

Select From List Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 05/10/23 Month July Year

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General Council F	Related Business	In-Region Mileage Cl		Way	Mileage Claim km's (From Chart)	Out-of-Region Mil Region, spec	leage Claim (or In- cific mileage)	One Way /Return	Mileage Claim km's- Specific	Mileage Amount @ 0.62/km	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Meals *	Registratio n /Event Ticket *	General Expenses *	Total		GL	. Coding CAT 2	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1227	1221	1222	1222	2	ACCT C	Cost Ctr F	CAT2 Project CAT	4
05/07/23	Youth Advisory Committee									_				100,00				100.00	6140 1	1010 5°	16108	
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Sub-Total \$ 100.00

2023

Professional Dev	elopment	In-Region Mileage C		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mil Region, spec	eage Claim (or In- ific mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0,505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*			General Expenses *	Total		GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1216	1227	1225	122	ļ	ACCT Cost Ct	CAT 2 r Project CAT4
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Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 05/10/23 Month July Year 2023

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl		Way	Mileage Claim (From Chart)	Out-of-Region Mil Region, spec	eage Claim (or In- ific mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Meals *		General Expenses *	Total		GL Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From		CAT7_		1221						7 1225	i 1224	ļ	ACCT Cost Ct	CAT 2 r Project CAT	Γ4
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Sub-Total \$ -

Office of the May	yor (Official Events & Duties)	In-Region Mileage C		Way	Mi <b>l</b> eage Claim (From Chart)	Out-of-Region Mil Region, spec	eage Claim (or In- cific mileage)	One Way /Return	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*			General Expenses *	Total	GL Coding	
Date (DD/MM/YY)	) Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1227	1221	1222	1222		ACCT Cost Ctr CAT3 CA	AT4
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Sub-Total \$ -



Select From List
Do not enter in "Grey" cells

Name:	Councillor Joly

Date Submitted 05/10/23 Month July 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 CA	Expense 7 Type
17/07/23	3 Home Internet - Telus		70.00	6404 1010	516108	I/A Mobile Dev
27/07/23	3 Mobile Device - Telus		55.00	1010	516108	I/A Mobile Dev

Sub-Total \$ 125.00

BMO MasterCard Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Registratio n /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)							
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Select From List Do not enter in "Grey" cells

Name:	Councillor Joly	Date Submitted	05/10/2	3 Month	July	Year	2023
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Expenses Paid Di	rectly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*		Registratio n /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. 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)

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. Expense claims must be submitted within 10 days of the following month

6. Incomplete expense claims will not be processed

7. Per Diems (claim for attendance at specified events per C-3C-03) are taxable and paid at a rate of \$100 for less than or equal to 4 hours, or \$200 for greater than 4 hours, 8. Meals claimed without receipts for travel outside of the Capital region follow the rates and conditions outlined in the Council Policy C-CC-03 Council Remuneration and Expense Reimbursement

•	225.00
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\$	-
\$	225.00
	\$ \$

Sub-Total

\$ -



Date Submitted



05/10/23

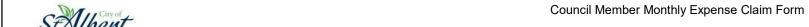
Name:

City Manager Signature

Councillor Joly

Authorizations & Approvals		Councillor Joly	July	2023
Preparer f 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 t	ime of submission.			
OS Swatte	Oct 10, 2023			
Preparer's Signature	Date (DD/MM/YY)			
Council Member			 	
certify that the expenditures claimed on this form were incurred while conducting business on behalf of the City of	f St. Albert. I understand that submitting a fraudulent daim is a very serious matter. I understand that I am solely responsible for the de	stails of the claim even if the form		
was completed by another individual. All applicable receipts have been attached. Natalie Joly	Oct 10, 2023			
latalie Joly (Oct 10, 2023 11:06 MDT)				
Council Member's Signature	Date (DD/MM/YY)			
Accounts Payable have reviewed this claim for mathematical accuracy and documentation support.				
have reviewed this claim for mathematical accuracy and documentation support.  Yukiko Shuonoya  Yukiko Shionoya (Oct 11, 2023 03:47 MDT)	Oct 11, 2023			
Accounts Payable Personnel Signature	Date (DD/MM/YY)			
			I	
Director - Financial & Strategic Services				
have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided by the companion of the comp	led are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
Anne Victoor (Oct 11, 2023 12:32 MDT)	Oct 11, 2023			
Director - Financial & Strategic Services Signature	Date (DD/MM/YY)			
			•	
Chief Administrative Officer (City Manager)				
have reviewed this claim and am satisfied that the expenses listed and the information and documentation provid	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
WHE C	Oct 11, 2023			

Date (DD/MM/YY)



Select From List Do not enter in "Grey" cells

Name:

Councillor Joly

Date Submitted

Month

05/10/23

August Year

2023

eneral Council F	Related Business	In-Region Mileage	Claim based on Chart	One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mi	eage Claim (or In- cific mileage)	One Way /Return	Mileage Claim I km's- Specific	Mileage Amount @ 0.62/km	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Meals *	Registratio n /Event Ticket *	General Expenses *	Total		GL Coding	g
ate (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1227	1221	1222	1222		ACCT Cost	CAT 2 Ctr Project (	
02/08/23	Youth Advisory Committee									-				100.00				100.00	6140 1010	516108	
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Professional Development	In-Region Mileage C	aim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mil Region, spe	eage Claim (or In-	One Way	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*		Conference or Course Registratio n /Event Ticket *	General Expenses *	Total		GL Coding
Date (DD/MM/YY) Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1216	1227	1225	5 1224		ACCT Cost (	CAT 2 Ctr Project CAT4
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Select From List Do not enter in "Grey" cells

Year

Name:

Councillor Joly

Date Submitted

05/10/23

August

Month

2023

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl		Way	Out-of-Region Mill Region, spec	eage Claim (or In- cific mileage)	One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*		General Expenses *	Total		GL Coo	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From		CAT7_		1221					1225	1224		ACCT C	CAT Cost Ctr Proje	ct CAT4
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Sub-Total \$

Office of the I	Mayor (Official Events & Duties)	In-Region Mileage C		Way	Out-of-Region Mill Region, spec	eage Claim (or In- cific mileage)	One Way	Mileage Claim- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare* I	Per Diems*			General Expenses *	Total	GL Codi	ing
Date (DD/MM/	YY) Nature of Event/Meeting	From	То		From	То	CAT7_		1220	1220	1225	1226	1227	1221	1222	1222	2	ACCT Cost Ctr CAT3	CAT4
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Sub-Total \$ -

2 of 5



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enter in
"Grey" cells

Name:

Councillor Joly

Date Submitted

05/10/23

Month August

August Year

2023

Total			
	ACCT Cost Ctr		Expense 7 Type
70.00	6404 1010	516108 N	/A Mobile De
55.00	1010	516108 N	/A Mobile De
	70.00	ACCT Cost Ctr 70.00 6404 1010	ACCT Cost Ctr Project CAT 2  70.00 6404 1010 516108 N

Sub-Total \$ 125.00

BMO MasterCard Expe	enses	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Registratio n /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)						_		
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Sub-Total

3 of 5

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Select From List Do not enter in "Grey" cells

Name:

Councillor Joly

05/10/23 2023 Date Submitted Month August

Expenses Paid Di	ectly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Registratio n /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. 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)
- 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. Expense claims must be submitted within 10 days of the following month
- 6. Incomplete expense claims will not be processed
- 7. Per Diems (claim for attendance at specified events per C-CC-03) are taxable and paid at a rate of \$100 for less than or equal to 4 hours, or \$200 for greater than 4 hours.
- 8. Meals claimed without receipts for travel outside of the Capital region follow the rates and conditions outlined in the Council Policy C-CC-03 Council Remuneration and Expense Reimbursement

Grand Total Expenses 225.00 Less: BMO MasterCard Less: Expenses Paid 225.00 Net to be paid to: Councillor Joly



Date Submitted



2023

05/10/23

Name: Councillor Joly

Councillor Joly 2023 Authorizations & Approvals August Preparer
If claim form was prepared by an individual other than the Council Member, sign and date below
This expense daim form was prepared in accordance with all information provided by the Council Member at the time of submission. AttendAD Oct 5, 2023 Preparer's Signature Date (DD/MM/YY) 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.

Nataule Joly

Natalie Joly (Oct 5, 2023 14:03 MDT) Oct 5, 2023 Council Member's Signature Date (DD/MM/YY) have reviewed this claim for mathematical accuracy and documentation support.
Yukiko Shionoya Oct 6, 2023 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 Oct 6, 2023 Anne Victoor (Oct 6, 2023 09:42 MDT) Date (DD/MM/YY) Director - Financial & Strategic Services Signature Chief Administrative Officer (City Manager) 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 Oct 6, 2023 Date (DD/MM/YY) City Manager Signature





Select From List Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 05/10/23 Month Septe

September Year

2023

General Council I	Related Business	In-Region Mileage Cl	aim based on Chart	Way	Mileage Claim km's (From Chart)	Out-of-Region Mile Region, spec	eage Claim (or In- cific mileage)		Mileage Claim km's- Specific	Mileage Amount @ 0.62/km	Other Transportation & Parking *	Accommodations *	Airfare* I	Per Diems*		Registratio n /Event Ticket *	General	Total			GL Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1227	1221	1222	1222	2	ACCT	Cost Ctr	CAT 2 Project CA	AT4
06/09/23	Youth Advisory Committee									-				100.00				100.00	6140	1010	516108	
20/09/23	Seniors Advisory Committee									_				100.00				100.00	6140	1010	516108	
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Sub-Total \$ 200.00

Professional Dev	·	In-Region Mileage C	aim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region M	fileage Claim (or In- ecific mileage)	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*		Conference or Course Registratio n /Event Ticket *		Total			GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	122	1 122:	2 1226	1216	1227	1225	5 1224		ACCT	Cost Ctr	CAT 2 Project CAT4
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Select From List Do not enter in "Grey" cells

Name:

Councillor Joly

Date Submitted

05/10/23

Month September Year

2023

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl		Way	Out-of-Region Mill Region, spec	eage Claim (or In- cific mileage)	One Way	Mileage Claim- Specific	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*			General Expenses *	Total		GL Cod	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1221	122	1222	1226	1216	1227	1225	1224		ACCT C	CAT : Cost Ctr Project	
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Sub-Total \$

Office of the M	yor (Official Events & Duties)	<u>In-Region Mileage C</u>		Mileage Claim (From Chart)	Out-of-Region Mil Region, spe	eage Claim (or In- cific mileage)	One Way /Return	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*			General Expenses *	Total	GL C	Coding
Date (DD/MM/Y	/) Nature of Event/Meeting	From	То		From	То	CAT7_	_	1220	1220	) 1225	1226	1227	1221	1222	2 1222	2	ACCT Cost Ctr CAT3	CAT4
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Sub-Total

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Select From List

Do not
enter in
"Grey" cells

Name:

Councillor Joly

Date Submitted

05/10/23

September Year

Month

2023

Operating Sup	plies/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/Y	Y) Detailed Description			ACCT Cost Ctr	CAT 2 Project CAT	Expense 7 Type
	/23 Home Internet - Telus		70.00		·	/A Mobile Dev
27/09	//23 Mobile Device - Telus		55.00	1010	516108 N	/A Mobile Dev

Sub-Total \$ 125.00

BMO MasterCard E	ixpenses	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Meals *	Registratio n /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)									
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Select From List Do not enter in "Grey" cells

Name:

Councillor Joly

05/10/23 Date Submitted 2023 Month September

Expenses Paid Dir	rectly by the City (eg. Petty Cash)	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Meals *	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. 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)
- 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. Expense claims must be submitted within 10 days of the following month
- 6. Incomplete expense claims will not be processed
- 7. Per Diems (claim for attendance at specified events per C-CC-03) are taxable and paid at a rate of \$100 for less than or equal to 4 hours, or \$200 for greater than 4 hours.
- 8. Meals claimed without receipts for travel outside of the Capital region follow the rates and conditions outlined in the Council Policy C-CC-03 Council Remuneration and Expense Reimbursement

Grand Total Expenses 325.00 Less: BMO MasterCard Less: Expenses Paid 325.00 Net to be paid to: Councillor Joly





N. L. a.
Name:

Councillor Joly

Date Submitted

Month

05/10/23

September Yes

2023

Authorizations & Approvais	Councillor Joly	September 2023
<u>Preparer</u>		
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	of submission.	
De Suntita	Oct 5, 2023	
Preparer's Signature	Date (DD/MM/YY)	
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		
Natalie Joly		
was completed by another individual. All applicable receipts have been attached.  Nataue Joly Natalie Joly (Oct.5, 2023 13:06 MDT)	Oct 5, 2023	
	·	
Council Member's Signature	Date (DD/MM/YY)	
Accounts Payable		
I have reviewed this claim for mathematical accuracy and documentation support.		
I have reviewed this claim for mathematical accuracy and documentation support. Yukiko Shionoya	0.16.2022	
Yukiko Shionoya (Oct 6, 2023 09:31 MDT)	Oct 6, 2023	
	·	
Accounts Payable Personnel Signature	Date (DD/MM/YY)	
Director - Financial & Strategic Services		
Director -1 maintial & Strategic Services		
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provi	ted are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement	
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provi	and the in accordance than occurs points of the occurs in terminal accordance to the accordance to the occurs in t	
Anne Victoor (Oct 6, 2023 09:42 MDT)	Oct 6, 2023	
All the victor (Oct 0.2023 03.42 MDT)		
Director - Financial & Strategic Services Signature	Date (DD/MM/YY)	
Director - Financial & Grategic Services Orginature	Date (DUMINITY)	
Chief Administrative Officer (City Manager)		
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provi	read are in accordance with Council notice CCC-03 Council Remuneration and Expanse Reimbursement	
In have twite and who drain and an saushed that the expenses listed and the information and documentation provi	and any in accordance man opening points a point of points in a contract of the contract of th	
WHE	Oct 6, 2023	
City Manager Signature	Date (DD/MM/YY)	