



Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: **Councillor Watkins**

Date Submitted **06/05/2019**

Month **April** Year **2019**

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			
18/04/2019	UDI-ER Luncheon	St. Albert	Edmonton-Downtown	Return	30.00					15.15							15.15	6140	ACCT CAT 2 Cost Ctr Project CAT4
18/04/2019	LDA15-0045 Trumpeter - Environmental Impact Assessment Board	St. Albert	Edmonton-Downtown	Return	30.00					15.15							15.15	6140	1010 516111 A10 General Council Business A10 General Council Business A6 CRB A10 General Council Business
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
Sub-Total																		\$ 30.30	

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 CAT 2 Cost Ctr Project CAT4
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
										-							-		
Sub-Total																		\$ -	

Reg. #58  
 Post #29 462966



**Council Member Monthly Expense Claim Form**

Select From List  
  
Do not enter in "Grey" cells

Name: **Councillor Watkins**

Date Submitted: **06/05/2019**

Month: **April** Year: **2019**

AJMA 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:

Date Submitted:

Month:

Year:

Operating Supplies/Telephone/Internet/Sponsorships		Total	GL Coding		Expense Type
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	Project CAT7
	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)				

Mobile Device Charge  
Office/Operating Sup;

6404

Sub-Total \$ -

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
04/04/2019	UDI-ER Luncheon Ticket					54.97		54.97

Sub-Total \$ 54.97



**Council Member Monthly Expense Claim Form**

Select From List  
Do not enter in "Grey" cells

Name:

Date Submitted:  Month:  Year:

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	\$ 85.27
Less: BMO MasterCard	-\$ 54.97
Less: Expenses Paid	\$ -
<b>Net to be paid to Councillor Watkins</b>	<b>\$ 30.30</b>

Training and Development Activities	
Activity Name	Description of Activity Content and any learning/information worth sharing
April 17th, 2019	Payhonin Reconciliation St. Albert Launch Ceremony
Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees)	
Date of Meeting	Updates
Youth Committee April 3rd, 2019	
Annual AHF / Council Meeting April 18th, 2019	



Council Member Monthly Expense Claim Form

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Name:

Date Submitted

Month

Year

Senior's Advisory Committee	April 25th, 2019	
Planning and Budget Results Workshop	April 29th, 2019	



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 06/05/2019

Month April Year 2019

Authorizations & Approvals

Councillor Watkins

April

2019

Preparer

If claim form was prepared by an individual other than the Council Member, sign and date below

Council Member at the time of submission.

May 8/19  
Date (DD/MM/YY)

Council Member

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

May 6/19  
Date (DD/MM/YY)

Accounts Payable

07/05/19.  
Date (DD/MM/YY)

Chief Financial Officer

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

May 8/19  
Date (DD/MM/YY)

Chief Administrative Officer (City Manager)

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

May 9/19  
Date (DD/MM/YY)



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 08/02/2019 Month May Year 2019

Table with columns: Date, Nature of Event/Meeting, In-Region Mileage Claim based on Chart, Mileage Claim km's, Out-of-Region Mileage Claim, 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, ACCT, Cost Ctr, Project, GL Coding. Includes entries for CBRE Reception and MRSP Task Force Meeting.

Sub-Total \$ 30.30

Reg. #59  
Post #29 409613

Table for Professional Development with columns: Date, Nature of Event/Meeting, In-Region Mileage Claim based on Chart, Mileage Claim km's, Out-of-Region Mileage Claim, One Way/Return, Mileage Claim km's-Specific, Mileage Amount @ 0.505/km, Other Transportation & Parking, Accommodations, Airfare, Meals, Conference or Course Registration/Event Ticket, General Expenses, Total, ACCT, Cost Ctr, Project, GL Coding.

Sub-Total \$ -



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 08/02/2019 Month May Year 2019

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
										-								-	
										-								-	
										-								-	
										-								-	

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: Councillor Watkins

Date Submitted 08/02/2019

Month May

Year 2019

Operating Supplies/Telephone/Internet/Sponsorships		Total
Date (DD/MM/YY)	Detailed Description	
	Mobile Device (Max \$55/Month) Home Internet (Max \$70/Month), Sponsorship (Max \$1,000/Year see policy C-CC-21 Council Sponsorship)	

GL Coding  
ACCT Cost Ctr CAT 2 Project CAT7 Expense Type  
6404 Mobile Device Charge  
Office/Operating Supp

Sub-Total \$ -

BMO MasterCard Expenses		Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total
Date (DD/MM/YY)								
14/05/2019	FCM AirBnB Accommodations (payment 2 of 2)		361.71					361.71
23/05/2019	Alberta Urban Municipal Leaders Caucus					105.00		105.00
								-
								-
								-
								-
								-
								-
								-

Sub-Total \$ 466.71



Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 06/02/2019 Month May Year 2019

Table with columns: Date (DD/MM/YY), Other Transportation & Parking \*, Accommodations \*, Airfare\*, 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
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

Summary table:
Grand Total Expenses \$ 497.01
Less: BMO MasterCard -\$ 466.71
Less: Expenses Paid \$ -
Net to be paid to Councillor Watkins \$ 30.30

Table with sections:
Training and Development Activities (Activity Name, Description)
Board, Committee, Agency meetings attended (Includes both Council appointed and other approved committees) (Date of Meeting, Updates)
Rows include: Blanket Exercise May 1st, 2019; Youth Council 01/05/2019; 2019 Joint Cities/School Boards Annual Meeting 02/05/2019



Council Member Monthly Expense Claim Form

Select From List  
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Name:

Date Submitted

Month  Year

Committee Meeting	09/05/2019	
Senior Advisory Committee	23/05/2019	
Youth Advisory Committee Special Meeting	23/05/2019	



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 06/10/2019 Month May Year 2019

Authorizations & Approvals

Councillor Watkins May 2019

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.

Aug 2/19  
Date (DD/MM/YY)

Council Member

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

Aug 2/19  
Date (DD/MM/YY)

Accounts Payable

Aug 6/19  
Date (DD/MM/YY)

Chief Financial Officer

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

Aug 6/19  
Date (DD/MM/YY)

Chief Administrative Officer (City Manager)

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

Aug 7/19  
Date (DD/MM/YY)

Select From List  
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted: 19-07-08

*June*  
Month: July Year: 2019

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
19-06-06	Summer Municipal Leaders' Caucus	St. Albert	Fort Sask	Return	72.00					36.36							36.36	6140
19-06-12	Villeneuve Airport Round Table					St. Albert	Villeneuve Airport	Return	38.40	19.39							19.39	6140
19-06-20	ICF Task Force Meeting	St. Albert	Morinville	One Way	19.00					9.60							9.60	6140
19-06-20	UDI Lunch Edmonton	Morinville	Edmonton-Downtown	One Way	38.00					19.19							19.19	6140
19-06-20	Return UDI Lunch Edmonton	Edmonton-Downtown	St. Albert	One Way	15.00					7.58							7.58	6140
19-06-27	Change of Command Parade					St. Albert	Canadian Forces Base Edmonton	Return	26.80	13.53							13.53	6140
19-06-28	ICF Task Force Meeting	St. Albert	Morinville	Return	38.00					19.19							19.19	6140
19-05-24	MRSP Task Force Meeting	St. Albert	Edmonton-University	Return	32.00					16.16							16.16	6140
Sub-Total																	\$	141.00

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	
Sub-Total																	\$	-	

Reg. #59  
Post #29 468052



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: **Councillor Watkins**

Date Submitted: **19-07-08** Month: **July** Year: **2019**

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	GAT7_										ACCT	Cost Ctr	Project	CAT
19-05-30	FCM Quebec City																216.48	6100	1010	516111 A7	FCM
19-06-02	FCM Quebec City										66.65						66.65	6100	1010	516111 A7	FCM
19-05-29	FCM Quebec City													25.00			25.00	6100	1010	516111 A7	FCM
19-06-03	FCM Quebec City													18.06			18.06	6100	1010	516111 A7	FCM
Sub-Total																	\$	326.19			

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	GAT7_										ACCT	Cost Ctr	CAT3	CAT4
Sub-Total																	\$	-			

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	Project	Expense Type
Sub-Total																	\$	-			



Council Member Monthly Expense Claim Form

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Do not enter in "Grey" cells

Name:

Date Submitted:

Month:  Year:

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

Sub-Total \$ -

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)														



Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 19-07-08

Month July Year 2019

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
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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	\$	467.19
Less: BMO MasterCard	\$	-
Less: Expenses Paid	\$	-
Net to be paid to Councillor Watkins	\$	<del>467.19</del>

426.24

Training and Development Activities

Activity Name	Description of Activity Content and any learning/information worth sharing

Board, Committee, Agency meetings attended (includes both Council appointed and other approved committees)

Committee, Agency Name	Date of Meeting	Updates





Council Member Monthly Expense Claim Form

Select From List  
Do not enter in "Grey" cells

Name: Councillor Watkins

Date Submitted 19-07-08

Month July

Year 2019

Authorizations & Approvals

Councillor Watkins

July

2019

Preparer

I Member at the time of submission.

July 9/19  
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

July 9/19  
Date (DD/MM/YY)

Accounts Payable

July 11/19  
Date (DD/MM/YY)

Chief Financial Officer

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

July 11/19  
Date (DD/MM/YY)

Chief Administrative Officer (City Manager)

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

July 11/19  
Date (DD/MM/YY)