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enter in
"Grey" cells

Name: Councillor Killick

Date Submitted

Month

03/02/23

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2023

					I				T												
					Mileage				Mileage												
General Council I	Related Business			One	Claim km's	0.1.4.0	01-1 ( I- B1		Claim	Mileage	Other				Registration /Event						
		In-Region Mileage CI		Way	(From Chart)	Out-of-Region Mileag specific	e Claim (or in-Region,	One way	Km's-	Amount @	Transportation & Parking *	Accommodations *			Ticket *	General Expenses *	T		01	0 - 1	
	I	in-Region Mileage Ci	aim based on Chart	/Return	Chart)	specific	mileage)	/Return	Specific	U.5U5/KM	& Parking -	Accommodations "	Almare-	ivieais -	licket "	Expenses -	Total		GL	Coding CAT 2	
Data (DD/MM/VV)	Nature of Event/Meeting	From	То			From	То	CAT7		1220	1220	1225	1226	1221	1222	1222		ACCT	C+ C+-	Project CAT4	4
Date (DD/WWW 11)	reacure or Everionic carrig	110111	10		1	110111	10	OATT_		1220	1220	1220	1 1220	1221	1222	1222		ACCI	Cost Cu	1 TOJECT OAT4	
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30/01/23	Strategic Planning	St. Albert	Edmonton-West	Return	40.00					20.20			1				20.20	6140	1010	516114	
31/01/23	Strategic Planning	St. Albert	Edmonton-West	Return	40.00					20.20							20.20	6140	1010	516114	
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Sub-Total \$ 40.40

Professional Dev	relopment	In-Region Mileage Cl	aim based on Chart	One Way	Out-of-Region Mileage		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	1222	1226	1227	1225	1224	1	ACCT Cost Ctr Project CAT4
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ıb-Total

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1 of 5



Select From List Do not enter in "Grey" cells

Year

Name:

Councillor Killick

Date Submitted

Month Janua

03/02/23

2023

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl	aim based on Chart	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*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Co		
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr F	AT 2 roject 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	Mileage Claim (From Chart)	Out-of-Region Mileage specific	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 Codi	ng
Date (DD/MM/YY)	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 \$ -



Select From List Do not enter in "Grey" cells

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	Cost Ctr	CAT 2 Project CAT	Exper 7 Type	ise
13/01/23	3 Mobile Device (Telus)		43.00		6404 1010	516114 N	I/A Mobile	e Device Charge
19/01/23	3 Home Internet (Telus)		66.15		1010	516114 N	I/A Mobile	e Device Charge

Sub-Total \$ 109.15

BMO MasterCard	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
19/01/23	Chamber Luncheon Registration					45.00		45.00
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Sub-Total \$ 45.00

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Select From List Do not "Grey" cells

	Name:	Councillor Killick	Date Submitted	03/02/2
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Expenses Paid Di	ectly 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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<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

0		194.55
Grand Total Expenses	>	194.55
Less: BMO MasterCard	-\$	45.00
Less: Expenses Paid	\$	-
Net to be paid to Councillor Killick	\$	149.55

Sub-Total



Chief Administrative Officer (City Manager)

City Manager Signature

### Council Member Monthly Expense Claim Form



2023

03/02/23

Date Submitted

Name: Councillor Killick

Councillor Killick January 2023 Authorizations & Approvals 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. Atrankle 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. Council Member's Signature Date (DD/MM/YY) I have reviewed this claim for mathematical accuracy and documentation support.

Danieue Parsons 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 Q-Vie-Chief Financial Officer Signature Date (DD/MM/YY)

P:\Mayor's Office\Expenses - F00\2023\1 - January\Killick\[Clir Killick Council Expense Claim Form - MASTER Revised November 2021.xlsm]Claim Form

e 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)



Select From List Do not enter in "Grey" cells

Name: Councillor Killick

Date Submitted 03/03/23 Month February Year 2023

General Council I	Related Business	In-Region Mileage Cla	aim based on Chart	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 Codii	ng	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	5 1226	1221	1222	1222	2	ACCT	Cost Ctr Pro	T 2 ject CAT4	
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Professional Development

One Mileage
Way Claim (From Unt-Region Mileage Claim based on Chart | Return | Return | Return | Specific mileage) | Return | Specific mileage | Registration | Return | Return

Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name:

Councillor Killick

Date Submitted

Month

03/03/23

2023

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl:				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 Cod	ling	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr Pr	AT 2 oject CAT4	
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Sub-Total

Office of the May	or (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	Way	Out-of-Region Mileag	ue Claim (or In-Region. mileage)	One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Coo	ling	
Date (DD/MM/YY)	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



Select From List Do not enter in "Grey" cells

Name:

Councillor Killick

Date Submitted

Month

03/03/23

oruary Year

2023

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 CAT	Expense 7 Type	e
13/02/2	3 Mobile Device - Telus		43.00	6404 1010	516114 N	/A Mobile D	Device Charge
19/02/2	3 Home Internet - Telus		66.15	1010	516114 N	/A Mobile E	Device Charge

Sub-Total

\$ 109.15

BMO MasterCard	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
09/02/23	Business Breakfast Registration					32.11		32.11
09/02/23	Business@Lunch Registration					45.00		45.00
21/02/23	Breakfast w/Min. Toews Registration					30.01		30.01
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Sub-Total

\$ 107.12



Select From List Do not enter in

	Name:	Councillor Killick	Date Submitted	03/03/23	Month	February	Year	2023	
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Expenses Paid Dir	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 Less: BMO MasterCard 107.12 Less: Expenses Paid \$ 109.15 Net to be paid to: Councillor Killick

Sub-Total



Date Submitted

03/03/23

Select From List Do not enter in "Grey" cells

2023

Name: Councillor Killick

City Manager Signature

Councillor Killick 2023 Authorizations & Approvals February 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. Attended Date (DD/MM/YY) Preparer's Signature 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. MARKER Council Member's Signature Date (DD/MM/YY) Accounts Payable have reviewed this claim for mathematical accuracy and documentation support. Danielle Parsons Accounts Payable Personnel Signature Date (DD/MM/YY) Director - Financial & Strategic Services 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 ne Victoor (Mar 7, 2023 10:08 MST) Director - Financial & Strategic Services Signature Date (DD/MM/YY) Chief Administrative Officer (City Manager) e radioved this plain 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)

P:\Mayor's Office\Expenses - F00\2023\2 - February\Killick\[Clir Killick Council Expense Claim Form - MASTER Revised February 2023.xlsm]Claim Form



Select From List Do not enter in "Grey" cells

lame:	Councillor Killick

Date Submitted 04-04-23 Month March Year 2023

					Mileage				Mileage												
General Council F	Related Business				Claim km's				Claim		Other				Registration						
Gonoral Goallon I	tolatou Buomooo			One Way	(From			One Way	km's-	Amount @	Transportation	l			/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	
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	
02-03-23	Edmonton Salutes MFRC Sponsor Night					St. Albert	Edmonton Garrison	Return	26.80	13.53							13.53	6140	1010	516114	
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06-03-23	Chamber Breakfast w/Min. Toews					St. Albert	Sturgeon Valley Golf Course	Return	11.80	5.96							5 96	6140	1010	516114	
00 00 20	Original Distriction William Toolia			1		Ot. 7 abort		rtotum	11.00	0.00							0.00	10170	1010	310114	
00 02 22	Business@Lunch					St. Albert	Sturgeon Valley Golf Course	Detum	11.80	5.96							5.00	6140	1010	516114	
00-03-23	Business@Lunch					St. Albert	Sturgeon Valley Golf Course	Return	11.00	5.90				-		-	5.96	6140	1010	516114	
			Edmonton-																		
16-03-23	UDI Luncheon	St. Albert	Downtown	Return	30.00					15.15							15.15	6140	1010	516114	
24-03-23	Edmonton Salutes Business Lunch					St. Albert	Edmonton Garrison	Return	26.80	13.53							13.53	6140	1010	516114	
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Sub-Total \$ 54.14

Professional Dev	velopment	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	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 CAT4
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Select From List Do not enter in "Grey" cells

Name:

Councillor Killick

2023 04-04-23

AUMA or FO	M Convention or Board Expenses	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		Other Transportation & Parking *	Accommodations *	Airfare*		or Course Registration /Event Ticket	General Expenses *	Total		GL Coding	
Date (DD/MI	/YY) Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1 1222	1226	1227	1225	5 1224	1	ACCT	CAT:	
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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 Milea	ge Claim (or In-Region, c mileage)	One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket *	General Expenses *	Total	Ó	GL Coding	
Date (DD/MM/YY	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT Cost C	tr CAT3 CAT4	
										_										
																	-			

Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name: Councillor Killick

Date Submitted 04-04-23 Month March Year 2023

Operating Supplies/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)  To		Total	GL Coding				
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project CAT	Expens 7 Type	se
13-03-23	Mobile Device - Telus	43.00		6404 1010	516114 N	/A Mobile	Device Charge
19-03-23	Home Internet - Telus	69.30		1010	516114 N	/A Mobile	Device Charge
08-02-23	Office supplies	15.75		6502 1010	516114 N	/A Office/	Operating Supp

Sub-Total \$ 128.05

BMO MasterCard	BMO MasterCard Expenses		Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)								
01-03-23	UDI Luncheon Registration					74.09		74.09
08-03-23	Business@Lunch Registration					65.00		65.00
20-03-23	UDI Luncheon Registration					74.09		74.09
22-03-23	Edmonton Salutes MFRC Yellow Ribbon Gala Registration					300.00		300.00
28-03-23	EOEP Land Use & Development Approvals Registration					309.75		309.75
29-03-23	Uncharitable Screening					30.50		30.50
								-

Sub-Total \$ 853.43

St	When Council Member Monthly Exp	ense Claim F	Form				Select	]	
	Cultivate Life						From List Do not	-	
							enter in "Grey" cells		
Name:	Councillor Killick	Date Submitted	04-04-23		Month	March	Year	202	!3
Expenses Paid D	rectly 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:	icy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses**	·				Sub-Total		\$ -	Ξ
Detailed receipt	must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.			C	-4-1				
	ay be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.  ge chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location			Grand T Less: E		penses sterCard			\$ 1,035.62 -\$ 853.43
	set the ventile 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 rec	eipt.		Less: E					\$ -

Net to be paid to Councillor Killick

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



Name:

Councillor Killick

# Council Member Monthly Expense Claim Form

Select From List Do not enter in "Grey" cells

Date Submitted

04-04-23

onth March

2023

Authorizations & Approvals	Councillor Killick	March 20
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  Observable Council Member at the  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 apother individual. All applicable receipts have been attached.  mike Milick (Apr 4, 2023 10:54 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 of the claim even if the form	
Council Member's Signature  Accounts Payable	Date (DD/MMYYY)	
I have reviewed this claim for mathematical accuracy and documentation support.  Danielle Parsons (Apr 4, 2023 13:29 MDT)  Danielle Parsons (Apr 4, 2023 13:29 MDT)		
Accounts Payable Personnel Signature	Date (DD/MM/YY)	
Director - Financial & Strategic Services		
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	
Anne Victoor (Apr 4, 2023 13:49 MDT)  Director - Financial & Strategic Services Signature	Date (DD/MMYY)	
		1
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	
William Fletcher (Apr 4, 2023 14:14 MDT)		
City Manager Signature	Date (DD/MMYY)	

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