

EMPLOYEE NAME: Lisa Makin

ADDRESS: [Redacted]

MONTH ENDING: July 2022



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 (CRA rates), Meals, and Accommodation (Alberta Per Diems) must be claimed on PAGE 2, and attached to this expense claim.

<https://open.alberta.ca/publications/travel-meal-and-hospitality-expenses-policy-expenses-policy>

<https://www.canada.ca/en/revenue-agency/services/tax/businesses/topics/payroll/benefits-allowances/automobile/automobile-motor-vehicle-allowances/reasonable-kilometre-allowance.html>

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 yyyy-mm-dd | Vendor Name | Description | GL Code (Fund-Object-Function) #-####-##### | Total before GST & HST | GST | HST | Total |
|-----------------------------------------------------|----------------------|------------------------|---------------------------------------------------|---------------------------|---------|------|-----------|
| 2022-07-03 | Bell Mobility | July Cell Phone | 1.2137.11220 | \$ 95.75 | \$ 4.25 | | \$ 100.00 |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | | | | | | | \$ - |
| | 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 | --- | \$ - | \$ - | \$ - | \$ - |
| * GST cannot be claimed on allowances and per diems | | | | \$ 95.75 | \$ 4.25 | \$ - | \$ 100.00 |

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 Electronically via Email

Date: Sep 6, 2022

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 | Electronically Approved via Email | 06-Sep-22 |
| Print Name of Immediate Supervisor | Supervisor's Signature | Date |

1:55



Service details

Jul 03 - Aug 02, 2022



(780) 340-0054

Monthly charges and credits ^

Monthly charges (Aug 03 to Sep 02)

- SB Ultd Shr Essential 2-yr 25 \$85.00
- SPC Plan \$16.00
- Alberta Government 911 fee \$0.95

Credits

- Promotional Discount (expires) CR \$1.00
- Promotional Discount (expires) CR \$2.00
- Multiline Discount (expires) CR \$25.00

Hardware charges & credits i \$35.63 v

Usage charges & credits \$0.00 v

Subtotal \$109.58
(before taxes)

[Learn more about charges & credits](#)

From: [Brenda Molter](#)
Sent: September 6, 2022 2:25 PM
To: [Jennifer Chapman](#)
Subject: FW: L. Makin July Expense Claim - Approval Required
Attachments: L. Makin July Cell.pdf; L. Makin July Expense Claim Form.xlsx

Jennifer, I approve of the attached monthly expense claim for Councillor Makin.

Thanks,
Brenda

From: Jennifer Chapman <JChapman@fortsask.ca>
Sent: September 6, 2022 2:16 PM
To: Brenda Molter <BMolter@fortsask.ca>
Subject: L. Makin July Expense Claim - Approval Required

For your review and approval.

From: Lisa Makin <lmakin@fortsask.ca>
Sent: September 6, 2022 2:10 PM
To: Jennifer Chapman <JChapman@fortsask.ca>
Subject: Re: July Expense Claim - Approval Required

Approved

Get [Outlook for iOS](#)

From: Jennifer Chapman <JChapman@fortsask.ca>
Sent: Tuesday, September 6, 2022 12:41:22 PM
To: Lisa Makin <lmakin@fortsask.ca>
Subject: July Expense Claim - Approval Required

Good afternoon,

Please review the attached expense claim form and respond by reply email that you approve the July expense.

Thank you,

Jennifer Chapman

Legislative Officer | Legislative Services Department

City of Fort Saskatchewan

10005 102 ST, Fort Saskatchewan, AB T8L 2C5

Direct: 780-992-6227

Website: fortsask.ca

Statement

| | | | |
|-------------------------------------|---------------------------|-----------------------|---------------------|
| Account Name: | CHAPMAN, JENNIFER | Card Number: | xxxx-xxxx-xxxx-1835 |
| Company Name: | CITY OF FORT SASKATCHEWAN | Account Limit: | \$ 2,500.00 |
| Employee ID: | ██████████ | | |
| Statement Date (MM/DD/YYYY): | 07/15/2022 | Currency: | CANADIAN DOLLAR |

Statement Summary:

Report any items which do not agree with your records within 30 days of the statement date.

| | |
|-----------------------------|-------------|
| Payments: | \$ 0.00 |
| Adjustments: | \$ 0.00 |
| Net Purchases: | \$ 1,518.17 |
| Cash Advance: | \$ 0.00 |
| Fees: | \$ 0.00 |
| Other Charges: | \$ 0.00 |
| New Account Balance: | \$ 1,518.17 |

For your records only. No payment required.

Transaction Summary:

| Trans Date | Posting Date Trans ID | Description | Pre-Tax Amount Auth # | Total Tax | Trans Amount |
|------------|--------------------------|------------------------------------|--------------------------|--------------|--------------|
| | | | | | |
| 07/05 | 07/06 429752948 | ALBERTA MUNICIPALITIES EDMONTON AB | \$ 625.00 025167 | \$ 31.25 (e) | \$ 656.25 |
| | | | | | |

Councillor Lisa Makin registration to attend the Alberta Municipalities 2022 Convention September 21-23 in Calgary, Alberta.

From: [Alberta Municipalities Event Registration](#)
Sent: July 5, 2022 7:39 AM
To: [Jennifer Chapman](#)
Subject: Registration Confirmed - 2022 Alberta Municipalities Convention



Dear Jennifer,

Please save this email for future reference.

Event: 2022 Alberta Municipalities Convention

Number in Party: 1

Date: September 21-23, 2022

Location: Calgary TELUS Convention Centre

Address: 136 8 Ave SE, Calgary, Alberta, T2G 0K6, Canada

Group Confirmation Number: DXNB6VKVPKC

Group Registrant 0 (Lisa Makin)

Confirmation Number: Y7NMTWP9VML

| Lisa Makin | | | | | | | | |
|------------------------|-----------------------|---------------|---------------------------------------|----------------|--------------------|-----------------|----------------|----------|
| Order Date | Invoice | Order Type | Item | Item Type | Amt Ordered | Amt Paid | Amt Due | |
| 05-Jul-2022 7:38 AM MT | CONV22-0082-0175-0178 | Online Charge | Full Convention Registration - Member | Admission Item | CAD 600.00 | CAD 600.00 | CAD | 0.00 |
| 05-Jul-2022 7:38 AM MT | CONV22-0082-0175-0178 | Online Charge | GST #R106694623 | Tax | CAD 31.25 | CAD 31.25 | CAD | 0.00 |
| 05-Jul-2022 7:38 AM MT | CONV22-0082-0175-0178 | Online Charge | Host City Reception | Session | CAD 25.00 | CAD 25.00 | CAD | 0.00 |
| | | | | | Amt Ordered | Amt Paid | Amt Due | |
| | | | | | Total | CAD 656.25 | CAD 656.25 | CAD 0.00 |

| Order: DKN45XWMYS3 | Invoice: CONV22-0082-0175-0178 | Order Date: 05-Jul-2022 7:38 AM MT | |
|---------------------------------------|---------------------------------------|-------------------------------------------|------------|
| Item | Price | Quantity | Amount |
| Full Convention Registration - Member | CAD 600.00 | 1 | CAD 600.00 |
| Host City Reception | CAD 25.00 | 1 | CAD 25.00 |
| GST #R106694623 | 5.00% | | CAD 31.25 |
| | | Order Total | CAD 656.25 |

To view or modify the online registration for anyone in your group, [Click here](#). You will be asked to enter your name and the group confirmation number shown above.



Alberta Municipalities

Strength In Members

If you no longer want to receive emails from Alberta Municipalities Events, please [Opt-Out](#).

Statement

| | | | |
|-------------------------------------|---------------------------|-----------------------|---------------------|
| Account Name: | MAKIN, LISA | Card Number: | xxxx-xxxx-xxxx-1546 |
| Company Name: | CITY OF FORT SASKATCHEWAN | Account Limit: | \$ 5,000.00 |
| Employee ID: | ██████████ | | |
| Statement Date (MM/DD/YYYY): | 07/15/2022 | Currency: | CANADIAN DOLLAR |

Statement Summary:

Report any items which do not agree with your records within 30 days of the statement date.

| | |
|-----------------------------|----------|
| Payments: | \$ 0.00 |
| Adjustments: | \$ 0.00 |
| Net Purchases: | \$ 83.00 |
| Cash Advance: | \$ 0.00 |
| Fees: | \$ 0.00 |
| Other Charges: | \$ 0.00 |
| New Account Balance: | \$ 83.00 |

For your records only. No payment required.

Transaction Summary:

| Trans Date | Posting Date Trans ID | Description | Pre-Tax Amount Auth # | Total Tax | Trans Amount |
|------------|--------------------------|-----------------------------------------|--------------------------|-------------|--------------|
| 06/17 | 06/20 427765749 | ENHANCE IT EMBROIDERY FORT SASKATCHE AB | \$ 79.05 012741 | \$ 3.95 (e) | \$ 83.00 |

| | | |
|----------------------|---------------------|-----------------|
| TOTAL CREDITS | xxxx-xxxx-xxxx-1546 | \$ 0.00 |
| TOTAL DEBITS | xxxx-xxxx-xxxx-1546 | \$ 83.00 |

Enhance It Embroidery Ltd.

10404 - 98 Avenue
Fort Saskatchewan, AB T8L 1X3

Sales Receipt

| | |
|------------|----------|
| Date | Sale No. |
| 2022-06-17 | 6175 |

| |
|---------------------------------------------------------------------------------|
| Sold To |
| City of Fort Saskatchewan 10005 102 Street, Fort Saskatchewan, T8L 2e5 |

| | | |
|-------------------|-----------------------|----------------|
| Cheque No. | Payment Method | Project |
| | | |

| Description | Qty | Rate | Amount |
|---------------------------------------|-----|----------------|----------------|
| WOMEN'S TRITIUM SHELL GST on sales | 1 | 80.00 5.00% | 80.00 4.00 |
| Total | | | \$84.00 |

----- TRANSACTION RECORD -----
ENHANCE IT EMBROIDERY LTD
 10404 98 AVENUE
 FORT SASKATCHAB

Purchase

Jun 17, 2022 16:01:28
 MASTERCARD *****1546
 Entry Chip (C)
 Ref#: 342-1D2168540882027
 Auth#: 012741 Response: 01-027
 Order: MGO1655503286848
 Username: Enhancelt

Amount \$ 83.00

A0000000041010 Mastercard
 TVR 0000008000 TSI E800

Approved

Important: Retain this copy for your record

GST/HST No. 714744299