



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted 15/02/2023

Month January Year 2023

General Council Related Business		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-Region-specific 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)	Nature of Event/Meeting	From	To			From	To	CAT7										ACCT	Cost Ctr	Project	CAT4
02/12/22	Meeting with Don Iveson									-	18.35						18.35	6140	1010	516112	
21/01/23	ICSC Conference	St. Albert	EIA	One Way	52.00					26.26							26.26	6140	1010	516112	
24/01/23	ICSC Conference	St. Albert	EIA	One Way	52.00					26.26	100.00			74.52			200.78	6140	1010	516112	
30/01/23	Strategic Planning	St. Albert	Edmonton-West	Return	40.00					20.20							20.20	6140	1010	516112	
										-							-				
31/01/23	Strategic Planning	St. Albert	Edmonton-West	Return	40.00					20.20							20.20	6140	1010	516112	
12/01/23	Speaking Engagement	St. Albert	Edmonton-University	Return	32.00					16.16							16.16	6140	1010	516112	
19/01/23	EMRB Committee of the Whole Meeting	St. Albert	Stony Plain	Return	74.00					37.37							37.37	6140	1010	516112	
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Council Member Monthly Expense Claim Form

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Name: Mayor Heron

Date Submitted 15/02/2023

Month January Year 2023

AUMA or FCM Convention or Board Expenses		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project	CAT4
										-							-				
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Sub-Total																	\$	-			

Office of the Mayor (Official Events & Duties)		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	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	To			From	To	CAT7		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr	CAT3	CAT4
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Sub-Total																	\$	-			



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name:

Date Submitted:

Month: Year:

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding				Expense Type
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project	CAT7	
Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)							
01/01/23	Home Internet - Shaw	70.00					
21/01/23	Mobile Device - Telus	55.00	6404	1010	516112	N/A	Mobile Device Charge
				1010	516112	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)	Description							
18/01/23	Chateau Whistler - ICSC @ Whistler		1,548.60					1,548.60
20/01/23	WestJet Baggage			42.00				42.00
24/01/23	WestJet Baggage			42.00				42.00
24/01/23	Chateau Whistler - ICSC @ Whistler		132.15					132.15
31/01/23	Golden Key Gala - Registration					400.00		400.00
								-
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Sub-Total \$ 2,164.75



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 15/02/2023 Month: January Year: 2023

Expenses Paid Directly by the City (eg. Petty Cash)		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ -

Claim Reminders:
** See Council Policy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses**

- Detailed receipts must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.
- Meter parking may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.
- A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location
- 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.
- 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)
- Expense claims must be submitted within 10 days of the following month
- Incomplete expense claims will not be processed

Grand Total Expenses	\$ 2,629.07
Less: BMO MasterCard	-\$ 2,164.75
Less: Expenses Paid	\$ -
Net to be paid to Mayor Heron	\$ 464.32



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted 15/02/2023

Month January Year 2023

Authorizations & Approvals

Mayor Heron

January

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.

[Signature]
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 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.

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

Accounts Payable

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

[Signature]
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

[Signature]
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 provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement

[Signature]
City Manager Signature Date (DD/MM/YY)



Council Member Monthly Expense Claim Form

Select From List
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Name: Mayor Heron

Date Submitted: 28/03/23 Month: February Year: 2023

General Council Related Business		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-Region-specific 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)	Nature of Event/Meeting	From	To			From	To	CAT7										ACCT	Cost Ctr	Project	CAT4						
09/02/23	EMRB Board Meeting	St. Albert	Edmonton-Kingsway	Return	26.00					13.13							13.13	6140	1010	516112							
13/02/23	WestLet Market Announcement & CED Oversight Committee Meeting	St. Albert	Edmonton-Downtown	Return	30.00					15.15	18.35						33.50	6140	1010	516112							
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Sub-Total																						\$	46.63				

Professional Development		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region-specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding									
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7										ACCT	Cost Ctr	Project	CAT4						
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Sub-Total																						\$	-				



Council Member Monthly Expense Claim Form

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Name: Mayor Heron

Date Submitted: 28/03/23

Month: February Year: 2023

AUMA or FCM Convention or Board Expenses		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project	CAT4
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Sub-Total \$ -

Office of the Mayor (Official Events & Duties)		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region specific mileage)		One Way /Return	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	To			From	To	CAT7		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr	CAT3	CAT4
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Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name:

Date Submitted:

Month: Year:

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)				Total	GL Coding				
Date (DD/MM/YY)	Detailed Description	ACCT	Cost Ctr	CAT 2 Project	CAT7	Expense Type					
01/02/23	Home Internet - Shaw					70.00	6404	1010	516112	N/A	Mobile Device Charge
21/02/23	Mobile Device - Telus					55.00		1010	516112	N/A	Mobile Device Charge

Sub-Total \$ 125.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
02/02/23	Golden Key Gala Registration Refund					- 400.00		- 400.00
07/02/23	ESAB Appreciation Event						262.67	262.67
16/02/23	Jump Into Juno Week Registration					31.50		31.50
								-
								-
								-
								-
								-

Sub-Total -\$ 105.83



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 28/03/23 Month: February Year: 2023

Expenses Paid Directly 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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								-
								-
								-

Sub-Total \$ -

- Claim Reminders:**
**** See Council Policy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses****
- Detailed receipts must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.
 - Meter parking may be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.
 - A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location
 - 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.
 - 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)
 - Expense claims must be submitted within 10 days of the following month
 - Incomplete expense claims will not be processed

Grand Total Expenses	\$ 65.80
Less: BMO MasterCard	\$ 105.83
Less: Expenses Paid	\$ -
Net to be paid to Mayor Heron	\$ 171.63



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Date Submitted: Month: Year: **Authorizations & Approvals**

Mayor Heron

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.

[Signature] _____ Date (DD/MM/YY) _____
 Preparer's Signature

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.

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

Accounts Payable

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

[Signature] _____ 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

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

Chief Administrative Officer (City Manager)

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

[Signature] _____ Date (DD/MM/YY) _____
 City Manager Signature



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 03/04/23 Month: March Year: 2023

General Council Related Business		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-Region... specific 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)	Nature of Event/Meeting	From	To			From	To	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr	CAT 2 Project	CAT4
01/03/23	Meeting with Minister Nixon & Minister Nally	St. Albert	Edmonton-Downtown	Return	30.00					15.15							15.15	6140	1010	516112	
10/03/23	Meeting with Mayor Daneluik	St. Albert	Beaumont	Return	98.00					49.49							49.49	6140	1010	516112	
13/03/23	Juno Awards	St. Albert	Edmonton-Downtown	Return	30.00					15.15	21.40						36.55	6140	1010	516112	
16/03/23	EMRB Committee of the Whole Meeting	St. Albert	EIA	One Way	52.00					26.26							26.26	6140	1010	516112	
										-							-				
16/03/23	Spruce Grove, Stony Plain, Parkland County State of the Region Address	Edmonton-South	Edmonton-West	One Way	23.00					11.62							11.62	6140	1010	516112	
16/03/23	Spruce Grove, Stony Plain, Parkland County State of the Region Address	Edmonton-West	St. Albert	One Way	20.00					10.10							10.10	6140	1010	516112	
18/03/23	CHBA Awards of Excellence	St. Albert	Edmonton-Downtown	Return	30.00					15.15							15.15	6140	1010	516112	
22/03/23	MCMC Mayor's and CAO's Caucus					Edmonton Convention Centre	Days Inn Cochrane	One Way	309.00	156.05							156.05	6140	1010	516112	
24/03/23	MCMC Mayor's and CAO's Caucus					Days Inn Cochrane	48 Otter Crescent, St. Albert	One Way	334.00	168.67							168.67	6140	1010	516112	
27/03/23	EPS Regimental Funeral	St. Albert	Edmonton-Downtown	Return	30.00					15.15	25.32						40.47	6140	1010	516112	
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										-							-				

Sub-Total \$ 529.50

Professional Development		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region... specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project	CAT4
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Sub-Total \$ -



Council Member Monthly Expense Claim Form

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Name: Mayor Heron

Date Submitted 03/04/23 Month March Year 2023

AUMA or FCM Convention or Board Expenses		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region-specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1221	1221	1222	1226	1227	1225	1224			ACCT	Cost Ctr	Project CAT4
										-							-				
										-							-				
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Sub-Total \$ -

Office of the Mayor (Official Events & Duties)		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region-specific mileage)		One Way /Return	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	To			From	To	CAT7_		1220	1220	1225	1226	1221	1222	1222			ACCT	Cost Ctr	CAT3	CAT4
										-							-					
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										-							-					

Sub-Total \$ -



Council Member Monthly Expense Claim Form

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Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 03/04/23 Month: March Year: 2023

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding				Expense Type
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project	CAT7	
	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)						
01/03/23	Home Internet - Shaw	70.00	6502	1010	516112	N/A	Office/Operating Supp
21/03/23	Mobile Device - Telus	55.00		1010	516112	N/A	Office/Operating Supp

Sub-Total \$ 125.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
06/03/23	State of the Region Registration					120.75		120.75
20/03/23	UDI Luncheon Registration					74.09		74.09
24/03/23	MCMC		272.72					272.72
27/03/23	Mayor Sohi State of the City Registration					103.95		103.95
								-
								-
								-
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								-

Sub-Total \$ 571.51



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 03/04/23 Month: March Year: 2023

Expenses Paid Directly 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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Sub-Total \$ -

- 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	\$ 1,226.01
Less: BMO MasterCard	-\$ 571.51
Less: Expenses Paid	\$ -
Net to be paid to Mayor Heron	\$ 654.50




Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Date Submitted: Month: Year:

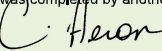
Authorizations & Approvals Mayor Heron March 2023

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 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.




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

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




 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 provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement



 Director - Financial & Strategic Services 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 provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement



 City Manager Signature Date (DD/MM/YY)