Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 19/06/25 Month April Year 2025

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
02/04/25	YAC									-				100.00				100.00	6005	1010	516108	
25/04/25	Bust Tour Exec Leadership & YAC									-				100.00				100.00	6005	1010	516108	
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Sub-Total $ 200.00

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 Joly

Date Submitted 19/06/25 Month April Year 2025

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Sub-Total $ -

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 19/06/25 Month April Year 2025

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
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 19/06/25 Month April Year 2025

Sub-Total	$ -

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 19/06/25 Month April Year 2025

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
17/04/25	Home Internet - Telus	70.00	6404	1010	516108	N/A	Mobile Dev
27/04/25	Mobile Device - Telus	55.00	6404	1010	516108	N/A	Mobile Dev
10/04/25	Office & Operating - Squarespace (Council blog hosting)	293.30	6502	1010	516108	N/A	Office/Ope

Sub-Total $ 418.30

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 Joly

Date Submitted 19/06/25 Month April Year 2025

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	$	618.30
Less: BMO MasterCard	$	-
Less: Expenses Paid	$	-
Net to be paid to: Councillor Joly	$	618.30

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 19/06/25 Month April Year 2025

Authorizations & Approvals **Councillor Joly** **April** **2025**

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

06/19/2025

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.

Natalie Joly

Natalie Joly (Jun 20, 2025 08:13 MDT)

Council Member's Signature

06/20/2025

Date (DD/MM/YY)

Accounts Payable

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

Yukiko Shionoya

Yukiko Shionoya (Jun 23, 2025 09:55 MDT)

Accounts Payable Personnel Signature

06/23/2025

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

Stanley Chan (Jun 23, 2025 13:45 MDT)

Director - Financial & Strategic Services Signature

06/23/2025

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

William Fletcher (Jun 23, 2025 13:47 MDT)

City Manager Signature

06/23/2025

Date (DD/MM/YY)

Council Per Diem Claim Report

Name:	Councillor Joly

Month	Year
April	2025

Date	Description	Time (# of Hours)	Full/Half Day DM Event	Total
2025-04-02	YAC		Half Day	$ 100.00
2025-04-25	Bus Tour Executive Leadership & YAC		Half Day	$ 100.00
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
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				$ -
				$ -
				$ -
				$ -
			Total Per Diem Claim:	$ 200.00

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

Natalie Joly 06/20/2025

Natalie Joly (Jun 20, 2025 08:13 MDT)

Authorized By **Date**

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 04/06/25 Month: May Year: 2025

General Council Related Business

Date (DD/MM/YY)	Nature of Event/Meeting	In-Region Mileage Claim based on Chart From	To	One Way /Return	Mileage Claim km's (From Chart)	Out-of-Region Mileage Claim (or In-Region, specific mileage) From	To	One Way /Return	Mileage Claim km's-Specific	Mileage Amount @ 0.66/km	Other Transportation & Parking *	Accommodations *	Airfare*	Councillor Per Diems*	Meals *	Registration /Event Ticket *	General Expenses *	Total	GL Coding ACCT	Cost Ctr	CAT 2 Project	CAT4
								CAT7_		1220	1220	1225	1226		1221	1222	1222					
07/05/25	YAC									-				100.00				100.00	6005	1010	516108	
08/05/25	YAC Interviews									-				100.00				100.00	6005	1010	516108	
15/05/25	Joint City School boards meeting									-				100.00				100.00	6005	1010	516108	
27/05/25	ICFSP Prep Meeting									-				100.00				100.00	6005	1010	516108	
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Sub-Total $ 400.00

Professional Development

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 @ 0.66/km	Other Transportation & Parking *	Accommodations *	Airfare*	Per Diems*	Meals *	Conference or Course Registration /Event Ticket *	General Expenses *	Total	GL Coding ACCT	Cost Ctr	CAT 2 Project	CAT4
								CAT7_		1221	1221	1222	1226	1216	1227	1225	1224					
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 04/06/25 Month May Year 2025

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Sub-Total $ -

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 04/06/25 Month: May Year: 2025

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 @ 0.66/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 @ 0.66/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
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 04/06/25 Month: May Year: 2025

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Sub-Total $ -

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 04/06/25 Month: May Year: 2025

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
17/05/25	Home Internet - Telus	70.00	6404	1010	516108	N/A	Mobile Dev
27/05/25	Mobile Device - Telus	55.00	6404	1010	516108	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 Joly

Date Submitted: 04/06/25

Month: May

Year: 2025

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 04/06/25 Month: May Year: 2025

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	$ 525.00
Less: BMO MasterCard	$ -
Less: Expenses Paid	$ -
Net to be paid to: Councillor Joly	$ 525.00

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted: 04/06/25 Month: May Year: 2025

Authorizations & Approvals **Councillor Joly** **May** **2025**

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

2025-06-04
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.

Natalie Joly
Natalie Joly (Jun 4, 2025 12:09 MDT)
Council Member's Signature

2025-06-04
Date (DD/MM/YY)

Accounts Payable

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

Yukiko Shionoya
Yukiko Shionoya (Jun 5, 2025 09:53 MDT)
Accounts Payable Personnel Signature

2025-06-05
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 5, 2025 10:25 MDT)
Director - Financial & Strategic Services Signature

2025-06-05
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

William Fletcher (Jun 5, 2025 10:35 MDT)
City Manager Signature

2025-06-05
Date (DD/MM/YY)

Council Per Diem Claim Report

Name:	Councillor Joly

Month	Year
May	2025

Date	Description	Time (# of Hours)	Full/Half Day DM Event	Total
2025-05-07	YAC		Half Day	$ 100.00
2025-05-08	YAC interviews		Half Day	$ 100.00
2025-05-15	Joint City School boards meeting		Half Day	$ 100.00
2025-05-27	ICFSP Prep Meeting		Half Day	$ 100.00
				$ -
				$ -
				$ -
				$ -
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				$ -
			Total Per Diem Claim:	$ 400.00

Full Day Events:	0
Half Day Events:	4
DM Events:	0

Natalie Joly 2025-06-04

Natalie Joly (Jun 4, 2025 12:09 MDT)

Authorized By **Date**

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 17/07/25 Month June Year 2025

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 @ 0.66/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
04/06/25	Youth Advisory Committee Meeting									-				100.00				100.00	6005	1010	516108	
05/06/25	Inter-City Forum on Social Policy June Meeting									-				200.00				200.00	6005	1010	516108	
05/06/25	Inter-City Forum on Social Policy June Meeting					St. Albert	Airdrie	Return	582.00	384.12								384.12	6140	1010	516108	
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 17/07/25 Month June Year 2025

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Sub-Total $ -

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 @ 0.66/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 @ 0.66/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
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Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly

Date Submitted 17/07/25 Month June Year 2025

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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
17/06/25	Home Internet - Telus	70.00	6404	1010	516108	N/A	Mobile Dev
27/06/25	Mobile Device - Telus	55.00	6404	1010	516108	N/A	Mobile Dev

Sub-Total $ 125.00

BMO MasterCard Expenses

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

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly Date Submitted 17/07/25 Month June Year 2025

									-
									-
									-
									-

Sub-Total $ -

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	$ 809.12
Less: BMO MasterCard	$ -
Less: Expenses Paid	$ -
Net to be paid to: Councillor Joly	$ 809.12

Authorizations & Approvals **Councillor Joly** **June** **2025**

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.

Council Member Monthly Expense Claim Form

	Select From List
	Do not enter in "Grey" cells

Name: Councillor Joly Date Submitted: 17/07/25 Month: June Year: 2025

Preparer's Signature 07/17/2025
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.

Natalie Joly
Natalie Joly (Jul 17, 2025 15:16 MDT)
Council Member's Signature 07/17/2025
Date (DD/MM/YY)

Accounts Payable

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

Yukiko Shionoya
Yukiko Shionoya (Jul 21, 2025 11:39 MDT)
Accounts Payable Personnel Signature 07/21/2025
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 (Jul 22, 2025 10:12 MDT)
Director - Financial & Strategic Services Signature 07/22/2025
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

William Fletcher (Jul 22, 2025 11:08 MDT)
City Manager Signature 07/22/2025
Date (DD/MM/YY)

Council Per Diem Claim Report

Name:	Councillor Joly

Month	Year
June	2025

Date	Description	Time (# of Hours)	Full/Half Day DM Event	Total
2025-06-04	Youth Advisory Committee Meeting		Half Day	$ 100.00
2025-06-05	Inter-City Forum on Social Policy June Meeting		Full Day	$ 200.00
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
				$ -
			Total Per Diem Claim:	$ 300.00

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

Natalie Joly
Natalie Joly (Jul 17, 2025 15:16 MDT)

Authorized By

07/17/2025

Date