Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 20/02/24 Month: January Year: 2024

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 @ 0.64/km	Other Transportation & Parking *	Accommodations *	Airfare*	Councillor 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		1221	1222	1222		ACCT	Cost Ctr	Project	CAT 2 CAT4
15/01/24	Strategic Planning	St. Albert	Edmonton-West	Return	40.00					25.60								25.60	6140	1010	516106	
16/01/24	Strategic Planning	St. Albert	Edmonton-West	Return	40.00					25.60								25.60	6140	1010	516106	
17/01/24	Seniors Advisory Committee									-				100.00				100.00	6005	1010	516106	
18/01/24	Meeting with Sturgeon County	St. Albert	Sturgeon (County)	Return	40.00					25.60								25.60	6140	1010	516106	
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Sub-Total $ 176.80

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 @ 0.64/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	Project	CAT 2 CAT4
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 20/02/24 Month: January Year: 2024

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Sub-Total $ -

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 20/02/24 Month: January Year: 2024

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 @ 0.64/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
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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 @ 0.64/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	CAT2	CAT3
20/01/24	Grand Opening of Kitchen Academy - DM									-				50.00				50.00	6005	1010	516106	1125
29/01/24	Red Tape Reduction - Minister Nally (DM)									-				100.00				100.00	6005	1010	516106	1125
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 20/02/24 Month: January Year: 2024

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Sub-Total $ 150.00

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 20/02/24 Month: January Year: 2024

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
03/01/24	Home Internet - Shaw/Rogers	70.00	6404	1010	516106	N/A	Mobile Dev
13/01/24	Mobile Device - Virgin Mobile	55.00	6404	1010	516106	N/A	Mobile Dev

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)									
17/01/24	Business@Lunch Registration						45.00		45.00
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Sub-Total $ 45.00

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 20/02/24 Month: January Year: 2024

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)									
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								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. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)
4. For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.
5. Expense claims must be submitted within 10 days of the following month
6. Incomplete expense claims will not be processed
7. Per Diems (claim for attendance at specified events per C-CC-03) are taxable and paid at a rate of $100 for less than or equal to 4 hours, or $200 for greater than 4 hours.
8. Meals claimed without receipts for travel outside of the Capital region follow the rates and conditions outlined in the Council Policy C-CC-03 Council Remuneration and Expense Reimbursement

Grand Total Expenses	$	496.80
Less: BMO MasterCard	-$	45.00
Less: Expenses Paid	$	-
Net to be paid to: Councillor Hughes	$	451.80

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 20/02/24 Month: January Year: 2024

Authorizations & Approvals — **Councillor Hughes** — **January** — **2024**

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): Feb 20, 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.

Sheena Hughes (Feb 20, 2024 14:19 MST)

Council Member's Signature — Date (DD/MM/YY): Feb 20, 2024

Accounts Payable

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

Lynda Lavallee (Feb 20, 2024 14:21 MST)

Accounts Payable Personnel Signature — Date (DD/MM/YY): Feb 20, 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

Anne Victoor (Feb 20, 2024 14:26 MST)

Director - Financial & Strategic Services Signature — Date (DD/MM/YY): Feb 20, 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 — Date (DD/MM/YY): Feb 20, 2024

Council Per Diem Claim Report

Name:	Councillor Hughes

Month	Year
January	2024

Date	Description	Time (# of Hours)	Full/Half Day DM Event	Total
Jan 17 2024	Seniors Advisory Committee Meeting	2	Half Day	$ 100.00
Jan 20 2024	DM - Opening of Kitchen Academy	1	DM Event	$ 50.00
Jan 29 2024	Red Tape Reduction Week Event	1	Half Day	$ 100.00
				$ -
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			Total Per Diem Claim:	$ 250.00

Full Day Events:	0
Half Day Events:	2
DM Events:	1

Sheena Hughes
Sheena Hughes (Feb 20, 2024 14:19 MST)
Authorized By

Feb 20, 2024
Date

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 04/03/24 Month: February Year: 2024

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 @ 0.64/km	Other Transportation & Parking *	Accommodations *	Airfare*	Councillor 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		1221	1222	1222		ACCT	Cost Ctr	CAT 2 Project	CAT4
08/02/24	UDI/CHBA Leadership Meeting									-				100.00				100.00	6005	1010	516106	
21/02/24	Edmonton Region Waste Advisory Minimization Committee									-				100.00				100.00	6005	1010	516106	
21/02/24	Edmonton Region Waste Advisory Minimization Committee	St. Albert	Edmonton-East	Return	44.00					28.16								28.16	6140	1010	516106	
29/02/24	Internal Audit Subcommittee Meeting									-				100.00				100.00	6005	1010	516106	
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Sub-Total $ 328.16

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 @ 0.64/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	
29/02/24	udemy - Master Adobe Lightroom Classic & Lightroom CC									-						18.89		18.89	6100	1010	516106	A5	Career Develop
29/02/24	udemy - After Effects CC Masters: VFX, Motin Graphics, Animation+									-						20.99		20.99	6100	1010	516106	A5	Career Develop
29/02/24	udemy - The Complete Divi Course for WordPress									-						18.89		18.89	6100	1010	516106	A5	Career Develop
29/02/24	udemy - Adobe Photoshop CC Complete Course + NEW Generative AI Tools									-						24.14		24.14	6100	1010	516106	A5	Career Develop
29/02/24	udemy - Adobe Photoshop CC - Advanced Training Course									-						52.49		52.49	6100	1010	516106	A5	Career Develop
29/02/24	udemy - Adobe Photoshop CC - Essentials Training Course									-						47.24		47.24	6100	1010	516106	A5	Career Develop
29/02/24	udemy - Data Science and Machine Learning Bootcamp with R									-						20.99		20.99	6100	1010	516106	A5	Career Develop
29/02/24	udemy - Macroeconomics: A Comprehensive Economics Course									-						20.99		20.99	6100	1010	516106	A5	Career Develop

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 04/03/24 Month: February Year: 2024

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Sub-Total $ 224.62

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 04/03/24 Month: February Year: 2024

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 @ 0.64/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
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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 @ 0.64/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	CAT2	CAT3
11/02/24	Staples Grand Re-Opening - DM									-				50.00				50.00	6005	1010	516106	1125
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 04/03/24 Month: February Year: 2024

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Sub-Total $ 50.00

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 04/03/24 Month: February Year: 2024

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
03/02/24	Home Internet - Shaw/Rogers	70.00	6404	1010	516106	N/A	Mobile Dev
13/02/24	Mobile Device - Virgin Mobile	55.00	6404	1010	516106	N/A	Mobile Dev

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)									
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Sub-Total $ -

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted 04/03/24 Month February Year 2024

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 04/03/24 Month: February Year: 2024

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)									
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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. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)
4. For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.
5. Expense claims must be submitted within 10 days of the following month
6. Incomplete expense claims will not be processed
7. Per Diems (claim for attendance at specified events per C-CC-03) are taxable and paid at a rate of $100 for less than or equal to 4 hours, or $200 for greater than 4 hours.
8. Meals claimed without receipts for travel outside of the Capital region follow the rates and conditions outlined in the Council Policy C-CC-03 Council Remuneration and Expense Reimbursement

Grand Total Expenses	$	727.78
Less: BMO MasterCard	$	-
Less: Expenses Paid	$	-
Net to be paid to: Councillor Hughes	$	727.78

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted 04/03/24 Month February Year 2024

Authorizations & Approvals | **Councillor Hughes** | **February** | **2024**

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): Mar 4, 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.

Sheena Hughes (Mar 4, 2024 12:10 MST)

Council Member's Signature — Date (DD/MM/YY): Mar 4, 2024

Accounts Payable

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

Lynda Lavallee (Mar 5, 2024 08:39 MST)

Accounts Payable Personnel Signature — Date (DD/MM/YY): Mar 5, 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

Anne Victoor (Mar 5, 2024 16:32 MST)

Director - Financial & Strategic Services Signature — Date (DD/MM/YY): Mar 5, 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 — Date (DD/MM/YY): Mar 5, 2024

Council Per Diem Claim Report

Name:	Councillor Hughes

Month	Year
February	2024

Date	Description	Time (# of Hours)	Full/Half Day DM Event	Total
Feb 8 2024	UDI/CHBA Leadership Meeting	3	Half Day	$ 100.00
Feb 11 2024	Staples Grand Re-opening - Deputy Mayor Event	1.5	DM Event	$ 50.00
Feb 21 2024	Edmonton Region Waste Advisory Minimization Committee	2	Half Day	$ 100.00
Feb 29 2024	Internal Audit Subcommittee Meeting	2	Half Day	$ 100.00
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			Total Per Diem Claim:	$ 350.00

Full Day Events:	0
Half Day Events:	3
DM Events:	1

Sheena Hughes
Sheena Hughes (Mar 4, 2024 12:10 MST)

Authorized By

Mar 4, 2024

Date

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 23/04/24 Month: March Year: 2024

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 @ 0.64/km	Other Transportation & Parking *	Accommodations *	Airfare*	Councillor 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		1221	1222	1222		ACCT	Cost Ctr	Project	CAT 2 CAT4
04/03/24	IASC Subcommittee Meeting									-				100.00				100.00	6005	1010	516106	
05/03/24	IASC Subcommittee Meeting									-				100.00				100.00	6005	1010	516106	
08/03/24	IASC Meeting									-				100.00				100.00	6005	1010	516106	
11/03/24	Annual Meeting w/Chamber of Commerce									-				100.00				100.00	6005	1010	516106	
20/03/24	SAC Meeting									-				100.00				100.00	6005	1010	516106	
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Sub-Total $ 500.00

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 @ 0.64/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	Project	CAT 2 CAT4
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 23/04/24 Month: March Year: 2024

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										-								-
										-								-

Sub-Total $ -

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted 23/04/24 Month March Year 2024

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 @ 0.64/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
										-								-				
										-								-				
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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 @ 0.64/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	CAT2	CAT3
13/03/24	Grade 6 Gov't Field Trip - DM									-				50.00				50.00	6005	1010	516106	1125
										-								-				
										-								-				
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 23/04/24 Month: March Year: 2024

										-								-

Sub-Total $ 50.00

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 23/04/24 Month: March Year: 2024

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
03/03/24	Home Internet - Shaw/Rogers	70.00	6404	1010	516106	N/A	Mobile Dev
13/03/24	Mobile Device - Virgin Mobile	55.00	6404	1010	516106	N/A	Mobile Dev

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)									
									-
									-
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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 Hughes

Date Submitted 23/04/24 Month March Year 2024

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted: 23/04/24 Month: March Year: 2024

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****

1. Detailed receipts must be provided for all expenses. Credit Card slips are NOT an acceptable form of receipt.
2. Meter parking may be claimed without a receipt up to $15. Clearly indicate (Meter) in the nature of event/meeting section.
3. A standard mileage chart is available for use. All kilometers are based on St. Albert Place (SAP) as the base location. It is recommended to claim mileage based on the standard mileage chart. If you choose to claim specific mileage you must provide a Google map printout with the detailed to and from locations identified (i.e. Street Address)
4. For meal expenses, the event/description section should clearly indicate the nature of the meeting and indicate the # of people in attendance. The full names of the participants should be listed on the back of the receipt.
5. Expense claims must be submitted within 10 days of the following month
6. Incomplete expense claims will not be processed
7. Per Diems (claim for attendance at specified events per C-CC-03) are taxable and paid at a rate of $100 for less than or equal to 4 hours, or $200 for greater than 4 hours.
8. Meals claimed without receipts for travel outside of the Capital region follow the rates and conditions outlined in the Council Policy C-CC-03 Council Remuneration and Expense Reimbursement

Grand Total Expenses	$	675.00
Less: BMO MasterCard	$	-
Less: Expenses Paid	$	-
Net to be paid to: Councillor Hughes	$	675.00

Council Member Monthly Expense Claim Form

Select From List

Do not enter in "Grey" cells

Name: Councillor Hughes

Date Submitted 23/04/24 Month March Year 2024

Authorizations & Approvals | **Councillor Hughes** | **March** | **2024**

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): Apr 23, 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.

Sheena Hughes
Sheena Hughes (Apr 23, 2024 10:09 MDT)

Council Member's Signature — Date (DD/MM/YY): Apr 23, 2024

Accounts Payable

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

L. Lavallee
L. Lavallee (Apr 23, 2024 10:11 MDT)

Accounts Payable Personnel Signature — Date (DD/MM/YY): Apr 23, 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

Anne Victory (Apr 23, 2024 11:36 MDT)

Director - Financial & Strategic Services Signature — Date (DD/MM/YY): Apr 23, 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 — Date (DD/MM/YY): Apr 23, 2024

Council Per Diem Claim Report

Name:	Councillor Hughes

Month	Year
March	2024

Date	Description	Time (# of Hours)	Full/Half Day DM Event	Total
2024-03-04	Internal Audit Subcommittee Meeting	4	Half Day	$ 100.00
2024-03-05	Internal Audit Subcommittee Meeting	4	Half Day	$ 100.00
2024-03-08	Internal Audit Meeting	1	Half Day	$ 100.00
2024-03-11	Annual Meeting with Chamber of Commerce	2.5	Half Day	$ 100.00
2024-03-13	Grade 6 Field Trip	1	DM Event	$ 50.00
2024-03-20	Seniors Advisory Committee Meeting	2.5	Half Day	$ 100.00
				$ -
				$ -
				$ -
				$ -
				$ -
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				$ -
				$ -
				$ -
				$ -
			Total Per Diem Claim:	$ 550.00

Full Day Events:	0
Half Day Events:	5
DM Events:	1

Sheena Hughes
Sheena Hughes (Apr 23, 2024 10:09 MDT)

Apr 23, 2024

Authorized By **Date**