

LEGISLATIVE ASSEMBLY OF ALBERTA - 28th and 29th LEG

Member EDR 2015-16

036 - Edmonton-Highlands-Norwood - Mason, Brian

For Expenses Processed January 1 - March 31, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$548.56	\$2,180.21
MLA Parking Cap - \$	\$900.00	\$75.26	\$227.91
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Member Travel (Extraordinary Accommodation) - \$		\$522.63	\$724.18
Taxi, Bus Travel - \$		\$5.52	\$5.52
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$19.76	\$19.76
Other			
Hosting - \$		\$228.75	\$275.87
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)			
Travel Accommodations Allowance (days; 10 max)	10	4	5
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000		
Special Trips (5 trips per year) - NF	5		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF			
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		

\$ - Reported on CAD dollar amount of actual expense

NF - Reported based on number of trips, number of kilometres, or number of days

Budget reported is the maximum annual amount that may be claimed

GST is not included in the \$ amounts as the Legislative Assembly is GST/HST - exempt

Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 183 OF 259
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-36-B MASON

- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
INVOICE DATE 03/01/16
DATE DE LA FACTURE
INVOICE NO. 0006379844
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
B	MASON				000431055130 02/07/16	HUSKY OIL EDMONTON AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	60.6	.82	47.61	2.30 2.30	49.91 49.91 .61- 49.30
					000430710212 01/08/16	CENTEX BOWNESS CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	25.2	.80	20.14	1.01 1.01	21.15 21.15
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	85.8		67.75	3.31	71.06 .61- 70.45
BKDN TOTALS / TOTAUX CODIFICATION 01-36							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	85.8		67.75	3.31	
							BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL					71.06 .61- 70.45

BLG871

GST-HST REG. NO / NO ENRG TPS-TVH R104164223
QST ID. NO / NO ID TVQ 1001439118

FLEET MANAGEMENT SERVICES DETAIL
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 196 OF 276
 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
 DIV-36-B MASON
 - -
 - -
 - -
 - -

CLIENT NO.
 NO DU CLIENT
 INVOICE DATE 01/01/16
 DATE DE LA FACTURE
 INVOICE NO. 0006352800
 NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
B	MASON				000427490597 11/27/15	HUSKY OIL EDMONTON	AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	68.8	1.11	72.72 3.54 3.54 76.26 76.26 72.03	75.57
UNIT TOTAL / TOT UNITE								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	68.8	72.72	3.54	76.26 75.57
BKDN TOTALS / TOTAUX CODIFICATION 01-36								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	68.8	72.72	3.54	76.26 75.57
								BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL				76.26 75.57

FLEET MANAGEMENT SERVICES DETAIL
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 161 OF 232
 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
 DIV-36-B MASON

- -
 - -
 - -
 - -

CLIENT NO.
 NO DU CLIENT
 INVOICE DATE 02/01/16
 DATE DE LA FACTURE
 INVOICE NO. 0006365629
 NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
B	MASON				000429214611 12/17/15	HUSKY OIL EDMONTON	AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	66.6	1.05	66.57	3.24 3.24 69.81 69.81 .67- 69.14
UNIT TOTAL / TOT UNITE								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	66.6	66.57	3.24	69.81 .67- 69.14
BKDN TOTALS / TOTAUX CODIFICATION 01-36								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	66.6	66.57	3.24	69.81 .67- 69.14
								BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL				69.81 .67- 69.14

Element Fleet Management



BPDF290001

FLEET MANAGEMENT SERVICES DETAIL
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 187 OF 209
 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
 DIV-36-B MASON

CLIENT NO.
 NO DU CLIENT
 INVOICE DATE
 DATE DE LA FACTURE
 INVOICE NO.
 NO DE LA FACTURE

04/01/16
 0006353974

UNIT NO NO D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. NO. DE SERIE	CARD NO. NO. DE CARTE	KN AUTHORIZE KN AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVO	TOTAL DUE MONTANT TOTAL DU
B	MASON				000432703948 03/10/16	HUSKY OIL EDMONTON	AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	58.8 07	54.36 2.64 57.00 54.36 2.64 57.00 59.77 56.41		
					000431604022 02/27/16	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	27.7 76	20.05 1.00 21.05 20.05 1.00 21.05		
					000432324820 02/26/16	IMPERIAL OIL STRATHMORE	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	51.8 70	37.44 1.87 39.31 37.44 1.87 39.31		
					000432898551 02/23/16	HUSKY OIL EDMONTON	AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	62.4 99	58.86 2.86 61.72 58.86 2.86 61.72 62.24 61.10		
UNIT TOTAL / TOT UNITE								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	290.7	170.71 8.37 179.08 1.21- 177.87		
BIGN TOTALS / TOTAUX CODIFICATION 01-36								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	290.7	170.71 8.37		
								BIGN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL				179.08 1.21- 177.87

BLG874

GST-HST REG. NO / NO ENRG TPS-TVH R104164223
 GST ID. NO / NO ID TVA 1001439118

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Mason

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Fuel expense

debit



TRANSACTION RECORD
Riverview Husky
9208 Jasper Ave
Edmonton AB
T5H 3T1
(780) 421-0551

Batch 5874 Register# 65 Slip# 65216347
DATE: 2016/07/30 TIME: 08:55:57
ST #86517884 Cashier: 1

Item	Amount
37 Fuel - Full Service	\$40.28
38.393 litres @ \$1.049	

TAX INCLUDED:	\$1.72	
Sub Total:		\$40.28
Total:		\$40.28

DEBIT \$40.28

Purchase \$ 40.28

Chequing

XXXXXXXXXXXX

Interac

07/30/2016 08:55:57

626565ED 65 RESP 001 ISO:00

Ref #4703100100 Auth

AID: A000000277010

TVR: 0060006000 ST: 800

Approved
Customer Copy/Copie du client

Earn FREE fuel faster.
Register today at my.huskyRewards.ca

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Mason

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Fuel expense

Lebit

COPY



Niagra Car Wash

4315 118th Ave
Edmonton AB T5W 1A5
(780) 479-3715

GST# E35530747 Merchant ID: 4971941

Receipt 71357566

Type: SALE

Qty	Name	Price	Total
1.94	Gas	\$ 1.219	\$ 72.58
	Pump:	2	
	Litres:	59.539	
	Price / Litre:	\$ 1.219	

Subtotal	\$ 72.58
GST / HST Fuel	\$ 3.46

Total	\$ 72.58
Purchase	\$ 72.58

Chequing

#*****

Interac

07/31/2015 12:57:13

520771ED 71 RESP:001 ISO:00

Ref:172001001088 Auth:

AID: A000C002771010

TVR: 0080008000 TSI: E800

Approved

7/31/15

12:57:17 PM

Pos:71 Cashier:17 Store:5207

Earn FREE fuel faster.
Register today at myHuskyRewards.ca

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Mason

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☐ Group: _____

Purpose:

Fuel expense

610 Invalid Fleet card,
used DEBIT.



----- TRANSACTION CARD -----
Rive view husky
9208 Jasper Ave
Edmonton AB
T5H 3T4
(780) 424-0551

Station Batch: F-01501701 \$110.00
V. 5312 6. 65241900

TIME: 15:25:47
CASHIER: 17834

Item Amount

94 Fuel - Full Service \$65.50
62-004 litres @ \$1.00

Sub Total:

Total:

\$65.50

DEBIT \$65.50

Purchase 1 66.50

Change

Interac

01/01/2015 15:25:47

03650521 63 REF: 001 350.00

Ref: 01501100100 AUTH: [REDACTED]

UID: AGC00002771010

IVR: 0001003000 SI: 800

Approved
Customer Copy/ Copie du client

Earn 10% to 1 faster.
Register today at huskyrewards.ca

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Aileen Machell

Expense Category: Member Parking

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☐ Group:

Purpose:



DELTA

BOW VALLEY

209 - 4th Avenue S.E., Calgary, Alberta, T2G 0C6

Tel: 403-266-1980 Fax: 403-205-5460

Room: 0809
 Folio: [REDACTED]
 Cashier: 183
 Arrival: 01-07-16
 Departure: 01-08-16

Date	Description	Additional Information	Charges	Credits
------	-------------	------------------------	---------	---------

01-07-16	Valet Parking		35.00	
01-07-16	Parking GST		1.75	
01-08-16	Visa	XXXXXXXXXXXX [REDACTED] XX/XX		

GST Summary

Registration No: 826085417

Room

F&B

Other

Total

Total

Balance Due

0.00 CDN

Guest Signature: _____

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.



The American Express® Corporate Card Statement of Account

www.americanexpress.ca
Amex Bank of Canada
Corporate Service Centre
PO Box 7000 Station B
Willowdale (Ontario) M2K 2R6



Prepared For
B MASON MLA
LEGIS ASSEMBLY OF AB

Membership Number
XXXX-XXXX-XXXX-XXXX
Date
December 16, 2015

Page 1 of 3

Statement includes payments and charges received by December 16, 2015.

Please see "About Your Statement" section for important information.

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

Listing of Charges and Credits

Amount \$

November 17 Payment Received Thank You

14.00
CR

New Transactions for B MASON MLA

Amount \$

December 11 IMPARK00020264U EDMONTON
Goods or Services

6.00

Total New Transactions for B MASON MLA

6.00

† Please detach here †

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash

000296



B MASON MLA
LEGIS ASSEMBLY OF AB
9820-107 ST NW FLR4
EDMONTON AB
T5K 1E7

Amex Bank of Canada/
Banque Amex du Canada
PO BOX 2000
West Hill ON M1E 5H4





The American Express® Corporate Card Statement of Account

www.americanexpress.ca
Amex Bank of Canada
Corporate Service Centre
PO Box 7000 Station B
Willowdale (Ontario) M2K 2R6



Prepared For

B MASON MLA
LEGIS ASSEMBLY OF AB

Membership Number

XXXX-XXXX

Date

January 16, 2016

Page 1 of 2

Statement includes payments and charges received by January 16, 2016

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

1915

Listing of Charges and Credits

Amount \$

New Transactions for B MASON MLA

Amount \$

December 18	EDM EPARK PAY MACHIN EDMONTON GOVERNMENT SERVICES	6.00
Total New Transactions for B MASON MLA		6.00

↑ Please detach here ↑

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash

000281



B MASON MLA
LEGIS ASSEMBLY OF AB
9820-107 ST NW FLR4
EDMONTON AB
T5K 1E7

Amex Bank of Canada/
Banque Amex du Canada
PO BOX 2000
West Hill ON M1E 5H4





The American Express® Corporate Card Statement of Account

www.americanexpress.ca
Amex Bank of Canada
Corporate Service Centre
PO Box 7000 Station B
Willowdale (Ontario) M2K 2R6

Prepared For
B MASON MLA
LEGIS ASSEMBLY OF AB

Membership Number
XXXX-XXXX-XXXX-XXXX

Date
February 16, 2016



Page 1 of 2

Statement includes payments and charges received by February 16, 2016

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Listing of Charges and Credits

Amount \$

New Transactions for B MASON MLA

Amount \$

February 1	IMPARK00020001U Goods or Services	EDMONTON	15.00
Total New Transactions for B MASON MLA			15.00



↑ Please detach here ↑

AMERICAN EXPRESS®

Payment Options
PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.
• Phone and Internet banking arranged through your financial institution
• Your local bank branch
• Automatic banking machines
Do Not Enclose Cash

000284



B MASON MLA
LEGIS ASSEMBLY OF AB
9820-107 ST NW FLR4
EDMONTON AB
T5K 1E7

Amex Bank of Canada/
Banque Amex du Canada
PO BOX 2000
West Hill ON M1E 5H4



1926



The American Express® Corporate Card Statement of Account

www.americanexpress.ca
Amex Bank of Canada
Corporate Service Centre
PO Box 7000 Station B
Willowdale (Ontario) M2K 2R6

Prepared For
B MASON MLA
LEGIS ASSEMBLY OF AB

Membership Number
XXXX-XXXX-XXXX-XXXX

Date
March 17, 2016



Page 1 of 2

Statement includes payments and charges received by March 17, 2016

Please see "About Your Statement" section for important information.

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

1785

New Transactions for B MASON MLA

Amount \$

February 23	EDM EPARK PAY MACHIN EDMONTON GOVERNMENT SERVICES	3.50
February 25	INDIGO PARK CANADA CALGARY Goods or Services	5.00
March 2	AHS PARKING 45202269 EDMONTON GOVERNMENT SERVICES	6.75
Total New Transactions for B MASON MLA		15.25

† Please detach here †

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash

000269



B MASON MLA
LEGIS ASSEMBLY OF AB
9820-107 ST NW FLR4
EDMONTON AB
T5K 1E7

Amex Bank of Canada/
Banque Amex du Canada
PO BOX 2000
West Hill ON M1E 5H4



LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Aileen Machell

Expense Category: Member Travel

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☐ Group:

Purpose:



209 - 4th Avenue S.E., Calgary, Alberta, T2G 0C6
Tel: 403-266-1980 Fax: 403-205-5460

Room: 0809
Folio: [REDACTED]
Cashier: 183
Arrival: 01-07-16
Departure: 01-08-16

Date	Description	Additional Information	Charges	Credits
01-07-16	Room Charge		159.00	
01-07-16	Destination Marketing Fee (DMF)		4.77	
01-07-16	Rooms - Federal Tax - GST		8.19	
01-07-16	Tourism Levy		6.55	

01-08-16 Visa

XXXXXXXXXXXX [REDACTED]

XX/XX

GST Summary

Registration No: 826085417

Room [REDACTED]

F&B [REDACTED]

Other [REDACTED]

Total [REDACTED]

Total

Balance Due

0.00 CDN

Guest Signature: _____

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.



209 - 4th Avenue S.E., Calgary, Alberta, T2G 0C6
Tel: 403-266-1980 Fax: 403-205-5460

Brian Mason

Room: [REDACTED]
Folio: [REDACTED]
Cashier: 181
Arrival: 11-28-15
Departure: 11-29-15

Date	Description	Additional Information	Charges	Credits
11-28-15	Room Charge		119.00	
11-28-15	Destination Marketing Fee (DMF)		3.57	
11-28-15	Rooms - Federal Tax - GST		6.13	
11-28-15	Tourism Levy		4.90	
11-29-15	Debit Card	[REDACTED]		133.60

GST Summary

Registration No: 826085417

Room 6.13

F&B 0.00

Other 0.00

Total 6.13

Total 133.60 133.60

Balance Due 0.00 CDN

DELTA BOW VALLEY
209 - 4TH AVENUE S E
CALGARY, AB T2G 0C6
403-266-1980

TERM ID: A4297980
EMPLOYEE ID: 181

BATCH#: 665
SHIFT#: 001

Sale

INVT: 0000000004

INTERAC Account Type: Chequing
SE01: 665001001004

Application Label: Interac

AID: A0000002771010

TVR: 00 00 00 00 00

TSI: E8 00

***** [REDACTED] *****

Total: CAD\$ 133.60

APPROVED [REDACTED]
001/00

29-Nov -15

09:52:53

Guest Signature: _____

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.



Medicine Hat Lodge

RESORT CASINO CONVENTION CENTRE
HEALTH SPA & INDOOR WATERSLIDE PARK

1051 Ross Glen Drive S.E., Medicine Hat, Alberta T1B 3T8

Brian Mason

Page # 1
Res. # [REDACTED]
Checked in Tue Jan 27/15 - 9:52am
Checked out Wed Jan 28/15 - 9:54am
Nights 1
Room Rate 109.00
Room 223

Date	Description	Reference	Charges	Credits
Jan27	GOVERNMENT RATE		109.00	
Jan27	GST		5.45	
Jan27	Room Tax		4.36	
Jan27	Destination Marketing Fee		3.27	
Jan28	PAID BY MASTERCARD			
			0.00	

Thank you for staying with us. Please come again!
Call 1 (800) 661-8095 to make your next reservation with us.

Our G.S.T. # is 103576021RT0002

Charge Summary:

GST [REDACTED]
Room Tax [REDACTED]

MEDICINE HAT LODGE
1051 ROSS GLEN DR SE
MEDICINE HAT AB

CARD ***** [REDACTED]
CARD TYPE MASTERCARD
DATE 2015/01/28
TIME 9018 09:52:53
RECEIPT NUMBER
C84068040-001-138-019-0

PRE-AUTH COMPLETION
TOTAL [REDACTED]

MASTERCARD
A000000004 10 10

Phone: (403) 529-2222 Admin Fax: (403) 528-4075 Front Desk Fax: (403) 529-1538 Toll Free: 1-800-661-8095

www.medhatlodge.com



STAGEWEST Hospitality
SINCE 1944



LETHBRIDGE LODGE

HOTEL AND CONFERENCE CENTRE

Brian Mason

Room No. [REDACTED]
Arrival : 01-28-15
Departure : 01-29-15
Folio No. [REDACTED]
Conf. No. [REDACTED]
Cashier No. : 107
Custom Ref. :

Company Name:

Group Name:

Date	Description	Charges	Credits
[REDACTED]			
01-28-15	Room Charge	102.00	
01-28-15	DMF 2%	2.04	
01-28-15	GST Tax 5%	5.20	
01-28-15	Tourism Tax 4%	4.17	
01-29-15	Mastercard XXXXXXXXXXXX [REDACTED]		[REDACTED]
		Total Charges	[REDACTED]
		Total Credits	[REDACTED]
		Balance	0.00

Guest Signature: _____

Merchant ID
Transaction ID 80084
Approval Code [REDACTED]
Approval Amount 135.08

Credit Card # XXXXXXXXXXXX [REDACTED]
Credit Card Expiry XX/XX
Capture Method Swiped
Transaction Amount 135.08

Page No. 1 of 1

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Mason

Expense Category: Taxi, Bus Travel

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☐ Group: _____

Purpose:

~~Fuel expense~~
Taxi

316 MERIDIAN ROAD SE
CALGARY, AB T2A 1A2

TERMINAL ID: 314 675 007
VEHICLE ID: 0426
DRIVER ID: 8319
GST ACCOUNT #: 826041461
TRIP NUMBER: 3140319
PASSENGERS: 1

05/26/2015
START: 23:00 END: 23:04
DISTANCE: 10.00 RATE: 1

FARE AMOUNT: \$ 5.52

TAX AMOUNT: \$ 0.28

TOTAL: \$ 5.80

TIP AMOUNT: \$ _____

GRAND TOTAL: \$ _____

CASH RECEIPT

THANK YOU
909 0259 9999
WWW.THECHECKERGROUP.COM





Members' Travel Expenses Per-Diems Claim Form

Note to MLAs: Meal allowances may be claimed only for days when you were travelling in Alberta on Member business, located at least 60 kms by primary highway from your declared permanent residence, and you had incurred expenses. For the text of section 7 of the *Members' Allowances Order* and details on form completion, see reverse. Effective September 1, 2013.

B = Breakfast (\$9.20) | L = Lunch (\$11.60) | D = Dinner (\$20.75)

Member Name: Mason, Brian

Constituency: Edmonton-Highlands-Norwood

For the Month of: January

Year: 2016

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28	60 km from Perm. Res.	Lethbridge	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$19.76	\$0.99	\$20.75

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.


Member Signature


Date

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Mari Sasano

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Town Hall hosting

Town hall
Tim Hortons

Store# 2923
12820 82nd Street NW
Edmonton, AB, T5E2T2
780-406-9644

1 50 Tinbits	\$8.49
2 Take 12 Original Blend	\$37.70
Subtotal:	\$46.19
GST:	\$1.89 PST:
GrandTotal:	\$48.08
Debit:	\$48.08
Change Due:	\$0.00

Take Out

310

200 Cashier

Thanks for stopping by!

Tell us how we did at

www.telltimhortons.com 1-888-601-1616

Thu Nov 26, 2015 18:05:29

Receipt #: 12308633

GST #85988 6160 RT 0001

DEBIT *****
Account: SAVING
Card Entry:CHIP Sequence:000152
Trans Type:Purchase \$48.08
Merchant #: 030000096438
Term #: 203
Ref #: 00000129
Trace #: 00274853
Application Label: Interac
AID #: A0000002771010
TVR #: 0080008000
TSI #: F800
Auth: APPROVED

By entering a verified PIN, cardholder agrees
to pay issuer such total in accordance with issuers
agreement with CardHolder.

Guest Copy

REPRINT RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Mason

Expense Category: Hosting

For hosting, select one:

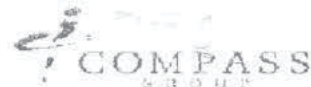
☐ Individual Constituent(s)

☒ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Meal, hosting



Leisure & Entertainment Catering

Art Gallery of Alberta
ZINC RESTAURANT
Compass-Group Canada
Art Gallery of Alberta
GST #: 88778 3355 RT0001

Art Gallery of Alberta
ZINC RESTAURANT
Compass-Group Canada
Art Gallery of Alberta
GST #: 88778 3355 RT0001

Date: Oct 09, 2015 13:35:16
Table: 28
TableTransId: 3026675
TransId: 3074816
Seats: 1,2
Server: Claire

1 Lg Pellegrino	7.00
2 Chicken	42.00
2 Pop	7.00
1 Coffee	3.25
1 Db1 Espresso	4.00
Subtotal	63.25
GST	3.16
Total	66.41
Balance	66.41

All AGA members receive 10% off
Does not include alcohol. Valid for
Zinc and the Terrace Cafe
Join today!

THANK YOU !

TYPE: PURCHASE

Date: 09 Oct 2015 13:54:20
TableTransId: 3026675
TransId : 3074816
Server : Claire E
Table : 28
Seats : 1,2

Account : DEBIT CARD
Acct Type: Chequing
Acct # : XXXXXXXXXX
Auth. # : XXXXXXXXXX
Ref. # : 074816135328 CHI

Application Label: Interac
AID: A0000002771010
TVR: 00 80 00 80 00
TSI: E8 00
Trace Number: 00385655

AMOUNT \$	66.41
TIP \$	9.96
TOTAL \$	76.37

SUCCESS

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Mason

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☒ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Meal, hosting

WHITE SPOT #302
5230 50th Avenue
Leduc, AB
T9E 6U2
780-980-1394

*** TRANSACTION RECORD ***

Trans. #: 19430
Check #: 549750
Employee #: 35
Employee Name: Kristy4040

Interac Purchase
From Chequing

AID: A0000002771010

Amount \$19.68

Tip \$2.96

TOTAL CAD \$22.64

APPROVE
00-001
WS302811/WS302011
239001001005
2015/10/18 12:59:33

TUR: 0080008000
TS1: E800

Customer Copy

THANK YOU
Come Again



CHECK # 549750 DATE 10/16/15
TABLE # 62 TIME 12:55PM

-- 4-LOUNGE : Kristy4040 --

SEAT#	ITEMS ORDERED	AMOUNT
2	CHICKEN POT PIE, fries	15.49
	DIET COKE	3.25
	SUBTOTAL	18.74
		18.74
	TOTAL	18.74

SUBTOTAL	18.74
G.S.T. %	0.94

TOTAL DUE 19.68

OF GUESTS 1

Share your experience today
and receive a coupon for
\$5 OFF your next
purchase AND CHANCES to WIN
DAILY CASH PLUS OTHER
WEEKLY PRIZES

Keep this receipt and visit
www.talktowhitespot.ca
for complete contest rules

White Spot Restaurant # 302
Leduc
G.S.T. #R105672505

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Mason

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☒ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Meal, hosting



GST#R889541298
Sorrentino's Downtown
10162 - 101 Street
(780) 424-7500

5 CAYLEN

Tbl 16/1 Chk 6 Gst 2
Dec11 15 01:18PM
*** Reprint ***

1 SM RAVIOLI	15.00
1 FEATURE ENTRE	26.00
1 COFFEE	3.00

Subtotal	44.00
GST	2.20
Amount Due	46.20

ITS NEVER TOO EARLY TO START
PLANNING YOUR CORPORATE
LUNCH OR DINNER CHRISTMAS PARTY!
SECURE ONE OF OUR PRIVATE ROOMS
TODAY! INQUIRE WITH CHRISTINE
FOR MORE INFORMATION

SORRENTINO'S DOWNTOWN
10162-100 STREET
EDMONTON, AB T5J-0P5
TEL. 780-424-7500

TERM ID: Y4652053 BATCH#: 020
EMPLOYEE ID: 5 SHIFT#: 002
CLERK NAME: 5

Sale

INV#: 000000011
INTERAC
Account Type: Chequing
Application Label: Interac
AID: A0000002771010
TVR: 00 00 00 00 00
TSI: E8 00

Amount: \$ 46.20
Tip: \$ 6.93

Total: CAD\$ 53.13

APPROVED
001/00

11-Dec-15

14:09:35

THANK YOU

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Mason

Claimant Name: Brian Gibbon

Expense Category: Hosting

For hosting, select one:

- ☒ Individual Constituent(s)
☐ Individual Stakeholder(s)
☐ Group: _____

Purpose:

hosting supplies for office

7-ELEVEN
15604 95TH AVE NW
EDMONTON AB T5P 0A4
7804842404
STORE#: 34261
GST# R119335453
Oh Thank Heaven
for 7-Eleven!

1 Drywld 2%Mlk 473ml 2.39
1 Btl Dep-No 0.10

WHOLE PIZZA FOR \$6.99
2 PIECE CHICKEN & GWEDGES FOR \$4.99
***** REPRINT *****
T#01 OP33 TRN8676 01/12/2016 08:16 AM

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian MasonClaimant Name: Brian GibbonExpense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)☐ Individual Stakeholder(s)☐ Group: _____

Purpose:

hosting supplies for office

save-on-foods #8612

Stadium

Visit www.saveonfoods.com

G.S.T #R846980878

Christie PFLS DC HOC	4.49
Chrst PFLS Blbry Brw	4.49
Nixon Honey	8.69
PLNTATION SUGAR CUBE	4.49
Stevia Sweetner	4.79 G

Sub Total \$26.95

Tax-Code	Taxable-Value	Tax-Value
GST	4.79	0.24

BALANCE DUE \$27.19

Debit \$27.19

[SAV] XXXXXXXXXXXX

TRANSACTION RECORD

SLIP # 0003125031 TERM E8612D03

** Purchase **

CAD 27.19 CHIP

DEBIT # *****

ACCOUNT Savings

RESP 001 ISO 00

DATE 01/22/2016

TIME 12:50:51

REF # 450001001047

APPL.: INTERAC

AID: A0000002771010

TVR: 8080008000

TSI: 6800

Approved

BY ENTERING A VERIFIED PIN, CARDHOLDER
 AGREES TO PAY ISSUER SUCH TOTAL IN
 ACCORDANCE WITH ISSUER'S AGREEMENT w/ THE
 CARDHOLDER

CHANGE \$0.00

 By being a More Rewards Cardholder
 You could have saved \$3.48
 You could have earned 23 points

How was your visit today?
 Tell us at www.saveonfoods.com/survey
 and enter to win a \$200
 Save On Foods gift card

100% MONEY BACK GUARANTEE
 if returned within 14 days of
 purchase with original receipt
 (some restrictions apply)

CASHIER NAME: Susan B

C0106

#5074

12:50:17

22Jan2016

S06612 R003

036 Edm-Highlands-Norwood.



An Office DEPOT[®], Inc. Company
une société d'Office DEPOT[®], Inc

COST CENTRE BILLING REPORT

REQUISITION REPORT

SOLD TO ACCOUNT NO.



ALTA LEGISLATIVE ASSEMBLY M
9718 107 ST NW
9TH FLR
EDMONTON, AB T5K 1E4

G.S.T.

R894032192

Q.S.T.

1001640701TQ0009

PERIOD ENDING

02/29/2016

ACCT MGR NO.



INVOICE NO.
COST CENTRE

J331808

SHIP TO ACCOUNT NO.



ALTA LEGISLATIVE ASSEMBLY
EDMONTON HIGHLANDS NORWOOD
6519 112 AVE
EDMONTON, AB T5W 0R4

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
REQ NO.	G67126	DATE	02/17/2016	ATTENTION	Edmonton Highlands-N	P.O.#	MLA200353	G&T ORDER NO	844840-00	

1	1	0	BX	TA100ASST	TAZO TEA ASST 24'S	7.28	CONTRACT	7.28	7.28	
---	---	---	----	-----------	--------------------	------	----------	------	------	--