

SUMMARY OF EXPENDITURES - CHIEF ADMINISTRATIVE OFFICER

| 06/ | Cultivate Life | | | | APR - JUN 202 | 3 | | | - | | |
|--------------------|---|-----------------------------|--|------------------|-------------------|------------------|--------|-----------|-------------------------------|---------|-------------|
| Name: Willi | am Fletcher, Chief Administrative Officer | | | | | | | | | | |
| Date (s) | Activity Description (* indicates receipts required) | Personal Mileage (km) | Mileage amount @0.515/km (Calculated Cell) | Transport | Accommodation * | Transportation * | Meals* | Per Diems | Registration/ Event Ticket | Misc. | TOTAL |
| EXPENSE R | EIMBURSEMENT | | | | | | | | | | |
| 03-Apr-23 | AB Municipalities Parking (2 days) | | | \$30.00 | | | | | | | \$ 30.00 |
| 18-Apr-23 | Corporate Challenge Pep Rally Lunch Tickets x 2 | | | | | | | | \$ 23.10 | | \$ 23.10 |
| 30-May-23 | FCM Conference Hotel | | | | \$ 1,153.51 | | | | | | \$ 1,153.51 |
| 01-Jun-23 | Rental Car Fuel - CAMA Conference | | | \$ 63.98 | | | | | | | \$ 63.98 |
| 01-Jun-23 | Car Rental - CAMA Conference | | | \$ 451.53 | | | | | | | \$ 451.23 |
| 05-Jun-23 | Airport Parking FCM/ CAMA Conference | | | \$ 175.00 | | | | | | | \$ 175.00 |
| 05-Jun-23 | CAMA Conference Hotel | | | | \$ 442.99 | | | | | | \$ 442.99 |
| 08-Jun-23 | Airport Hotel CAMA Conference | | | | \$ 275.00 | | | | | | \$ 275.00 |
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| | | | | | | | | | | Total | \$ 2,614.81 |
| Corporate M | lemberships | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | <u> </u> |
| | | | | | | | | | | Total | \$ - |
| Final Accounting: | | | | | | | | | | | |
| Item: | | | | Details & Notes: | | | | | | | Tota |
| Total Expenditures | | | | | | | | | | | |
| | | | | | | | | | TOTAL E | XPENDED | \$ 2,614.81 |
| Authorizatio | ons | | | | | | | | | | |
| I understand the | ed expenditures were incurred while conducting business on behalf of the City of St. nat submitting a fraudulent claim is a very serious matter. All applicable receipts have | Albert. ve been attached | - | | 17-Jul-23 Date | | | | | | |
| | d this claim and am satisfied that all of the expenses listed related to City of St. Albe | rt activities and re | epresent reasonable | e costs. | | | | | | | |