

Select From List Do not enter in "Grey" cells

Councillor Biermanski Name:

02-05-23

2023

					I Miles				1861											
					Mileage Claim km's				Mileage		011				Registration /Event Ticket *					
General Council I	Related Business				Claim km's	0.1.10	Olater (e. l. B		Claim	rvilleage	Other Transportation & Parking *				Registration					
		In-Region Mileage Cl		One Way	(From	Out-or-Region Milea	age Claim (or In-Region, ic mileage)	One Way	km's-	Amount @	ransportation				/Event licket	General				
		In-Region Mileage Cl	aim based on Chart	/Return	Chart)	specifi	ic 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 C	ost Ctr Project	CAT4
										-							-			
																		1		
										_										
																		1		
										-							-	-		
										-							-			
										-							-			
										_										
				1														1		
							_			_								+		
										-										
										-							-			
										-										
																		1		
										_										
							+			-	-							+		
												1				1				
										-								1		
												1				1				
										-							-			
	·																			

Sub-Total \$ -

Professional Deve	elopment	In-Region Mileage C	laim based on Chart	One Way	Mileage Claim (From Chart)	Out-of-Region Mileac	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		CAT 2 ACCT Cost Ctr Project CAT4
										_								
										-							-	
										-							-	
										-							-	1
										-							-	
											1							

ıb-Total	\$ -



Select From List Do not enter in "Grey" cells

Name: Cou

Councillor Biermanski

late Submitted 02-05-23

nth April Ye

2023

A	NUMA or FCM Cor	nvention 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 /Return	Mileage Claim- Specific		Other Transportation & Parking *	Accommodations *	Airfare*		or Course Registration /Event Ticket	General Expenses *	Total		GL Coding	
D	Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224	4	ACCT	CAT Cost Ctr Proje	
Γ																					
																			1		
H											-								1		
L											-							-	1		

Sub-Total \$ -

Office of the Mayor (Official Event	· · · · · · · · · · · · · · · · · · ·	Claim based on Chart	One Way	Mileage y Claim (From Chart)	Out-of-Region Milean	ge Claim (or In-Region,	One Way /Return	Mileage Claim- Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		GL Co	oding	
Date (DD/MM/YY) Nature of Event	Meeting From	То			From	То	CAT7_		1220		1225	1226	1221	1222	1222	2	ACCT	Cost Ctr CA	T3 CAT4	
																_				
									_											
									-							-				
									-							-	1			

Sub-Total \$ -



Select From List Do not enter in "Grey" cells

Name:	Councillor Biermanski

Date Submitted 02-05-23 Month April 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 CAT7	Expense Type	
11-04-2	3 Mobile Device - Telus		55.00	6404 1010	516113 N/A	Mobile De	evice Charge
19-04-2	3 Home Internet - Telus		70.00	1010	516113 N/A	Mobile De	evice Charge

Sub-Total \$ 125.00

BMO MasterCard		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total
Date (DD/MM/YY)								
20-04-23	Tri-Region Mayor's Golf Classic Registration					262.50		262.50
20-04-23	UDI Luncheon Registration					74.09		74.09
26-04-23	UDI Golf Tournament Registration					252.31		252.31
26-04-23	Chamber Golf Tournament Registration					183.75		183.75
26-04-23	Business@Lunch Registration					45.00		45.00
								_
								_
								-
								-

Sub-Total \$ 817.65

St	Tuber City of Council Mem	per Monthly Expense	e Claim F	orm				Select From List Do not enter in "Grey" cells			
Name:	Councillor Biermanski	Date	ate Submitted	02-05-23		Month	April	Year	202	23	
Expenses Paid D	irectly by the City (eg. Petty Cash)	Otho Tran & Pa	ansportation	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	General Expenses *	Total		
Date (DD/MM/YY)											
									-	1	
									_	1	
									-	-	
									-		
Claim Reminders:	olicy C-CC-03 Council Remuneration and Expense Reimbursement for detailed provisions of allowable expenses**						Sub-Total		\$ -		
Detailed receipt	is must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.										
	nay be claimed without a receipt up to \$15. Clearly indicate (Meter) in the nature of event/meeting section.				Grand T		oenses sterCard			\$	942.65 817.65
	rage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location ises, 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 li	ted on the back of the receipt.			Less: E					-\$ \$	817.65

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

Net to be paid to Councillor Biermanski

\$ 125.00



Name:

Councillor Biermanski

Council Member Monthly Expense Claim Form

Select From List Do not enter in "Grey" cells

ate Submitted

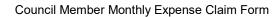
02-05-23

April Ye

2023

Authorizations & Approvals		Councillor Biermanski	April	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 t	time of submission.			
Alternack				
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	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	of the claim even if the form		
was completed by another individual. All applicable receipts have been attached. NEUCY BICKMANSKI				
Shelley Biermanski (May 2, 2023 11:11 MDT)				
Council Member's Signature	Date (DD/MM/YY)			
Accounts Payable			· 	
I have reviewed this claim for mathematical accuracy and documentation support.				
Danielle Parsons				
Danielle Parsons (May 3, 2023 08:41 MDT)				
Accounts Payable Personnel Signature	Date (DD/MM/YY)			
			l	
Director - Financial & Strategic Services				
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provice	ded are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement			
Q-Vie-	, , , , , , , , , , , , , , , , , , , ,			
Anne Victor (May 3, 2023 13:18 MDT)				
Director - Financial & Strategic Services Signature	Date (DD/MM/YY)			
, , ,				
			ı	
Chief Administrative Officer (City Manager)				
I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provice	ded 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 provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses issted and the information and documentation provided that the expenses is the expense is the expense of the expense is the expense of the expense of the expense is the expense of t				
City Manager Signature	Date (DD/MM/YY)			
			I	

P:\Mayor's Office\Expenses - F00\2023\4 - April\Biermanski\[Cllr Biermanski Council Expense Claim Form - April 2023.xlsm]Claim Form





Select From List Do not enter in "Grey" cells

Name: Councillor Biermanski

Date Submitted 06/06/23 Month May 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 Milea specific	ge Claim (or In-Region,	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	
late (DD/MM/YY) Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	5 1226	1221	1222	1222		ACCT	CAT 2 Cost Ctr Projec	t CAT4
11/05/23 Regional Women's Caucus	St. Albert	Stony Plain	Return	74.00					37.37							37.37	6140	1010 516113	
									_							_			
									_							_	1		
									_							_	1		
									_							_	1		
									_							_	1		
																_	1		
									_							_	1		
									_							_	1		
																_	1		
																_			

Sub-Total \$ 37.37

Professional Dev	elopment	In-Region Mileage Cl		Way		leage Claim (or In-Region, cific mileage)	One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4
									_							_		
									_							_		
									-							-		
									-							-		
									-							-		
									_							_		

Sub-Total



Select From List Do not enter in "Grey" cells

Year

2023

Name:

Councillor Biermanski

Date Submitted 06/06/23 Month May

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl	aim based on Chart	Way		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 Coding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1221	1221	1222	1226	1227	7 1225	122	4	ACCT	CAT 2 Cost Ctr Project	
									-							-	-		
									-							-	_		
									-							-			
									_							_			

Sub-Total \$

Office of the Mayor (Official Events & Duties)	In-Region Mileage Cl	aim based on Chart	One Way /Return			age Claim (or In-Region, ic mileage)		Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses * T	-otal		GL Codir	ng
Date (DD/MM/YY) Nature of Event/Meeting	From	То		_	From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr CAT3	B CAT4
									_							-			
									_							_]		
																	1		
									-								1		

Sub-Total \$ -



Select
From List

Do not
enter in
"Grey" cells

Name:

Councillor Biermanski

Date Submitted

Month

06/06/23

May 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)	Total		GL Coding		
Date (DD/MM/YY) Detailed Description			ACCT Cost (CAT 2 Ctr Project CA	Exp T7 Typ	oense oe
11/05/23 Mobile Device - Telus		55.00	6404 1010	516113	N/A Mol	bile Device Charge
19/05/23 Home Internet - Telus		70.00	1010	516113	N/A Mo	<mark>bile De</mark> vice Charg
			-			
			1			
			1			

Sub-Total \$ 125.00

BMO MasterCard I	Expenses	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
03/05/23	Sturgeon County Golf Tournament Registration					236.25		236.25
23/05/23	UDI Luncheon Registration					74.09		74.09
29/05/23	Business@Lunch Registration					45.00		45.00
								-
								-
								-
								-
								_
								-

Sub-Total

\$ 355.34

D	A . Cinnal
CAX	lbert
()(./)	unerg
	Charles

Select From List Do not enter in "Grey" cells

Name:

Councillor Biermanski

06/06/23 2023 Date Submitted Month

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

<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

Grand Total Expenses 517.71 Less: BMO MasterCard 355.34 -\$ Less: Expenses Paid Net to be paid to Councillor Biermanski 162.37

Sub-Total



Select From List Do not enter in "Grey" cells

Year

Month

2023

Name: Councillor Biermanski Date Submitted 06/06/23

Authorizations & Approvals Councillor Biermanski	May	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. **JULIUS BIETMANSKI** Shelley Biermanski (Jun 6, 2023 18:00 MDT)		
Council Member's Signature Date (DD/MM/YY)		
Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support. Lynda Lavallee Lynda Lovallee (Jun 7, 2023 08:14 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 provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement Anne Victoor (Jun 7, 2023 08:28 MDT)		
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 When the council policy C-CC-03 Council Remuneration and Expense Reimbursement		
City Manager Signature Date (DD/MM/YY)		



Select From List Do not enter in "Grey" cells

Name: Councillor Biermanski

Date Submitted

Month

04/07/23

ne Year

2023

General Council F	Related Business	In-Region Mileage Cla	aim based on Chart	Way	Mileage Claim km's (From Chart)		ge Claim (or In-Region,	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 Co	ding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr I	CAT 2 Project CAT4
15/06/23	UDI Luncheon	St. Albert	Edmonton- Downtown	Return	30.00					15.15							15.15	6140	1010 5	16113
16/06/23	Sturgeon County Mayor's Golf Tournament	St. Albert	Sturgeon (County)	Return	40.00					20.20							20.20	6140	1010 5	16113
21/06/23	Chamber Golf Tournament	St. Albert	Sturgeon (County)	Return	40.00					20.20							20.20	6140	1010 5	16113
										_							_			
										_							_			
										_							_			
										_										
										_							-			
										_										
										_										
																	_			

Sub-Total \$ 55.55

Professional Dev	·	In-Region Mileage C	laim based on Chart	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileag	ge Claim (or In-Region, mileage)	One Way		Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Coding
Date (DD/MM/YY)	Nature of Event/Meeting	From	То			From	То	CAT7_	1221	1221	1 1222	1226	1227	1225	1224		ACCT	CAT 2 Cost Ctr Project CAT4
									_									
									-								1	
									-								1	
									-							-	1	
									-							-	-	
									-							-	1	
									_									

Sub-Total

1 of 5



Select From List

Do not enter in
"Grey" cells

2023

Name: Councillor Biermanski

Date Submitted 04/07/23 Month June Year

AUMA or FCM Co	nvention or Board Expenses	In-Region Mileage Cl				ge Claim (or In-Region, mileage)	One Way	Claim-	Amount @	Other Transportation & Parking *	Accommodations *	Airfare*		Conference or Course Registration /Event Ticket *	General Expenses *	Total		GL Co	oding	
Date (DD/MM/YY)	Nature of Event/Meeting	From	То		From	То	CAT7_		1221	1221	1222	2 1226	1227	1225	1224	1	ACCT	Cost Ctr I	CAT 2 Project CAT4	
									-							-				
									-							-	_			
									_							_				
																_				

Sub-Total \$ -

Office of the May	or (Official Events & Duties)	In-Region Mileage (Daim based on Chart			ge Claim (or In-Region. mileage)	One Way	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket	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	
																1			
								-							-	1			
								-							-	1			
								-							-	-			
								-							-				

Sub-Total \$ -



Select From List

Do not
enter in
"Grey" cells

Name:

Councillor Biermanski

Date Submitted

Month

04/07/23

ie Year

2023

Operating Supplie	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 (CAT7	Expense Type
	Mobile Device - Telus		55.00				Mobile Device Charg
19/06/23	B Home Internet - Telus		70.00	1010	516113	N/A	Mobile Device Char

Sub-Total

\$ 125.00

BMO MasterCard I	Exhenses	Other Transportation & Parking *	Accommodations *	Airfare*		Registration /Event Ticket	General Expenses *	Total		
Date (DD/MMYY)										
05/06/23	EMRB Golf Refund					- 204.75		- 204.75		
05/06/23	EMRB Golf Tournament Registration					204.75		204.75		
21/06/23	UDI Luncheon Registration					74.09		74.09		
								_		
								_		
								_		
								_		
								_		
								_		

Sub-Total

\$ 74.09





Name:	Councillor Biermanski	Date Submitted	Month	June	Year	2023

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

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	\$	254.64
Less: BMO MasterCard	-\$	74.09
Less: Expenses Paid	\$	-
Net to be paid to: Councillor Biermanski	\$	180.55

Sub-Total



Date Submitted

04/07/23



2023

Name: Councillor Biermanski

2023 Authorizations & Approvals Councillor Biermanski June 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. AttendAC 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.

Shelley Biermanski (Jul 4, 2023 23:23 MDT) Council Member's Signature Date (DD/MM/YY) Accounts Payable I have reviewed this claim for mathematical accuracy and documentation support.

Lynua Lavallee

Lynua Lavallee (Jul 5 2023 09:15 MDT) 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 smante findau 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 provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement MECC Date (DD/MM/YY) City Manager Signature

P:\Mayor's Office\Expenses - F00\2023\6 - June\Biermanski\[Cllr Biermanski Council Expense Claim Form - MASTER Revised February 2023.xlsm]Claim Form