

Select From List Do not enter in "Grey" cells

Name:

Councillor Hughes

Date Submitted

Month

03/02/23

Year

2023

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E (DD/MM/YY) Nature of Event/Meeting From To From To CAT_ 1220 1220 1225 1226 1221 1222 ACCT Cost Cir Project CAT4
30/01/23 Strategic Planning St. Albert Edmonton-West Return 40.00 20.20 6140 1010 516106 6140 516106 6140 516106 6140 516106 6140 516106 6140 516106 6140 516106 6140 516106 6140 516106 6140 516106 6140 516106 6140 516106 516106 6140 516106 516106 516106 516106 516106 516106 516106 516106 516106
31/01/23 Strategic Planning St. Albert Edmonton-West Return 40.00 20.20 6140 1010 516106
31/01/23 Strategic Planning St. Albert Edmonton-West Return 40.00 20.20 20.20 20.20 20.20 6140 1010 516106

Sub-Total \$ 40.40

Professional Dev	elopment	In-Region Mileage C	laim based on Chart	One Way	Out-of-Region Mileag		One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*			General Expenses *	Total	GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1221	1221	I 1222	1226	1227	1225	i 1224	1	ACCT Cost Ctr Project CAT4
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\$ -

1 of 5



Select From List Do not enter in "Grey" cells

Name:	
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Councillor Hughes

Date Submitted

03/02/23

Month January

2023

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*			General Expenses *	Total		GL Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221			1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project	
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Sub-Total \$ -

Office of the Ma	yor (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	One 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*			General Expenses *	Total		GL Coo	ing	
Date (DD/MM/Y	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222	!	ACCT	Cost Ctr CA	3 CAT4	
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Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name:	Councillor Hughes

Date Submitted 03/02/23 Month January Year 2023

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 C	CAT 2 st Ctr Project	CAT7	Expense Type	
03/01/23	3 Home Internet (Shaw)		70.00	6404 10	10 516106	N/A	Mobile Device	Charge
13/01/23	3 Mobile Device (Virgin Mobile)		55.00	10	10 516106	N/A	Mobile Device	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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ub-Total	\$ -

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lame:	Councillor Hughes

Date Submitted 03/02/23

Expenses Paid Di	rectly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
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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	s	165.40
Less: BMO MasterCard	\$	-
Less: Expenses Paid	\$	-
Net to be paid to: Councillor Hughes	\$	165.40
	_	

Sub-Total



Select From List Do not enter in "Grey" cells

2023

03/02/23

Date Submitted

Name: Councillor Hughes

January 2023 Authorizations & Approvals Councillor Hughes 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. Attended Preparer's Signature Date (DD/MM/YY) Council Member l 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 as completed by another individual. All applicable receipts have been attached. Sheena Hughes Council Member's Signature Date (DD/MM/YY) Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support. **Laurellin** a Lavallee (Feb 3, 2023 13:03 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 Brenda Barclay 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\X-2024\1 - January\Biermanski\Clir Biermanski Council Expense Claim Form - MASTER Revised November 2021.xlsm)Claim Form



Select From List Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted 03/03/23 Month February Year 2023

	elated Business	In-Region Mileage Cla		Way	Mileage Claim km's (From Chart)	Out-of-Region Mileage	e Claim (or In-Region, mileage)	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 Coding
Date (DD/MM/YY) N	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		CAT 2 ACCT Cost Ctr Project CAT4
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Sub-Total \$ -

Professional Deve	·	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 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	CAT 2 Project CAT4
	The Linux Command Line Bootcamp: Beginner to Powe User														17.99		17.99	6100	1010	516106 A5 Career Developmen
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Sub-Total \$ 17.99



Select From List

Do not
enter in
"Grey" cells

Name: Councillor Hughes

Date Submitted

Month Fe

03/03/23

Year

2023

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cla	aim based on Chart			e Claim (or In-Region,	One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Codin	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	CA* Cost Ctr Proj	T 2 ect CAT4
									-							-			
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Sub-Total \$

Office of the May	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 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 C	AT4
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Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name: Cour

Councillor Hughes

Date Submitted

Month

03/03/23

ebruary Year

2023

Operating Suppli	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 Co	CAT 2 st Ctr Project (Expense Type	
13/02/23	Mobile Device - Virgin Mobile		55.00	6404 10	0 516106	N/A	Mobile Device Ch	arge
03/02/23	Home Internet - Shaw		70.00	10	0 516106	N/A	Mobile Device Ch	arge

Sub-Total

\$ 125.00

BMO MasterCard I		Other Transportation & Parking *	Accommodations *	Airfare*	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
09/02/23	Business@Lunch Registration				45.00		45.00
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Sub-Total

\$ 45.00





Councillor Hughes 03/03/23 Name: Date Submitted

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)								
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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	\$	187.99
Less: BMO MasterCard	-\$	45.00
Less: Expenses Paid	\$	-
Net to be paid to: Councillor Hughes	\$	142.99

Sub-Total



Name:

Councillor Hughes

Council Member Monthly Expense Claim Form

Select From List Do not enter in "Grey" cells

Date Submitted

03/03/23

Month February

2023

Authorizations & Approvals		Councillor Hughes	February	2023
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.			
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 cl	aim even if the form		
Sheena Hughes Sheena Hughes (Mar 8.023 10:53 MST)				
Sneena Hugnes (Mar 8, 2025 1025 MS1) Council Member's Signature	Date (DD/MMYY)			
-				
Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support.				
Lynda Lavalloe				
Accounts Payable Personnel Signature	Date (DD/MMYY)			
Director - Financial & Strategic Services				
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation prov	ided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
Anne Victor Mar 8, 2023 11:16 MST)				
Director - Financial & Strategic Services Signature	Date (DD/MMYY)			
Chief Administrative Officer (City Manager)				
	ided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
William Fletcher (Mar 8, 2023 11:35 MST)				
City Manager Signature	Date (DD/MM/YY)			



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Name:	Councillo
ivaille.	Councille

llor Hughes

12/04/23 Date Submitted

March Month Year 2023

					Mileane				Mileage											
				One	Mileage Claim km's				Claim	Mileage	Other				Registration					
eneral Council Related I	Business			One Way	(From	Out-of-Region Milean	e Claim (or In-Region	One Way	km's-	Amount @	Transportation				Registration /Event Ticket	General				
		In-Region Mileage Cla	aim based on Chart	/Return	Chart)	Out-of-Region Mileag specific	mileage)	/Return	Specific	0.505/km	& Parking *	Accommodations *	Airfare*	Meals *	*	Expenses *	Total		GL Codin	ıa
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ate (DD/MM/YY) Nature	of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr Proj	ect CAT4
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Sub-Total

Professional Dev	·	In-Region Mileage C	aim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileac		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	ļ	ACCT	CAT 2 Cost Ctr Project CAT4
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Select From List Do not enter in "Grey" cells

Name:

Councillor Hughes

Date Submitted 12/04/23

Month March Year

2023

AUMA or FCM Co	onvention or Board Expenses	In-Region Mileage Cl		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 Codin	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		122	1 1221	1222	1226	1227	1225	1224	1	ACCT	CA Cost Ctr Proj	
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Sub-Total \$ -

Office of the Ma	yor (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*		Registration /Event Ticket	General Expenses *	Total		GL Cod	ng
Date (DD/MM/Y	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222	!	ACCT	Cost Ctr CAT	3 CAT4
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Sub-Total \$ -

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Select From List

Do not enter in
"Grey" cells

lame:	Councillor Hughes

Date Submitted 12/04/23 Month March Year 2023

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 Ctr	CAT 2 Project CAT	7 Type	nse
03/03/23	3 Home Internet - Shaw		70.00		6404 1010	516106	I/A Mob	ile Device Charge
13/03/23	Mobile Device - Virgin Mobile		55.00		1010	516106 N	I/A Mob	ile Device Charge

Sub-Total \$ 125.00

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

St	Albert Cultivate Life	Council Member Monthly Expense Claim Form		Do ent	m List	
Name:	Councillor Hughes	Date Submitted 12/04/23	Month	March Yea	ar 2023	3
Expenses Paid D	Directly by the City (eg. Petty Cash)	Other Transportation & Parking * Accommodations * Airfa	are* Meals *	Registration /Event Ticket Ger * Exp	neral penses * Total	
Date (DD/MM/YY))					+
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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.
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- 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 Less: BMO MasterCard Less: Expenses Paid	\$ \$	125.00
Net to be paid to: Councillor Hughes	\$	125.00

Sub-Total



Date Submitted

Select From List Do not "Grey" cells

Month

2023

Councillor Hughes Name:

12/04/23 2023 March Authorizations & Approvals Councillor Hughes 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. Attended

Member	

Preparer's Signature

l 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

Date (DD/MM/YY)

Nes completed by another individual. All applicable receipts have been attached.

Neena Hughes
Sheena Hughes (Apr 12, 2023 19:12 MDT)

Council Member's Signature Date (DD/MM/YY)

Accounts Payable

I have reviewed this claim for mathematical accuracy and documentation support.

Lynda Lavallee

Date (DD/MM/YY) Accounts Payable Personnel Signature

Director - Financial & Strategic Services

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

a vie

Director - Financial & Strategic Services Signature Date (DD/MM/YY)

Chief Administrative Officer (City Manager)

requirement this plains 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

lliam Fletcher (Apr 13, 2023 08:57 MDT)

Date (DD/MM/YY) City Manager Signature

P:\Mayor's Office\Expenses - F00\2023\3 - March\Hughes\[Clir Hughes Council Expense Claim Form - MASTER Revised February 2023.xlsm]Claim Form