



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 08/01/24 Month: July 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			
06/07/23	Calgary Stampede Networking Events					St. Albert	Calgary	One Way	318.00	160.59		1,058.69					1,219.28	6140	1010	516112			
24/07/23	Regional Video Shoot	St. Albert	Spruce Grove	Return	58.00					29.29							29.29	6140	1010	516112			
27/07/23	Meeting with Insp. Comaniuk									-				66.91			66.91	6140	1010	516112			
28/07/23	Strathcona County Golf Classic	St. Albert	Strathcona (County)	Return	66.00					33.33							33.33	6140	1010	516112			
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
Sub-Total																				\$ 1,348.81			

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			
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
										-							-						
Sub-Total																				\$ -			



Council Member Monthly Expense Claim Form

Select From List
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Name: Mayor Heron

Date Submitted: 08/01/24 Month: July 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
										-							-			
										-							-			
										-							-			
										-							-			

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
										-							-			
										-							-			
										-							-			
										-							-			

Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted 08/01/24

Month July Year 2023

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding			
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)						
01/07/23	Home Internet - Shaw	70.00	#N/A	1010	516112	N/A
21/07/23	Mobile Device - Telus	55.00		1010	516112	N/A

Sub-Total \$ 125.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)	Description							
14/07/23	ARPA Convention Registration					887.25		887.25
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ 887.25



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Name: Mayor Heron

Date Submitted: 08/01/24 Month: July 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	\$ 2,361.06
Less: BMO MasterCard	-\$ 887.25
Directly	\$ -
Net to be paid to: Mayor Heron	\$ 1,473.81



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted 08/01/24

Month July Year 2023

Authorizations & Approvals

Mayor Heron July 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] Jan 8, 2024
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] Jan 8, 2024
Council Member's Signature Date (DD/MM/YY)

Accounts Payable

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

[Signature] Jan 8, 2024
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

[Signature] Jan 9, 2024
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

[Signature] Jan 9, 2024
City Manager Signature Date (DD/MM/YY)



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24

Month: August 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 @ 0.62/km	Other Transportation & Parking *	Accommodations *	Airfare*	Councillor Per Diems*	Meals *	Registration /Event Ticket *	General Expenses *	Total	GL Coding		
		From	To			From	To												CAT7	1220	1220
06/08/23	Villeneuve Air Show					St. Albert	Villeneuve Airport	Return	37.00	22.94								22.94	6140	1010	516112
16/08/23	EMRB Golf Tournament	St. Albert	Edmonton-West	Return	40.00					24.80								24.80	6140	1010	516112
21/08/23	Treaty Six Days					St. Albert	Alexander First Nation	Return	73.20	45.38								45.38	6140	1010	516112
22/08/23	Lunch with Council & CAO (Cajun House)									-					112.14			112.14	6140	1010	516112
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
Sub-Total																					\$ 205.26

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*	Per Diems*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding		
		From	To			From	To												CAT7	1221	1221
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
Sub-Total																					\$ -



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24

Month: August 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*	Per Diems*	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	1216	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project	CAT4
										-								-				
										-								-				
										-								-				
										-								-				
										-								-				

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*	Per Diems*	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	1227	1221	1222	1222		ACCT	Cost Ctr	CAT3	CAT4
										-								-				
										-								-				
										-								-				
										-								-				
										-								-				

Sub-Total \$ -



Council Member Monthly Expense Claim Form

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Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24

Month: August Year: 2023

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding			
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)						
01/08/23	Home Internet - Shaw	70.00	#N/A	1010	516112	N/A
21/08/23	Mobile Device - Telus	55.00		1010	516112	N/A

Sub-Total \$ 125.00

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

Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted 02/01/24

Month August Year

2023

Table with columns: Date (DD/MM/YY), Other Transportation & Parking *, Accommodations *, Airfare *, Per Diems *, Meals *, Registration /Event Ticket *, General Expenses *, Total. 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. It is recommended to claim mileage based on the standard mileage chart.
4. For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance.
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

Summary table: Grand Total Expenses \$ 330.26, Less: BMO MasterCard Directly \$ -, Net to be paid to: Mayor Heron \$ 330.26



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24

Month: August Year: 2023

Authorizations & Approvals

Mayor Heron

August

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: [Signature] Date (DD/MM/YY): Jan 2, 2024

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: [Signature] Date (DD/MM/YY): Jan 4, 2024

Accounts Payable

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

Accounts Payable Personnel Signature: [Signature] Date (DD/MM/YY): Jan 4, 2024

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: [Signature] Date (DD/MM/YY): Jan 4, 2024

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: [Signature] Date (DD/MM/YY): Jan 4, 2024



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted 02/01/24

Month September Year 2023

General Council Related Business		In-Region Mileage Claim based on Chart				Out-of-Region Mileage Claim (or In-Region specific mileage)		Other Expenses										GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To	One Way /Return	Mileage Claim km's (From Chart)	From	To	One Way /Return	Mileage Claim km's-Specific	Mileage Amount @ 0.62/km	Other Transportation & Parking *	Accommodations *	Airfare *	Councillor Per Diems *	Meals *	Registration /Event Ticket *	General Expenses *	Total	ACCT	Cost Ctr	Project CAT4
07/09/23	EMRB 15th Anniversary Celebration	St. Albert	Edmonton-Downtown	Return	30.00			CAT7		18.60	19.00							37.60	6140	1010	516112
11/09/23	Meeting with Minister Nally	St. Albert	Edmonton-Downtown	Return	30.00					18.60	7.00							25.60	6140	1010	516112
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
										-								-			
Sub-Total																					\$ 63.20

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



Council Member Monthly Expense Claim Form

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Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24

Month: September 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*	Per Diems*	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	1216	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project	CAT4
										-												
										-												
										-												
										-												
										-												

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*	Per Diems*	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	1227	1221	1222	1222		ACCT	Cost Ctr	CAT3	CAT4
										-												
										-												
										-												
										-												
										-												

Sub-Total \$ -



Council Member Monthly Expense Claim Form

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Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24

Month: September Year: 2023

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding			
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project CAT7	Expense Type
Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)						
01/09/23	Home Internet - Shaw	70.00	#N/A	1010	516112	N/A
21/09/23	Mobile Device - Telus	55.00		1010	516112	N/A

Sub-Total \$ 125.00

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)									
05/09/23	ICSC Membership						183.06		183.06
05/09/23	Elite Promotional - LoSeCa Run Sponsorship							250.00	250.00
11/09/23	RMA Fall Convention Registration						1,041.60		1,041.60
11/09/23	Lunch Meeting w/Dale Nally & Hal Danchilla - Cactus Club					28.80			28.80
25/09/23	FCM Advocacy Days Flights			517.56					517.56
26/09/23	EMRB Housing Symposium Registration						54.58		54.58
									-
									-
									-

Sub-Total \$ 2,075.60



Council Member Monthly Expense Claim Form

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Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24 Month: September Year: 2023

Expenses Paid Directly by the City (eg. Petty Cash)		Other Transportation & Parking *	Accommodations *	Airfare *	Per Diems *	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. 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)
- 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.
- Expense claims must be submitted within 10 days of the following month
- Incomplete expense claims will not be processed
- 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.
- 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	\$ 2,263.80
Less: BMO MasterCard	-\$ 2,075.60
Directly	\$ -
Net to be paid to: Mayor Heron	\$ 188.20



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Mayor Heron

Date Submitted: 02/01/24

Month: September Year: 2023

Authorizations & Approvals

Mayor Heron

September

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: [Signature] Date (DD/MM/YY): Jan 2, 2024

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: [Signature] Date (DD/MM/YY): Jan 4, 2024

Accounts Payable

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

Accounts Payable Personnel Signature: [Signature] Date (DD/MM/YY): Jan 4, 2024

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: [Signature] Date (DD/MM/YY): Jan 8, 2024

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: [Signature] Date (DD/MM/YY): Jan 8, 2024