

EMPLOYEE NAME: Deanna Lennox

ADDRESS: [REDACTED]

MONTH ENDING: August 2020



CITY OF
FORT SASKATCHEWAN

INSTRUCTIONS:

Original itemized receipts must be attached and submitted to Accounts Payable.

MISSING RECEIPTS: If a receipt is missing, claim the appropriate per diem. If no per diem applies, please complete and attach a Request for Reimbursement form (see MyFort) to this claim. The Request for Reimbursement form cannot be used when a per diem rate is available.

Allowances for Mileage, Meals, and Accommodation (Per Diems) must be claimed on PAGE 2, and attached to this expense claim.

Education and Academic Courses must be claimed on PAGE 3, and attached to this expense claim.

Claim Receipted Expenses (EXCLUDING EDUCATION) in this Area

Receipt Date <i>yyyy-mm-dd</i>	Vendor Name	Description	GL Code (Fund-Object-Function) <i>#-####-#####</i>	Total before GST & HST	GST	HST	Total
2020-08-09	Rogers	August Cell Phone	1.2137.11219	\$ 55.44	\$ 2.77		\$ 58.21
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
	Mileage*	See PAGE 2 for details	---	\$ -	N/A	N/A	\$ -
	Per Diems*	See PAGE 2 for details	---	\$ -	N/A	N/A	\$ -
	Education / Academic	See PAGE 3 for details	---	\$ -	\$ -	\$ -	\$ -
				\$ 55.44	\$ 2.77	\$ -	\$ 58.21

* GST cannot be claimed on allowances and per diems

I, Deanna Lennox, HEREBY CERTIFY THAT:

the expenditures claimed in this report are compliant with the Employee Business Expense Policy FIN-012-A and have not been claimed through any other source. I am aware that any false or improper claim may be grounds for disciplinary action up to and including, but not limited to, termination.

Signed: Approved as per attached email

Date: Sep 8, 2020

APPROVAL (IMMEDIATE SUPERVISOR):

I have reviewed the expenditures claimed. I have confirmed that these expenditures are compliant with the Employee Business Expense Policy FIN-012-A. Therefore, I do hereby approve this expense claim for payment.

Brenda Molter, Director Legislative Services	Approved as per attached email.	08-Sep-20
Print Name of Immediate Supervisor	Supervisor's Signature	Date

Account number



Bill number

22026160906

Bill date

Aug 09, 2020

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Wireless 780-909-2487

JERRY LENNOX

Monthly charges	Aug 10 - Sep 09	\$
ShareEverything 4GB LDCY Plan		55.00
Alberta Gov't 911 fee		0.44
Total monthly charges		55.44

Usage summary	Ending Aug 09, 2020	\$
Usage type	You used	
Voice (S) Unlimited Shared Minutes		✓
Voice Between Us Calling		✓
Voice Weeknights/Weekend		✓
Data (S) LTE Shared Internet - Included		✓
Additional Data Usage		-
Mtg (S) Messaging Bundle - Received		✓
Messaging Bundle - Sent		✓
Total usage		0.00

Total before taxes	55.44
GST: 815781448	2.77
Total for Wireless 780-909-2487	58.21

Legend: (S) Shared Services | ✓ No charge

From: [Jennifer Chapman](#)
Sent: September 8, 2020 10:09 AM
To: [Accounts Payable](#)
Subject: Deanna Lennox August Expense Claim
Attachments: August Cell Phone.pdf; August Expense Claim Form 2020.pdf

Accounts Payable,

Attached is the completed and approved August expense claim and cell phone bill for Deanna Lennox. Below are the emailed approvals from Deanna and Brenda Molter.

Thank you,

Jennifer Chapman
Administrative Assistant, Legislative Services
City of Fort Saskatchewan
10005 102 St
Fort Saskatchewan, AB T8L 2C5
P: 780.992.6227
jchapman@fortsask.ca

From: Brenda Molter <BMolter@fortsask.ca>
Sent: September 8, 2020 9:53 AM
To: Jennifer Chapman <JChapman@fortsask.ca>
Subject: RE: August Expense Claim - Approval Required

Jennifer, I approve this monthly cell phone expense claim from Councillor Lennox.

Thanks,
Brenda

From: Jennifer Chapman <JChapman@fortsask.ca>
Sent: September 8, 2020 8:43 AM
To: Brenda Molter <BMolter@fortsask.ca>
Subject: FW: August Expense Claim - Approval Required

Good morning Brenda,

Attached is the August expense claim form and cell phone bill for Deanna Lennox. Please respond by reply email that you approve of the expenses. Deanna has given her approval below.

Thank you,

Jennifer Chapman
Administrative Assistant, Legislative Services
City of Fort Saskatchewan
10005 102 St
Fort Saskatchewan, AB T8L 2C5
P: 780.992.6227
jchapman@fortsask.ca

From: Deanna Lennox <dlennox@fortsask.ca>
Sent: September 8, 2020 8:38 AM
To: Jennifer Chapman <JChapman@fortsask.ca>
Subject: Re: August Expense Claim - Approval Required

Jennifer,

I approve the attached expenses for August 2020.

Thank you,
Deanna

Deanna Lennox
Councillor
City of Fort Saskatchewan
780-909-2487

On Sep 8, 2020, at 7:45 AM, Jennifer Chapman <JChapman@fortsask.ca>
wrote:

Good morning Deanna,

Please respond by reply email that you approve of the attached expense for August 2020.

Thank you,

Jennifer Chapman
Administrative Assistant, Legislative Services
City of Fort Saskatchewan
10005 102 St
Fort Saskatchewan, AB T8L 2C5
P: 780.992.6227
jchapman@fortsask.ca

<August Cell Phone.docx>
<August Expense Claim Form 2020.xlsx>