

EMPLOYEE NAME: Lisa Makin

ADDRESS: [Redacted]

MONTH ENDING: October 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 Received 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
2020-10-03	Bell Mobility	October Cell Phone	1-2137-11220	\$ 93.44	\$ 4.67		\$ 98.11
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
							\$ -
	Mileage*	See PAGE 2 for details	1.2133.11220	\$ 40.40	N/A	N/A	\$ 40.40
	Per Diems*	See PAGE 2 for details	---	\$ -	N/A	N/A	\$ -
	Education / Academic	See PAGE 3 for details	---	\$ -	\$ -	\$ -	\$ -
				\$ 133.84	\$ 4.67	\$ -	\$ 138.51

* GST cannot be claimed on allowances and per diems

I, Lisa Makin, 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: Nov 30, 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.	01-Dec-20
Print Name of Immediate Supervisor	Supervisor's Signature	Date

11:14 ↗



Service details

Oct 03 - Nov 02, 2020



(780) 340-0054

Monthly charges and credits	\$93.44	▼
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Usage charges & credits	\$0.00	▼
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Subtotal (before taxes)	\$93.44
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[Learn more about charges & credits](#)

From: [Jennifer Chapman](#)
Sent: December 1, 2020 8:05 AM
To: [Accounts Payable](#)
Subject: L. Makin October Expense Claim Approved
Attachments: Oct Cell Phone.pdf; Lisa's Expense Claim Form Oct 2020.xlsx

Good morning,

Attached is the completed and approved October expense claim form and cell phone bill for Lisa Makin.

Below are the emailed approvals from Lisa Makin 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: December 1, 2020 7:57 AM
To: Jennifer Chapman <JChapman@fortsask.ca>
Subject: FW: L. Makin October Expense Claim

Jennifer, I approve of this monthly cell phone expense for Councillor Makin.

Thanks,
Brenda

From: Jennifer Chapman <JChapman@fortsask.ca>
Sent: November 30, 2020 2:42 PM
To: Brenda Molter <BMolter@fortsask.ca>
Subject: L. Makin October Expense Claim

Good afternoon Brenda,

Please respond by reply email that you approve of the attached expenses for Councillor Lisa Makin.

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: Lisa Makin <lmakin@fortsask.ca>
Sent: November 30, 2020 2:32 PM
To: Jennifer Chapman <JChapman@fortsask.ca>
Subject: Re: October Expense Claim - Approval Required

Approved thanks

Sent from my iPhone

On Nov 30, 2020, at 1:51 PM, Jennifer Chapman <JChapman@fortsask.ca> wrote:

Hi Lisa,

Please respond by reply email that you approve of the attached expenses for October.

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: Jennifer Chapman
Sent: November 26, 2020 3:03 PM
To: Lisa Makin <lmakin@fortsask.ca>
Subject: October Expense Claim - Approval Required

Good afternoon Lisa,

Please respond by reply email that you approve of the attached expenses for October. Due to the mileage you are claiming, be advised that on your

approval of the expense you are making the following declaration:

I, Lisa Makin, declare that my vehicle insurance coverage is not less than \$1,000,000 public liability and property damage.

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

<Lisa's Expense Claim Form Oct 2020.xlsx>

<Oct Cell Phone.docx>



CITY OF FORT SASKATCHEWAN

Council Per Diem

Conferences/Seminars/Workshops/Meetings (CSWM)

Name: Lisa Makin		Date: 01-Oct-20		Payroll No.: [REDACTED]		
Date of CSWM	Details & Location of CSWM	Duration: No. of days including travel time	X	Honorarium: <i>half day</i> - 2 to 4 hrs. (\$100.00) / <i>full day</i> - in excess of 4 hrs. (\$200.00)	Code to account	Total
01-Oct-20	Budget Deliberations October 1, 2020	1	x	\$ 200.00	1.2041.11220	\$ 200.00
Net Claim						\$ 200.00

Signature: _____

Approved via attached email

Approved by: _____

Approved as per attached email.

Director, Legislative Services

Date Submitted for Payment: _____

2020-10-02

From: [Brenda Molter](#)
Sent: October 2, 2020 9:02 AM
To: [Jennifer Chapman](#)
Subject: FW: L. Makin Per Diem Form - October 1, 2020
Attachments: Per Diem Form Lisa Makin.xls

Jennifer, I approve of the attached budget deliberation per diem expense claim for Councillor Makin.

Thanks,
Brenda

From: Jennifer Chapman <JChapman@fortsask.ca>
Sent: October 2, 2020 8:27 AM
To: Brenda Molter <BMolter@fortsask.ca>
Subject: L. Makin Per Diem Form - October 1, 2020

Good morning Brenda,

Please respond by reply email that you approve the attached per diem for Councillor Lisa Makin.

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: Lisa Makin <lmakin@fortsask.ca>
Sent: October 1, 2020 9:23 PM
To: Jennifer Chapman <JChapman@fortsask.ca>
Subject: Re: Per Diem Form - October 1, 2020

Approved

Sent from my iPhone

On Oct 1, 2020, at 4:12 PM, Jennifer Chapman <JChapman@fortsask.ca> wrote:

Good afternoon Councillor Makin,

Please respond by reply email that you approve of the attached per diem for October 1, 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

<Per Diem Form Lisa Makin.xls>

Capital Region Assessment Services Commission

0753

753

Date	Invoice	Payee: Ms. L. Makin Amount	Discount	Paid	Total
01 Oct 20		164.00	0.00	164.00	164.00
15 Oct 20		164.00	0.00	164.00	328.00