Council Member Monthly Expense Claim Form

City of St. Albert — Cultivate Life

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-11-14 | Month: October | 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	Cost Ctr	CAT 2 Project	CAT4
19-10-10	EMRB					St. Albert	Edmonton-Kingsway	Return	22.80	11.51							11.51	6140	1010	516110	A10 General Council Busiess
19-10-11	Women in Politics Leduc					St. Albert	Leduc	Return	110.20	55.65							55.65	6140	1010	516110	A10 General Council Busiess
19-10-17	UDI Lunch					St. Albert	Edmonton Downtown	Return	30.40	15.35							15.35	6140	1010	516110	A10 General Council Busiess
										-							-				
										-							-				
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										-							-				

Sub-Total $ 82.52

Reg. #59
Post #29 478948

Professional Development		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1221	1221	1222	1226	1227	1225	1224		ACCT	Cost Ctr	CAT 2 Project	CAT4
17-10-25	Inter City Forum on Social Policy					St. Albert	Calgary	Return	616.00	311.08		139.99					451.07	6100	1010	516110	A5 Career Development
										-							-				
										-							-				
										-							-				
										-							-				
										-							-				

Sub-Total $ 451.07

Council Member Monthly Expense Claim Form

City of St. Albert — Cultivate Life

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-11-14 Month: October Year: 2019

AUMA or FCM Convention or Board Expenses

Date (DD/MM/YY)	Nature of Event/Meeting	In-Region Mileage Claim based on Chart: From	To	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage): From	To	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: ACCT	Cost Ctr	CAT 2 Project	CAT4
								CAT7_		1221	1221	1222	1226	1227	1225	1224					
										-							-				
										-							-				
										-							-				
										-							-				
										-							-				

Sub-Total $ -

Office of the Mayor (Official Events & Duties)

Date (DD/MM/YY)	Nature of Event/Meeting	In-Region Mileage Claim based on Chart: From	To	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage): From	To	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: ACCT	Cost Ctr	CAT3	CAT4
								CAT7_		1220	1220	1225	1226	1221	1222	1222					
19-10-04	Annual Archbishop's dinner Deputy Mayor					St. Albert	Edmonton Downtown	Return	35.60	17.98	10.00						27.98	6140	1030	N/A	#N/A
										-							-				
										-							-				
										-							-				
										-							-				

Sub-Total $ 27.98

Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-11-14 Month: October Year: 2019

Operating Supplies/Telephone/Internet/Sponsorships	Mobile Device (Max $55/Month) Home Internet (Max $70/Month), Sponsorship (Max $1,000/Year see policy C-CC-21 Council Sponsorship)	Total	GL Coding				
Date (DD/MM/YY)	Detailed Description		ACCT	Cost Ctr	CAT 2 Project	CAT7	Expense Type
19-10-31	Home Office Internet	55.00	6404	1010	516110	N/A	Mobile Device Charge
19-10-31	Cellular Telephone Service	70.00		1010	516110	N/A	Mobile Device Charge

Sub-Total $ 125.00

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

Sub-Total $ -

Council Member Monthly Expense Claim Form

City of St. Albert — Cultivate Life

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-11-14 | Month: October | Year: 2019

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****

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	$ 686.57
Less: BMO MasterCard	$ -
Less: Expenses Paid	$ -
Net to be paid to Councillor Hansen	$ 686.57

Training and Development Activities

Activity Name	Description of Activity Content and any learning/information worth sharing
25-Oct-19	Inter City Forum on Social Policy Calgary
11-Oct-19	Women in Politics

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

	Date of Meeting	Updates
2019-10-10	EMRB and Edmonton Global	
24-Oct-19	North Saskatchewan Watershed Alliance	
22-Oct-19	Community Services Advisory Committee	
30-Oct-19	Intermunicipal Affairs Committee	

City of St. Albert
Cultivate Life

Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-11-14 Month: October Year: 2019

Authorizations & Approvals Councillor Hansen October 2019

Preparer

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

[redacted] Council Member at the time of submission.

Nov 19/19
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 was completed by another individual. All applicable receipts have been attached.

[redacted]

21/11/19
Date (DD/MM/YY)

Accounts Payable

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

[redacted]

Accounts Payable Personnel Signature

26/11/19.
Date (DD/MM/YY)

Chief Financial Officer

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

[redacted]

Chief Financial Officer Signature

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

Chief Administrative Officer (City Manager)

[redacted] the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement

[redacted]

City Manager Signature

Dec 3/19
Date (DD/MM/YY)

C:\Users\dvandevyvere\Desktop\[Hansen October.xlsm]Claim Form

City of St. Albert — Cultivate Life

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-05 Month: ~~December~~ November 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	Cost Ctr	CAT 2 Project	CAT4
19-11-05	Meeting with Active Communities	St. Albert	Edmonton-South	Return	72.00					36.36							36.36	6140	1010	516110	A10 General Council Busiess
19-11-09	Red Shoe Gala	St. Albert	Edmonton-North	Return	24.00					12.12							12.12	6140	1010	516110	A10 General Council Busiess
19-11-13	North Saskatchewan Watershed Alliance	St. Albert	Spruce Grove	Return	58.00					29.29							29.29	6140	1010	516110	A10 General Council Busiess
19-11-14	Priority Based Budgeting Workshop	St. Albert	Spruce Grove	Return	58.00					29.29							29.29	6140	1010	516110	A10 General Council Busiess
19-11-21	UDI Lunch	St. Albert	Edmonton-Downtown	Return	30.00					15.15							15.15	6140	1010	516110	A10 General Council Busiess
										-							-				
										-							-				
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										-							-				

Sub-Total $ 122.21

Reg. #59

Post #29 479842

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

Sub-Total $ -

City of St Albert Cultivate Life

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-05

Month: ~~September~~ November

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	CAT 2 Project	CAT4
										-							-				
										-							-				
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										-							-				

Sub-Total $ -

Office of the Mayor (Official Events & Duties)		In-Region Mileage Claim based on Chart		One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage)		One Way /Return	Mileage Claim-Specific	Mileage Amount @ 0.505/km	Other Transportation & Parking *	Accommodations *	Airfare*	Meals *	Registration /Event Ticket *	General Expenses *	Total	GL Coding			
Date (DD/MM/YY)	Nature of Event/Meeting	From	To			From	To	CAT7_		1220	1220	1225	1226	1221	1222	1222		ACCT	Cost Ctr	CAT3	CAT4
19-12-02	Deputy Mayor Lo Se Ca	St. Albert	Edmonton-North	Return	24.00					12.12							12.12	6140	1030	N/A	#N/A
19-11-27	Minister of Health Tobacco Reduction Strategy Meeting	St. Albert	Edmonton-Downtown	Return	30.00					15.15	16.00						31.15	6140	1030	N/A	#N/A
										-							-				
										-							-				
										-							-				

Sub-Total $ 43.27

City of St Albert
Cultivate Life

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-05

Month: November 30

Year: 2019

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 ACCT	Cost Ctr	CAT 2 Project	CAT7	Expense Type
Date (DD/MM/YY)	Detailed Description						
19-11-30	Home Office Internet	70.00	6404	1010	516110	N/A	Mobile Device Charge
19-11-30	Cellular Telephone Service	55.00		1010	516110	N/A	Mobile Device Charge

Sub-Total $ 125.00

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

Sub-Total $ -

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-05

Month: ~~December~~ November 2019

Year: 2019

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)								
19-11-26	Lunch with Minister Madu - event on December 3					82.90		82.90
19-11-27	UDI Lunch on December 12					54.92		54.92
								-
								-
								-
								-
								-

Sub-Total $ 137.82

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	$	428.30
Less: BMO MasterCard	$	-
Less: Expenses Paid	-$	137.82
Net to be paid to Councillor Hansen	$	290.48

Training and Development Activities

Date	Description of Activity Content and any learning/information worth sharing
2019-11-14	Priority Based Budget Workshop

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

Date	Committee	Updates
2019-11-13	North Saskatchewan Watershed Alliance	
2019-11-15	AUMA Sustainability & Environment	
2019-11-28	Seniors Advisory Committee	
2019-11-28	Environmental Advisory Committee	

City of St Albert
Cultivate Life

Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-05 Month: December Year: 2019

Authorizations & Approvals Councillor Hansen December 2019

Preparer

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

[redacted] rovided by the Council Member at the time of submission.

[redacted] Dec 5/19

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 was completed by another individual. All applicable receipts have been attached.

[redacted] 05/12/19

Date (DD/MM/YY)

Accounts Payable

I have reviewed this claim for mathematical accuracy and documentation support

[redacted] 05/12/19.

Date (DD/MM/YY)

Chief Financial Officer

I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement

[redacted] Dec 13/19

Chief Financial Officer Signature Date (DD/MM/YY)

Chief Administrative Officer (City Manager)

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

[redacted] Dec 19/19

City Manager Signature Date (DD/MM/YY)

C:\Users\dvandevyvere\Desktop\[Council Expense Claim Form - MASTER Revised December 15, 2017.xlsm]Claim Form

City of St. Albert — Cultivate Life

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-31 Month: December 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	Cost Ctr	CAT 2 Project	CAT4
19-12-12	EMBRB	St. Albert	Edmonton-Kingsway	Return	26.00					13.13							13.13	6140	1010	516110	A10 General Council Busiess
19-12-10	North Saskatchewan Rivershed Alliance	St. Albert	Edmonton-East	Return	44.00					22.22							22.22	6140	1010	516110	A10 General Council Busiess
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Sub-Total $ 35.35

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

Sub-Total $ -

Reg. #59

Post #20 480794.

Council Member Monthly Expense Claim Form

City of St Albert — Cultivate Life

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-31 | Month: December | Year: 2019

AUMA or FCM Convention or Board Expenses

Date (DD/MM/YY)	Nature of Event/Meeting	In-Region Mileage Claim based on Chart: From	To	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage): From	To	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: ACCT	Cost Ctr	CAT 2 Project	CAT4
								CAT7_		1221	1221	1222	1226	1227	1225	1224					
										-							-				
										-							-				
										-							-				
										-							-				
										-							-				

Sub-Total $ -

Office of the Mayor (Official Events & Duties)

Date (DD/MM/YY)	Nature of Event/Meeting	In-Region Mileage Claim based on Chart: From	To	One Way /Return	Mileage Claim (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage): From	To	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: ACCT	Cost Ctr	CAT3	CAT4
								CAT7_		1220	1220	1225	1226	1221	1222	1222					
										-							-				
										-							-				
										-							-				
										-							-				
										-							-				

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)

Date (DD/MM/YY)	Detailed Description	Total	GL Coding: ACCT	Cost Ctr	CAT 2 Project	CAT7	Expense Type
10-10-18	Telus Mobility - Councillor Mobile Device	55.00	6404	1010	516110	N/A	Mobile Device Charge
17-10-18	Shaw Cable - Councillor Home Office Internet	70.00	6404	1010	516110	N/A	Office/Operating Supp

Sub-Total $ 125.00

Council Member Monthly Expense Claim Form

City of St Albert Cultivate Life

Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted 19-12-31 Month December Year 2019

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

Sub-Total $ -

Council Member Monthly Expense Claim Form

City of St. Albert — Cultivate Life

Select From List

Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-31 | Month: December | Year: 2019

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****

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	$	160.35
Less: BMO MasterCard	$	-
Less: Expenses Paid	$	-
Net to be paid to Councillor Hansen	$	160.35

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)

Date of Meeting		Updates
2019-12-10	North Saskatcewan Rivershed Alliance	
2019-12-01	EMRB	

Council Member Monthly Expense Claim Form

Select From List
Do not enter in "Grey" cells

Name: Councillor Hansen

Date Submitted: 19-12-31 | Month: December | Year: 2019

Authorizations & Approvals — Councillor Hansen — December — 2019

Preparer

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

This expen[redacted] Member at the time of submission.

Preparer's [redacted]

December 31/19

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

[redacted]

31/12/19

Date (DD/MM/YY)

Accounts Payable

I have reviewed this claim for mathematical accuracy and documentation support

[redacted]

Accounts Payable Personnel Signature

02/01/20

Date (DD/MM/YY)

Chief Financial Officer

I have reviewed this claim and am satisfied that the expenses listed and the information and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement

[redacted]

Chief Financial Officer Signature

Jan 3/20

Date (DD/MM/YY)

Chief Administrative Officer (City Manager)

I [redacted]tion and documentation provided are in accordance with Council policy C-CC-03 Council Remuneration and Expense Reimbursement

C[redacted]

Jan 6/20

Date (DD/MM/YY)

P:\Mayor's Office\Expenses - F00\Monthly Expense Claims\2019\12 -December\[Hansen - Council Expense Claim Dec.xlsm]Claim Form