

Council Expense Claim Form

NAME: Barry Turner

FOR THE MONTH: June 16-July 15

DATE: July 16, 2018

Expenditure Details

Function/Event: <u>Sturgeon County Mayor's Golf tourney</u>	
Date(s) of Event: <u>22-Jun</u>	Registration Expense: \$ <u>-</u>
Duration of Event: _____	Lodging Expense: \$ <u>-</u>
Location of Event: _____	Total Meal Expense: \$ <u>-</u>
Mileage Traveled (km): <u>42</u>	Mileage (\$) Expense: \$ <u>21.21</u>
Other: _____	Incidental Expense: _____
Per Diem: _____	

GL: 01-720-11-272069 Expense: \$ 21.21

Function/Event: <u>Sturgeon County Recreation public engagment session</u>	
Date(s) of Event: <u>25-Jun</u>	Registration Expense: \$ <u>-</u>
Duration of Event: _____	Lodging Expense: _____
Location of Event: <u>Lily Lake Resort</u>	Total Meal Expense: \$ <u>-</u>
Mileage Traveled (km): <u>78.6</u>	Mileage (\$) Expense: \$ <u>39.69</u>
Other: _____	Incidental Expense: \$ _____
Per Diem: _____	

GL: 01-720-11-272069 Expense: \$ 39.69

Function/Event: <u>Lord Strathcona's Horse CoC parade</u>	
Date(s) of Event: <u>27-Jun</u>	Registration Expense: _____
Duration of Event: _____	Lodging Expense: _____
Location of Event: _____	Total Meal Expense: _____
Mileage Traveled (km): <u>48</u>	Mileage (\$) Expense: \$ <u>24.24</u>
Other: _____	Incidental Expense: _____
Per Diem: _____	

GL: 01-720-11-272069 Expense: \$ 24.24

Function/Event: <u>Morinville Christian School Awards</u>	
Date(s) of Event: <u>27-Jun</u>	Registration Expense: _____
Duration of Event: _____	Lodging Expense: _____
Location of Event: <u>St. Albert</u>	Total Meal Expense: \$ <u>-</u>
Mileage Traveled (km): <u>43.4</u>	Mileage (\$) Expense: \$ <u>21.92</u>
Other: _____	Incidental Expense: _____
Per Diem: _____	


GL: 01-720-11-272069 Expense: \$ 21.92

Meal Allowance (maximum \$41.55 daily):	
Breakfast \$9.20 Lunch \$11.60 Dinner \$20.75	Total Expenses: \$ <u>107.06</u> ✓
Mileage per Kilometre \$0.50/km	Total Per Diem: <u>0.00</u>

Per Diem:	
0-2 Hours	\$80.000
2-4 Hours	\$100.000
4-8 Hours	\$200.000
8+ Hours	\$300.000
Conference Rate	\$200.000

Note: Receipts must be attached / submitted with this Expense Claim. All expenses must be approved by the Mayor.

Claimant's Signature: 

Reviewed: 

Deputy Mayor Approval: 

Cheque #: _____

Payroll: \$ 100

A/P: 24223

Council Expense Claim Form

Name: Barry Turner

For the Month: June 15 - July 16

Date: July 16, 2018

Expenditure Details

Function/Event: <u>1 Canadian Mechanized Brigade CoC</u>		Registration Expense: \$	-
Date(s) of Event: <u>28-Jun</u>		Lodging Expense: \$	-
Duration of Event: _____		Total Meal Expense: \$	-
Location of Event: _____		Mileage (\$) Expense: \$	24.24
Mileage Traveled (km): <u>48</u>		Incidental Expense: _____	
Other: _____			
Per Diem: _____			

GL: 01-720-11-272059 Expense: \$ 24.24

Function/Event: <u>Morinville Chamber Golf Tournament</u>		Registration Expense: \$	-
Date(s) of Event: <u>12-Jul</u>		Lodging Expense: _____	
Duration of Event: _____		Total Meal Expense: \$	-
Location of Event: <u>Cardiff</u>		Mileage (\$) Expense: \$	6.97
Mileage Traveled (km): <u>13.8</u>		Incidental Expense: \$	
Other: _____			
Per Diem: _____			

GL: 01-720-11-272069 Expense: \$ 6.97

Function/Event: <u>Pioneer Days Parade</u>		Registration Expense: _____	
Date(s) of Event: <u>14-Jul</u>		Lodging Expense: _____	
Duration of Event: _____		Total Meal Expense: _____	
Location of Event: <u>Gibbons</u>		Mileage (\$) Expense: \$	26.06
Mileage Traveled (km): <u>51.6</u>		Incidental Expense: _____	
Other: _____			
Per Diem: <u>100</u>			

GL: 01-720-11-272069 Expense: \$ 26.06


Function/Event: <u>Mayor Cell phone</u>		Registration Expense: _____	
Date(s) of Event: _____		Lodging Expense: _____	
Duration of Event: _____		Total Meal Expense: \$	-
Location of Event: _____		Mileage (\$) Expense: \$	-
Mileage Traveled (km): _____		Incidental Expense: \$	77.90
Other: _____			
Per Diem: _____			

GL: 01-820-11-282067 Expense: \$ 77.90

Meal Allowance (maximum \$41.55 daily):		Total Expenses: \$ 135.17 ✓
Breakfast \$9.20	Lunch \$11.60	Dinner \$20.75
Mileage: per kilometre	\$0.505	
Per Diem:		
0-2 Hours	\$50.00	
2-4 Hours	\$100.00	
4-8 Hours	\$200.00	
8+ Hours	\$300.00	
Conference Rate	\$200.00	
	Total Per Diem: 100.00 ✓	

Note: Receipts must be attached/submitted with this Expense Claim. All expenses must be approved by the Mayor.

Claimant's Signature: 

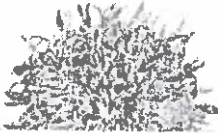
Reviewed: 

Deputy Mayor Approval: 

Cheque #: _____

Payroll: _____

A/P: _____



June 16, 2018
 BARRY TURNER
 Account number:



Mobile services (continued)

BARRY A. TURNER
Charges for 780

Service continues on a month-to-month basis after your commitment end date of Dec 26, 2018

Monthly and other charges (Jun 17 to Jul 16)

SharePlus 55 - Nationwide Talk	\$55.00	
Call Display		
Call Waiting		
Conference Calling		
Voice Mail 3		
Family Calling LD		
No charge LD: CAN to CAN		
SMS Unlimited		
AB 911 Government Fee	\$0.44	
Total monthly and other charges		\$55.44

Add-ons (Jun 17 to Jul 16)

L&R 10GB Shareable Data	\$75.00	
Total add-ons	\$75.00	$\times 25\% = 18.75$

Usage charges

Free airtime refers to non-chargeable minutes that are not part of your included minutes, and may include bonus minutes, evening and weekend calling, 911 calls, etc.

Long Distance - Domestic Phone	\$0.00
Free 89:00 (MIN)	
Total used 89:00 (MIN)	
Text Msg - Sent	\$0.00
Total used 525 (Msg)	
Data Usage - Mobile High Speed	\$0.00
Total used 100.020 (MB)	
Picture Messaging - Picture Receive	\$0.00
Total used 69 (Pic)	
Text Msg - Received	\$0.00
Total used 682 (Msg)	
Data Usage	\$0.00
Total used 1,458.438 (MB)	
Picture Messaging - Pictures	\$0.00
Total used 0 (Pic)	
Picture Messaging - Video Receive	\$0.00
Total used 3 (video)	
Video Messaging	\$0.00
Total used 2 (video)	
Local Airtime - Phone (minutes)	\$0.00
Included 278:00 (MIN)	
Free 0:00 (MIN)	
Total used 288:00 (MIN)	
Total usage charges	\$0.00

74.19
 3.71 gst
 77.90

Total before taxes	\$130.44
GST	\$6.52
Total for 780 405-3071, with taxes	\$136.96

Council Expense Claim Form

Name: Lawrence Giffin

For the Month: June 16 to July 15

Date: July 17, 2018

Expenditure Details

Function/Event: <u>Traffic Advisory Committee</u>		Registration Expense: \$	-
Date(s) of Event: <u>26-Jun</u>		Lodging Expense: \$	-
Duration of Event: <u>1</u>		Total Meal Expense: \$	-
Location of Event: <u>Town hall</u>		Mileage (\$) Expense: \$	-
Mileage Traveled (km): _____		Incidental Expense: _____	
Other: _____			
Per Diem: <u>50</u>			

GL: _____ Expense: \$ _____

Function/Event: <u>SASPCN Open House</u>		Registration Expense: \$	-
Date(s) of Event: <u>18-Jun</u>		Lodging Expense: _____	
Duration of Event: _____		Total Meal Expense: \$	-
Location of Event: <u>St. Albert</u>		Mileage (\$) Expense: \$	19.19
Mileage Traveled (km): <u>38</u>		Incidental Expense: _____	
Other: _____			
Per Diem: _____			

GL: 01-720-11-272073 Expense: \$ 19.19

Function/Event: <u>Edmonton Garrison Business Luncheon</u>		Registration Expense: _____	
Date(s) of Event: <u>22-Jun</u>		Lodging Expense: _____	
Duration of Event: _____		Total Meal Expense: _____	
Location of Event: <u>Edmonton Garrison</u>		Mileage (\$) Expense: \$	25.25
Mileage Traveled (km): <u>50</u>		Incidental Expense: _____	
Other: _____			
Per Diem: _____			

GL: 01-720-11-272073 Expense: \$ 25.25

Function/Event: _____		Registration Expense: _____	
Date(s) of Event: _____		Lodging Expense: _____	
Duration of Event: _____		Total Meal Expense: \$	-
Location of Event: _____		Mileage (\$) Expense: \$	-
Mileage Traveled (km): _____		Incidental Expense: _____	
Other: _____			
Per Diem: _____			

GL: _____ Expense: \$ _____

Meal Allowance (maximum \$41.55 daily):	Expense: \$ _____
Breakfast \$9.20 Lunch \$11.60 Dinner \$20.75	Total Expenses: \$ <u>44.44</u>
Mileage per Kilometre \$0.505	Total Per Diem: <u>50.00</u>
Per Diem:	
0-2 Hours \$50.00	
2-4 Hours \$100.00	
4-8 Hours \$200.00	
8+ Hours \$300.00	
Conference Rate \$200.00	

Note: Receipts must be attached/submitted with this Expense Claim. All expenses must be approved by the Mayor.

Claimant's Signature: 

Reviewed: 

Mayor Approval: 

Cheque #: _____

Payroll: 50

A/P: 44.44

Council Expense Claim Form

Name: Sarah Hall

For the Month: July

Date: June 16 - July 15 2018

Expenditure Details

Function/Event: <u>EMRB Integrated Transportation Working Group</u>		Registration Expense: \$	-
Date(s) of Event: <u>29-Jun</u>		Lodging Expense: \$	-
Duration of Event: <u>5</u>		Total Meal Expense: \$	-
Location of Event: <u>Edmonton</u>		Mileage (\$) Expense: \$	57.57
Mileage Traveled (km): <u>114</u>		Incidental Expense:	
Other:			
Per Diem: <u>200</u>			

GL: <u>01-720-11-272074</u>		Expense: \$	57.57
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Function/Event:		Registration Expense: \$	-
Date(s) of Event:		Lodging Expense:	-
Duration of Event:		Total Meal Expense: \$	-
Location of Event:		Mileage (\$) Expense: \$	-
Mileage Traveled (km):		Incidental Expense: \$	
Other:			
Per Diem:			

GL:		Expense: \$	-
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Function/Event:		Registration Expense:	
Date(s) of Event:		Lodging Expense:	
Duration of Event:		Total Meal Expense:	
Location of Event:		Mileage (\$) Expense: \$	-
Mileage Traveled (km):		Incidental Expense:	
Other:			
Per Diem:			

GL:		Expense: \$	-
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Function/Event:		Registration Expense:	
Date(s) of Event:		Lodging Expense:	
Duration of Event:		Total Meal Expense: \$	-
Location of Event:		Mileage (\$) Expense: \$	-
Mileage Traveled (km):		Incidental Expense:	
Other:			
Per Diem:			


GL:		Expense: \$	-
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Meal Allowance maximum \$41.55 daily):	Total Expenses: \$	57.57
<i>Breakfast: \$9.20 Lunch: \$11.60 Dinner: \$20.75</i>	Total Per Diem:	200.00

Mileage:	per Kilometre	\$0.515
Per Diem:	0-2 Hours	\$80.00
	2-4 Hours	\$100.00
	4-8 Hours	\$200.00
	8+ Hours	\$300.00
Conference Rate		\$200.00

Note: Receipts must be attached / submitted with this Expense Claim. All expenses must be approved by the Mayor.

Claimant's Signature: 

Reviewed: 

Mayor Approval: 

Cheque #: _____

Payroll: 200

A/P: 57.57

