Total \$ -

Professional Development	In-Region Mileags		Way	Mileage Claim (From Chart)	Out-of-Region Mileac			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	ı
																	1		
									-							-	1		
									-							-	-		
									-							-	-		
									-							-			
									_							_			

b-Total \$ -



Select
From List

Do not
enter in
"Grey" cells

Name:	C
-------	---

Councillor Killick

Date Submitted

Month

06/12/22

November Year

2022

AUMA or FCM	Convention or Board Expenses	In-Region Mileage C	laim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileac	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/Y	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project	
										_							-			
										-							-			
										-										
										_										
																	_			

Sub-Total \$ -

Office of the Mayo	or (Official Events & Duties)	In-Region Mileage Cl	aim 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*	Meals *	Registration /Event Ticket	General Expenses *	Total		GL Codin	g	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From		CAT7_		1220						1222		ACCT	Cost Ctr CAT3	CAT4	
																		1			
										-							-	1			
										-							-	1			
										-							-	-			
										_							_				

Sub-Total \$ -



Select From List

Do not enter in
"Grey" cells

2022

Name:	Councillor Killick
varrie.	Couricillor Killick

Date Submitted 06/12/22 Month November 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 Ctr	CAT 2 Project CAT	Expense Type	е
13/11/22	Mobile Device - Telus Mobility	43.00	6	6404 1010	516114 N	A Mobile E	Device Charge
19/11/22	Home Internet - Telus	66.15		1010	516114 N	A Mobile E	Device Charge

Sub-Total \$ 109.15

BMO MasterCard		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)								
10/11/22	December Chamber Luncheon Registration					50.00		50.00
10/11/22	SAIF Donation						200.00	200.00
10/11/22	LoSeCa Donation						200.00	200.00
10/11/22	SASHA Donation						200.00	200.00
10/11/22	St. Albert Food Bank Donation						200.00	200.00
								-
								_
								_

Sub-Total \$ 850.00

De	T / City of
STY	lbert
	Cultivate Life

Select From List Do not "Grey" cells

Date Submitted 06/12/22

Sub-Total

2022

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)								
								_
								_
								_
								-
								_
								_
								_

<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	\$	959.15
Less: BMO MasterCard	-\$	850.00
Less: Expenses Paid	\$	-
Net to be paid to Councillor Killick	\$	109.15



Select From List Do not enter in "Grey" cells

Name: Councillor Killick

Date Submitted 06/12/22

nth November Y

2022

Authorizations & Approvals	Councillor Killick	November 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 ti The preparer's Signature	Date (DD/MMYY)	
Council Member  Council Members  Council Member	f 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  Date (DD/MMYY)	
Accounts Payable  I have reviewed this claim for mathematical accuracy and documentation support.  Danielle Parsons  Danielle Parsons (Dec 7, 2022 10.49 MST)  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 provide	ed are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement	
Anne Victor (Dec 7, 3927 10/54 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 provid  William Fletcher (Dec 7, 2022 10:58 MST)  City Manager Signature	led are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement  Date (DD/MMYYY)	
		1

P:\Mayor's Office\Expenses - F00\2022\11 - November\Killick\[Clir Killick Council Expense Claim Form - MASTER Revised November 2021.xlsm]Claim Form



Select From List Do not enter in "Grey" cells

Name: Councillor Killick

Date Submitted 04/01/23

Month December Ye

2022

General Council I	I Council Related Business  In-Region Mileage Claim base			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	1226	1221	1222	1222		ACCT	CAT 2 Cost Ctr Project	t CAT4
																	_	1		
																		1		
										_								1		
										_							_			
										_							_			
																	_			
										_							_			
										_										
										_							_			
										_										

Sub-Total \$ -

Professional De	velopment	In-Region Mileage Cl	aim based on Chart	Mileage Claim (From Chart)	Out-of-Region Mileag	e Claim (or In-Region, mileage)		Mileage Claim- Specific		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		CAT 2 ACCT Cost Ctr Project CAT4
									_							-	
									-							-	
									-							-	

Sub-Total \$ -



Select From List Do not enter in "Grey" cells

2022

Name:

Councillor Killick	Date Submitted	04/01/23	Monti

AUMA or FCM Co	M Convention or Board Expenses  Jn-Region Mileage (			One Way /Return	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 C	oding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224	1	ACCT	Cost Ctr	CAT 2 Project CAT4	
																		1			
										-							-	1			
										-							-				
										_							_				
																	_				

Sub-Total

Office of the Ma	uyor (Official Events & Duties) In-Region Mileage Claim based on		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	
																1			
								-							-	1			
								-							-	1			
								-							-				

\$ -Sub-Total



Select From List Do not enter in "Grey" cells

Name:

Councillor Killick

Date Submitted

Month

04/01/23

December

2022

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 Cost	CAT 2 Ctr Project		Expense Type
	2 Mobile Device - Telus		48.56	6404 1010			Mobile Device Charg
19/12/22	2 Home Internet - Telus		66.15	1010	516114	N/A	Mobile Device Charg

Sub-Total

\$ 114.71

BMO MasterCard		Other Transportation & Parking *	Accommodations *	Airfare*	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
21/12/22	Chamber Luncheon Registration				45.00		45.00
							_
							_
							_
							_
							_
							_
							_
							_

Sub-Total

\$ 45.00





Name:	Councillor Killick	Date S	Submitted	04/01/23	N	lonth	December	Year	2022	

Expenses Paid Di	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
							_
							_
							_
							_
							_
							_
							_

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	\$	159.71
Less: BMO MasterCard	-\$	45.00
Less: Expenses Paid	\$	-
Net to be paid to: Councillor Killick	\$	114.71

Sub-Total





Name: Councillor Killick

04/01/23 Date Submitted

Month

2022

Authorizations & Approvals	Councillor Killick	December 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	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 claim even if the for	m					
### ### ### ### ### ### ### ### ### ##							
Council Member's Signature	Date (DD/MM/YY)						
Accounts Payable		-					
I have reviewed this claim for mathematical accuracy and documentation support.							
Danielle Parsons (Jan 5, 2023 15:12 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							
Anne Victoor (Jan 5, 2023 20:15 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 prov	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement						
William Fletcher (Jan 5, 2023 20:21 MST)							
City Manager Signature	Date (DD/MM/YY)						
L							