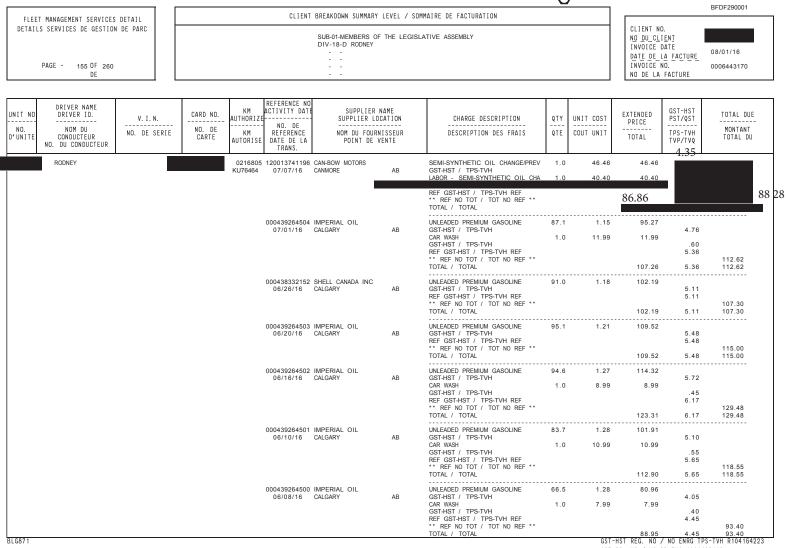
LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2016-17 018 - Calgary-Lougheed - Rodney, Dave For Expenses Processed July 1 - September 30, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)	5		
Transportation Fuel and Minor Maintenance - \$ MLA Parking Cap - \$ Other Travel - Parking - \$ Member Travel (overnight stay in constituency) - \$ Taxi, Bus Travel - \$ Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$	\$900.00	\$1,501.08 \$90.62 \$55.86	\$3,809.11 \$215.18 \$55.86
Member Travel (Meal Per Diems) - \$		\$230.95	\$1,398.38
Accommodation Edmonton Accommodation Allowance (\$23,160.00/yr max) Travel Accommodations Allowance Travel Accommodations Allowance (days; 10 max) - NF	\$23,160.00 10	\$5,790.00	\$11,580.00
Other Hosting - \$		\$667.14	\$1,712.22
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km) Constituency Travel (Kilometres) - NF Special Trips (5 trips per year) - NF	35,000 5	5,100	9,050
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	52	1	9
Other Travel Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		
Constant on CAD dellar amount of actual expanses			

\$ - 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

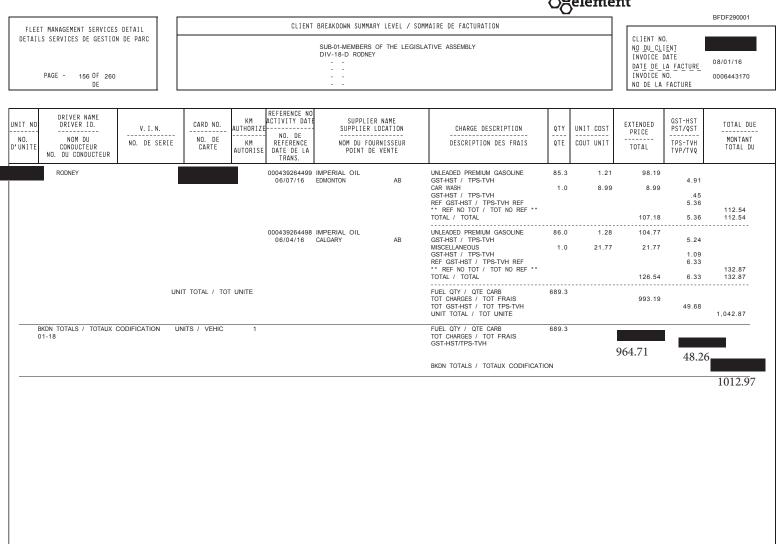
GST is not included in the \$ amounts as the Legislative Assembly is GST/HST - exempt

Element Fleet Management Relement



QST ID. NO / NO ID TVQ 1001439118

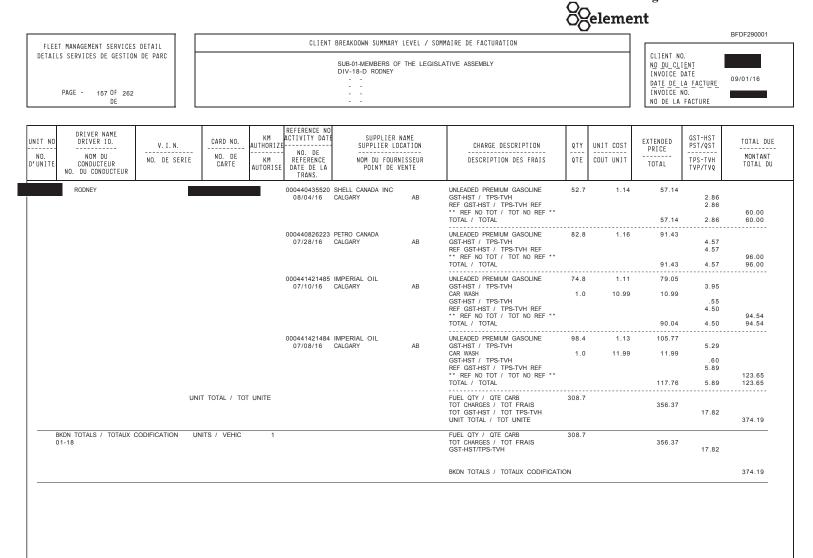
Element Fleet Management



BLG871

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

Element Fleet Management



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

BLG871

Doctor Detail

#133, 10201- Southport Road SW Calgary, Alberta, T2W 4X9 (403) 259-5881

Invoice

Date Invoice #

Invoice To DAVE RODNEY MC SIERRA LACK/TRUCK

\$180.00 + GST

P.O. No.	Terms	Project

Description	Qty	Rate	Amount
 Bronze Package [Truck/SUV/Van]; Exterior Wash (Includes Tire Dressing) Full Interior Detail (Includes Vinyl & Leather Conditioning) Full Interior Vacuum Full Interior Stampuo of Carpets Upholstry Window Glass Cleaning Cleaning of Mats (one set per customer) Doorjambs 		180,00	180,00
APPLY CARNAUBA WAX ** FULL VEHICLE ** GST On Sales		0.00 5:00%	0.00 9.00
CALGARY AB CARD TYPE VISA DATE 2016/06/21 TIME 3181 15:35:26 RECEIPT NUMBER C84068167-001-001-595-0			
PURCHASE		Total	\$189.00
160.00		Payments/Credits	\$0.00
		Balance Due	\$189.00
/isa Credit A0000000031010 FA56B16E158F83BB 000008000-E800 1F94A9C0711AA590 000008000-E800			

BURRESS ST	ne American tatement of A			Corporate S	ink of Canada ervice Centre 000 Station B
Prepared For D RODNEY EGIS ASSI	MLA EMBLY OF AB	Membership Number	Date 16, 2016		
Previcus Bal	lance Payments and Credits	New Charges ncluding Delinquency Assessment, if any New Balance \$	264		Page 1 of 3
Statement includes	payments and charges received by July 1	5, 2016		\$70.48 +GST	
Please see "Ab	pout Your Statement" section for	important information.			
Please pay	your balance in full up	on receipt of statement. Thar	nk you for your ongoi	ng membership.	
Credit Lir On July 1	mit Summary I6, 2016	Total Credit Limit \$	Available Cred	it Limit \$	
isting of Charges a	nd Credits				Amount \$
July 5	Payment Received The	ank You			
New Trans	actions for D RODNEY	MLA			Amount \$
lune 20	CalgParkAuth 2042638 GOVERNMENT SERVIC			J.	13.00
luly 8	CalgParkAuth 2057764 GOVERNMENT SERVIC	CALGARY			27.00
July 10	STAMPEDE PARKING Sporting Events	CALGARY			25.00
July 12	AHS FMC PARKING I Z GOVERNMENT SERVIC	ZE CALGARY DES			9.00
Total New	Transactions for D RO	DNEY MLA			

† Please detach here †

000278

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**

D RODNEY MLA

418 10800 97AVE

EDMONTON AB

T5K 2B6

LEGIS ASSEMBLY OF AB

Members	nip Number	
	Amount Due \$	Amount Paid \$

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



1819

The American Statement of A	Express® Corpora Account	ate Card	www.americanexpress.ca Amex Bank of Canada Corporate Service Centre PO Box 7000 Station B	
Prepared For D RODNEY MLA LEGIS ASSEMBLY OF AB	Augu	Date JSt 16, 2016	Willowdale (Ontario) M2K 2R6	
Previous Balarce Payments and Credits	New Charges including Delinquency Assessment, if any New Balance \$		Page 1 of 3	
		\$ 4.29 +	GST	
Statement includes payments and charges received by Augu	st 16, 2016			
Please see "About Your Statement" section for	r important information.			5
Please pay your balance in full up	oon receipt of statement. Than	k you for your ongoing	membership.	1887
Credit Limit Summary On August 16, 2016	Total Credit Limit \$	Available Credit L	imit \$	
Listing of Charges and Credits			Amount \$	
August 9 Payment Received Th	ank You			
New Transactions for D RODNE	YMLA		Amount \$	
August 4 AHS FMC PARKING I GOVERNMENT SERV	ZE CALGARY CES		4.50	×
Total New Transactions for D RC	DNEY MLA		1	

1 Please detach here 1

AMERICAN EXPRESS®

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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

000270



D RODNEY MLA LEGIS ASSEMBLY OF AB 418 10800 97AVE EDMONTON AB T5K 2B6

Membership Number Amount Due \$ Amount Paid \$

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



	e American Itement of	Account	oorate Card	Amex E Corporate	anexpress.ca Bank of Canada Service Centre 7000 Station B tario) M2K 2B6
Prepared For D RODNEY M FGIS ASSEM		Membership Number	ptember 16, 2016	Willowdale (On	and mercerie
Previous Balanc	e Payments and Credits	New Charges including Definquency Assessment, if any New Bala	ince \$		Page 1 of 3
	+ + +			\$15.85 + GST	
		for important information. upon receipt of statement.	. Thank you for your ongo	oing membership	
Credit Limi On Septem	t Summary ber 16, 2016	Total Credit Lim	it \$ Available Cre	dit Limit \$	
Listing of Charges and C					Amount \$
September 1	Payment Received	Fhank You			
New Transac	tions for D RODNI	EYMLA			Amount \$
August 28	AHS FMC PARKING GOVERNMENT SER			1	2.25
September 12	PARKING SERVICES GOVERNMENT SER				6.00
		CALGARY			8.40
September 15	IMPARK00030371U Goods or Services	CALGANT			

1 Please detach here 1

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





D RODNEY MLA LEGIS ASSEMBLY OF AB 418 10800 97AVE EDMONTON AB T5K 2B6

Membership Number Amount Due \$ Amount Paid\$

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



1611

	e American atement of	Express® Corpor Account	rate Card	www.americane Amex Bank Corporate Serv PO Box 700 Willowdate (Ontario	of Canada ice Centre 0 Station B
D RODNEY I	MLA EMBLY OF AB	2	July 16, 2016		
Previous Bala	ance Payments and Credits	New Charges including Definquency Assessment, if any 16, 2016	\$55	.86 +GST	Page 1 of 3
	out Your Statement" section for	or important information. pon receipt of statement. Tha	nk you for your ongo	ing membership	
riease pay	your balance in full u	pointeceipt of statement. The	ink you for your origo	ing membership.	
Credit Lin On July 10	nit Summary 6, 2016	Total Credit Limit \$	Available Crec	lit Limit \$	
Listing of Charges and	d Credits				Amount \$
July 5	Payment Received TI	hank You			
New Transa	actions for D RODNE	YMLA			Amount \$
June 21	CHECKER CABS LTE TAXICABS AND LIMO				25.99
June 21	CHECKER CABS LTE TAXICABS AND LIMO				32.66
T					
Total New T	Fransactions for D R	ODNEY MLA			

† 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

EDMONTON AB

T5K 2B6

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**

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000278 D RODNEY MLA LEGIS ASSEMBLY OF AB 418 10800 97AVE

Membership Number Amount Due \$ Amount Paid\$

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



1819



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.

16 17

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

Member N	ame: Rodney, Dave	Consti	tuency:	Cal	gary-L	ougheed	1 U 10	st East
For the Mo	onth of: June	Year: 2016	E	mplo	yee #	:		Test Est
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Mea L	 D	Subtotal	G.S.T.	Total
1	60 km from Perm. Res.	Edmonton	\boxtimes		\boxtimes	39.57	1.98	41.55
2	60 km from Perm. Res.	Edmonton			\boxtimes	39.57	1.98	41.55
3	0							
4								
5								
6	60 km from Perm. Res.	Edmonton			\boxtimes	39.57	1.98	41.55
7	60 km from Perm. Res.	Edmonton		\boxtimes	\boxtimes	39.57	1.98	41.55
8	60 km from Perm. Res.	Calgary			\boxtimes	30.81	1.54	32.35
9	60 km from Perm. Res.	Calgary			\boxtimes	30.81	1.54	32.35
10								
11							1.1.1.1	
12		54						
13								
14								
15							The second	
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17						1		
18								
19						1000		
20								
21								1
22								_h^
23								
24								
25								
26	60 km from Perm. Res.	Calgary				11.05	0.55	11.60
27		1007. (3				5151		49.4
28								1.355
29						1.5		
30								1.8
31		() () () () () () () () () ()						
l certify that	I have met the requirements of s	ection 7 of the	Gran	d To	tal	\$230.95	\$11.55	\$242.50

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

DUL

タナ



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Rodney, Dave	Constituency: Calgary-Lougheed			
Employee #:	Date: 4/19/2016			
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claimed Annually			

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

Have you provided documents evidencing your Tempora Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.	ry √ Yes	No		
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00	x 12 =	\$ 23,160.00	
Please Note: The Member is responsible for retaining all re	ecords which suppo	ort the annual amount i	dentified above.	
Claim Payment Authorization (please check)	✓ 12 Monthly F	Payments		
			the amount specified a ount is static for the ent	

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

July 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Rodney, Dave	Constituency: Calgary-Lougheed		
Employee #:	Date: 4/19/2016		
Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually			

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

Have you provided documents evidencing your Tempora Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.	ry √ Yes	No		
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00	x 12 =	\$ 23,160.00	
Please Note: The Member is responsible for retaining all re	ecords which suppo	rt the annual amount i	dentified above.	
Claim Payment Authorization (please check)	✓ 12 Monthly F	Payments		
			the amount specified a ount is static for the ent	

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

August 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Rodney, Dave	Constituency: Calgary-Lougheed
Employee #:	Date: 4/19/2016
Claim Type: Temporary Residence Accommod	lation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

Have you provided documents evidencing your Tempora Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.	ry √ Yes	No		
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00	x 12 =	\$ 23,160.00	
Please Note: The Member is responsible for retaining all re	ecords which suppo	ort the annual amount i	dentified above.	
Claim Payment Authorization (please check)	✓ 12 Monthly F	Payments		
			the amount specified a ount is static for the ent	

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

September 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016

х.

Member Name: Dave R	Edney
Claimant Name: Darlu	inn Linn
Expense Category: Hosting	
For hosting, select one:	
Individual Constituent(s)	
Individual Stakeholder(s)	
Group:	\$67.98

Purpose:

Community	Event	June 26/1.
)		0-

Eval Evergreen Communit Sobeys Bridlewood June Z Calgary AB 403.873.0101 QST# 835694399RT0001

Served by: Teodor

Welcome to Sobeys

BAKERY Full Wht Ck Cake Marb YOU SAVED \$2	00	\$49.99 (\$17.99 (
1 Reward for f		3 Miles
TOT	AL TAX	\$67.98 \$0.00
TOTAL Master Card Cash	TENDER CHANGE	\$67.98 \$67.98 \$0.00
NUM	BER OF ITEMS	2
Discounts & Spec Your Total Savir	ials	\$2.00 \$2.00 \$2.00



You could have earned an additional 6 AIR MILES with a BMO Sobeys AIR MILES MasterCard Apply today at bmosobeys.com

CLIENT ID 9303 TERMINAL ID 004	TAPPED
KA PURCHASE CAPD MastorCard	** \$ 67.98 RCPT 294000 RESP 000
DATE 06/22/2016	TIME 12:46:57 REF # 00000086
APPL. MasterCard AID AU000000041010	THE RECEIPTOR
TVP 0000003000	ISI

APPROVED

NO SIGNATURE REQUIRED

I AGREE TO PAY THE ABOVE TOTAL AMOUNT ACCORDING TO THE CARD ISSUER AGREEMENT (MERCHANI AGREEMENT IF CREDIT VOUCHER)

ler m	Iran	Store	Oper	06/22/16
4	294	5073	108	12:47:00

A PROUD CANADIAN COMPANY EUSTOMER ENQUIRIES 1-888-476-2397

Member Name: Dave Rodney	
Claimant Name: Dave Rodney	
Expense Category:	
For hosting, select one:	
Individual Constituent(s)	
Individual Stakeholder(s)	
Group:	\$19.29
Purpose:	

Constaency Astins "Public Safety" Tim Hortons.

Always Fresh. Always There. Since 1964

	2	Heartan in Hot Chusbrats	\$3.42
	1	3/4 Original Bland	
	1	Farm Sausage-Wrap	\$4.19
	1	Grilled	01.15
	1	Stk - Brek Sand	\$3.89
	1	Eng Muf /Brek	\$5.05
	1	Bcn - BELT	\$3.99
	1	Bgl-Everything /BELT	40.00
	1	Large Specialty Tea	\$1.90
	1	Earl Grey	\$1.30
	1	Double Double	
	1	LG Original Blend	\$1.90
	2	Cream	\$1.90
	3	WITH HONEY	
	Sul	ototal:	610 20
	GST	\$0.96 PST:	\$19.29
ų.	Gra	andTotal:	\$0.00
	Vis	a:	\$20.25
	Cha	nge Due:	\$20.25
	_		\$0.00
	ldK	e Out # 418 Thanks for stopping by!	100 Cashier
		Tell us how we did at	
		www.telltimhortons.com 1-888-601-	1616

Sat Jun 25,2016 06:12:20 Receipt # : 12897504 GST # 836796524

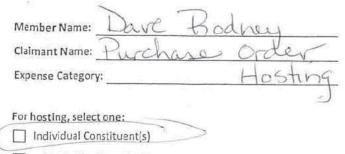
Card Entry:TAP_ICC	Sequence:000007
Trans Type:Purchase	\$20.25
Term #:	204
Application Label:	Visa Credit
AID #:	A000000031010
TVR #:	000000000
TSI #:	0000
Auth #:	APPROVED

Guest Copy

REPRINT RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA Personal Expense Claim Receipt Description	REDWATER STADIUM 1935 UXBRIDGE DRIVE NW CALGARY AB	Jo VISA How Gre
Member Name: Dave Rodney Claimant Name: Dave Rodney Expense Category: Acsting For hosting, select one:	CARD TYPE VISA DATE 2016/06/11 TIME 5280 18:08:51 SERVR ID 9065 CHECK # 248237 TABLE # 20 RECEIPT NUMBER	Redwater cic ille Stac um Plaza 1935 Uxb. idge Dr. NW Calgary, Alberta Tel: (403) 220-0222
Individual Constituent(s)	C82026042-001-577-001-0	Chaol. #: 248237
☐ Individual Stakeholder(s) ☐ Group: ♣ 94-11	PURCHASE AMOUNT \$35.37	Duplicate X
Purpose:		er: S-Cc dell Date: 06/11/2016 ble: 20 -1 Time: 18:07 Client: 4
	Visa Credit A000000031010 CD76671D11F152C8 000008000-E800 FC82E62C3963DA6C	Seafood Pasta 12.95 Seafood Pasta 19.95 Coffee 2.50 Margarita Flatbread 15.95 Surf and Turf 29.95
	000008000-F800	SUB-TOTAL: 81.30 GST: 4.07
-	APPROVED	TOTAL: 85.37
	THANK YOU CARDHOLDER COPY IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS	Join us every Tuesday for premium wine selections \$20 TUESDAY www.redwatergrille.com
		GST # 587684799

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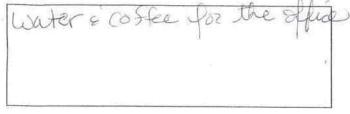


Individual Stakeholder(s)

Group:

\$114.21

Purpose:





Walmart	e Assem)	plyof	CHAR CHAT CI NUMBE	RÉDITÉ
ADDRESS ADDRESSE 311A 25 PHONE TILLEPHONE 402-235 ALL CLAINS AND RETURIED GOODS MUST TE ACCOM IOTES LES RECAMATORS ET LA MARCHANDISE RET ACCOMPAGNÉES DE CETTE FACTURE ITEM DESCRIPTION	25 Wood V PANED BY THIS BILL URINE DOWENT ETRE DESCRIPT	ALL SALESPER ALL ANOL TOUS LES DANS LES	SOIVPREPOSE A LA VEN INTS DUE AND PAYABLE & MONTANTS DUS DOIVE S 30 JOURS	WITHN 30 DAYS
	DECOM		/mconv1//	AND IN THIS I
Coffee for (office) water for office	ST# 03010 DF AS MAX MORN TAS MA	004618 006618 006618 006618 006618 006618 006618 062891 062891 062891 062891 062891 062891 062891 062891 06827 000030 068113 006827 000030 068113	800257 800257 800257 800257 809040 209040 501123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 50123 5025 50123 5025 50123 5025 5025 5025 5025 5025 5025 5025 50	TR* 05876 \$77.20 \$77.20 \$77.20 \$77.20 \$77.997720 \$77.997720 \$77.997720 \$77.9997720 \$77.7777777777777777777777777777777777

4

CUSTOMER'S SIGNATURE Shive tore

CUSTOMER COPY / EXEMPLAIRE DU CLIENT

WMA - 1758

Bodne:

Member Name: Dur Rody	ul,
Claimant Name: Dave Rod	reli
Expense Category: Hosting	2
For hosting, select one:	
Individual Constituent(s)	
Individual Stakeholder(s)	
Group:	\$ 58.41

Purpose:

YOUR RECEIPT THANK YOU CALL AGAIN REG 06-20-2016 15:39 000046 DEPT01 T1T2 \$13.95 DEPT01 T1T2 \$6.50 DEPT01 T1T2 \$8.00 DEPT01 T 1T2 T 1T2

DEPT01

TAX 1 CASH

TAX-AMT 1

\$7.50

\$11.50

\$47.45 \$2.37

\$49.82

CON	LONG TETR	Hospal
227 12	TH AVE SE LLGARY 22179697	T2G1A2 AB
1111	PURCHASE	
06-20-2016		44:37:25
EXP Det		C
Exp Date Name: DAVII A0000000031	RODNEY	ard Type VI Y1Sa Credit
Trace # 410 FS2 Inv. # 2470	217969701	genous
	RRI	N 001001287
Purchase		\$49.82
Tip		\$10.96
lotal	(\$60.78
(00) AP	PROVED.THA	NK YOU
	is copy fo records tomer copy	r your
0		1 mil

personal

LEGISLATIVE ASSEMBLY OF ALBERTA Personal Expense Claim Receipt Description Member Name: Dave Rodney Claimant Name: Purchase Order Expense Category: Hosting	Walking is in the intervention of the interventine of the interventing of the interventing of t
For hosting, select one: Individual Constituent(s) Individual Stakeholder(s) Group: \$ 109.81	
Purpose: Supplies to host Annual Picnic In the Park	
Walmart CHARGE ACHAT CRÉDITÉ NUMBER NUMBER NUMBER SSENDLy of March ADRESSAARE INA 2525 Word Voor MALCHARGE REVIEWER SSERSOUPREPOSE & LA VINTE AUDRESTATIONS ET LA MERCIMPANOSE REVOLUCE DU ES REVIEWER DOUBLES BUT NON SE DAYS. AUDRESCRIPTION MALCHARGE DOUBS MUST BE ACCOMPANIE BY THIS BUL AUCOMPLANES DE CETTE FRATURE Marchard Stratege DOUBLES BUT STRATE MALCHARGE NON SE LA MERCIMPANOISE REVOLUCE DU STRATE Aug 244 MALCHARGE NON SE LA MERCIMPANOISE REVOLUCE DU STRATE Aug 244 MALCHARGE NON SE LA MERCIMPANOISE REVOLUCE DU STRATE Aug 244 MALCHARGE DOUBS MUST BE ACCOMPANIE BY THIS BUL AUX MICHARGE DUE AND THE AUX 244 Aux MICHARGE ALLA VENTE AUX MICHARGE DUE AND THE AUX 244 MALCHARGE DOUBS MUST BE ACCOMPANIE BY THIS BUL AUX MICHARGE DUE AND THE AUX 244 Aux MICHARGE ALLA VENTE AUX MICHARGE DUE AND THE AUX 244 MALCHARGE DOUBS MUST BE ACCOMPANIE BY THIS BUL AUX MICHARGE DUE AND THE AUX 244 Aux MICHARGE DUE AND THE AUX 245 MALCHARGE DOUBS MUST BE ACCOMPANIE BY THIS BUL AUX MICHARGE DUE AND THE AUX 245 Aux MICHARGE DUE AND THE AUX 245 MALCHARGE DOUBS MUST BE ACCOMPANIES DUE AND THE AUX 255 Aux MICHARGE DUE AND THE AUX 255 MALCHARGE DOUBS MUST BE ACCOMPANIES DUE AND THE AUX 255 Aux MICHARGE DUE AND THE AUX 255 MALCHARGE DOUBS MU	GV 24X500ML 040538887928 \$2,97 D AB 9EV CRF 000030635235 \$6,48 H AB DEPD51T 068113171083 \$2,40 H GV 24X500ML 040538887928 \$2,97 D AB DEPD51T 068113171083 \$2,40 H GV 24X500ML 040538887928 \$2,97 D AB DEPD5T 068113171083 \$2,40 H AB DEPD5T 068113171083 \$2,40 H AB DEPD5T 068113171083 \$2,40 H CV 24X500ML 040538887928 \$2,97 D AB BEPOST 068113171083 \$2,40 H CV 24X500ML 040538887928 \$2,97 D AB BEPOST 068113171083 \$2,40 H TY AB DEPOST 068133171083 \$2,40 H AB DEPOST 068133171083 \$2,40 H AB OLPUST 068133171083 \$2,40 H AB OLPUST 068133171083 \$2,40 H <
Hosting Office (DFFEE 006610809040 \$9.98 Coffee (DFFEE 006610809040 \$9.98 IPSOURFINEST 062091501123 \$6.77 IPSOURFINEST 062091501123 \$7.77 IPSOURFINEST 062091501123 \$7.77 IPSOURFINEST 07.77 IPSOURFINE	CUSTOMER'S SIGNATURE DE LENT SIGNATURE DU CLIENT : Deve Podrey MAA - CUSTOMER COPY / EXEMPLAIRE DU CLIENT CUSTOMER COPY / EXEMPLAIRE DU CLIENT DR/24/16 11:17:39
Instruct	
CUSTOMER'S SIGNATURE DU CLIENT: DUCKER CONCOURSE CONCOUR	CUSTOMER'S SIGNATURE DU CLIENT :

Member Name:	Dave	Rudn	ey	
Claimant Name:	Purchase	Order	MLA	20253
Expense Category	1: Hosti	ng		

For hosting, select one:

Individual(Constituent(s)

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Individual Stakeholder(s) 060538887928 24X500回L AB BEY CRF \$0,48 000030635235 \$50.45 Group: ž \$2.40 068113171083 AB DEPUSIT \$2.97 060538887928 24X500ML GV \$0.48 000030635235 068113171083 AB BEV CRF \$2.40 \$2.97 \$0.48 \$2.60 DEPOSIT 24X500ML Purpose: AB 060538887928 GV 000030635235 supplies, water éjuice foi Picnic In the Park AB BEV CRF DEPOSIT \$2.97 060538887928 GV 24X500ML \$0.48 BEV CRF DEPOSIT \$2.40 068113171083 AB 24X500ML 060538887928 G¥ BEY CRF \$0.48 000030635235 AB 068113171083 060538892645 068113170993 068113170994 069538892645 \$2.40 DEPOSIT AB APPLE DEP .10 \$0.88 Walmart >:< \$0.10 CHARGE AB \$0.02 ACHAT CRÉDI AB 060538892645 \$0.88 APPLE NUMBER 068113170993 068113170994 \$0.10 AB DEP .10 \$0.02 CRF AB 628157E 060538892645 068113170993 068113170994 \$0.88 ADDRESS/ADDRESS APPLE GV \$0.10 DEP .10 \$0.02 TE AB CRF HONE/77 40M LATE LICLAIM AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS BILL TOUTS LES RÉCLAMATIONS ET LA MARCHANISE RETOURNÉE DOIVENT ÊTRE ACCOMPIQUÉES DE CETTE FACTURE. DATE 06053889**26**45 06811317099**3** SALESPERSON/PRÉPOSÉ À LA VENTE APPLE \$0.88 GV ALL AMOUNTS DUE AND PAYABLE WITHIN 30 DAY TOUS LES MONTANTS DUS DOIVENT ÉTRE PAYÉ. DEP .10 \$0.10 068113170994 \$0.02 DANS LES 30 JOURS AB ITEM DESCRIPTION 060538892645 068113170993 DESCRIPTION APPLE \$0.68 AMOUNT/MONTAN .10 \$0.10 DEP 068113170994 \$0.02 AB CRF ALL CLAIMS AND RETURNED GOODS MUST TOUTES LES RÉCLAMATIONS ET LA MARCHANDISE RETOURNÉE DOIVENT ÊTRE TOUS LES MONTANTS DUS DOIVENT ÊTRE PAYÉS ACCOMPAGNÉES DE CETTE FACTURE DANS LES 30 JOI APPLE 060538892645 ITEM DESCRIPTION DESCRIPTION AMOUNT/MONTANT \$0,88 D DEP .10 068113170993 068113170994 060538892645 \$0.10 H AB CRF \$0.02 H APPLE \$0.88 D DEP .10 048113170993 068113170994 060538892645 068113170993 A \$0.10 11 A CRF \$0.02 APPLE 062891508473 068113170993 61 API GRP \$1.00 D AB DEP .10 CRF D DEP .10 \$0.10 H 068113170993 068113170994 062891508473 068113170993 068113170994 062891508473 \$0.10 H AB. CRE 068113170994 \$0.02 H \$0.02 GV HD APPLE GRP 060538892645 \$1.00 D \$0.88 DEP .10 CRF DEP 068113170993 068113170994 .10 A1 \$0.10 H \$0.10 \$0.02 AL AB CRF \$0.02 H H APPLE 060538892645 068113170993 068113170994 GV APL GRP \$1.00 \$0.88 DEP D A. .10 068113170993 068113170994 DEP .10 \$0.10 \$0.10 H 01 CRF \$0.02 \$0.02 H APL GRP GV APL GRP 062891508473 062891508473 \$1.00 \$1 00 .10 D DEP DEP 068113170993 068113170994 .10 068113170993 068113170994 AB \$0.10 \$0.10 CRF AB CRF \$0.02 H \$1.00 D APL 062891508473 068113170993 068113170994 062891508473 GRP SUBTOTAL AB AB DE .10 \$0.10 H \$0.02 H TOTAL CRF CHRG TEND GI APL. GRP CHANGE DUE \$1.00 D .10 068113170993 068113170994 062891508473 068113170994 068113170993 068113170994 T/HST 137466199 RT 0001 T 1016551356 TR 0001 \$0.10 H \$0.02 H \$1.00 D 前掛 CRF APL GRP 23 .10 \$0.10 H CRF APL \$0.02 H GRP 062891508473 REASON: MISCELLANEOUS (7) \$1.00 D AB DEP .10 068113170993 068113170994 \$0.10 \$0.02 H CRF GY API H GRP 062891508473 \$1.00 D DEP .10 # ITEMS SOLD 77 068113170993 \$0.10 H TC* 3537 9423 7335 2996 7855 068113170994 \$0.02 H New Thursday flyer start date Circulaire maintenant en visueur Jeudi 09/16/16 18:46:24 USTOMER'S SIGNATURE IGNATURE DU CLIENT : Radney, MLA

Walmart 🔀

PHONE/TECEPHONE UNTE ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS BILL TOUTES LES RÉCLAMATIONS ET LA MARCHANDISE RETOURNÉE DOIVENT ÊTRE

ITEM DESCRIPTION

ADDRES BOHLSEA

ACCOMPAGNÉES DE CETTE FACTURE.

403

MMEnopoged at ve assembly of AB.

Woodun.

HONE 238-1210 DATE Dept 16/16 Seperson PRÉPOSÉ À LA VENTE

DESCRIPTION

CHARGE

NUMBER

· ACHAT CRÉDITE

628157

ALL AMOUNTS DUE AND PAYABLE WITHIN 30 DAYS. TOUS LES MONTANTS DUS DOIVENT ÊTRE PAYÉS

AMOUNT/MONTANT

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DANS LES 30 JOURS

Member Name: Dave Rodney
Claimant Name: Dave Rodney
Expense Category: HOSTING
For hosting, select one:
Individual Constituent(s)
Individual Stakeholder(s)
Group:
Purpose:

2580 SOUTHLANE CALGARY 20040 BW20040	AB 6771
07-01-2016	12:42:02
07-01-2010	RF
Exp Date **/**	Card Type VI
Name:	
A000000031010	Visa Credit
Check # Trace # 2235 Inv. # 2286	RRN 001755013
394 14	607 45
Purchase	\$67.15 \$10.07
Тір	
Total	\$17.22

Boston Pizza

BP OAKRIDGE #122

OOO6 Table 53 #Party 4 MELISSA M SvrCk: 2 11:55 07/01/16

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WATER	0.00
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"left pizzaé, l-pepproni,	
*-basic	27.30
SPAG SHRIMP, no toast	17.60
MRKT SPINACH, w/ 2x garl skw	15.80
Sub Total:	63.95
GST :	3.20
Guest 1 TOTAL:	67.15

Sub Total: 63.95 GST : 3.20 ., 07/01 12:37 TOFAL: 67.15

GST # 869513804RT0001

PLS PAY YOUR SERVER

61201-70000-12011

Member Name:	Dave Rodney
Claimant Name:	Dave Rodney
Expense Category	Hosting.
	. 0

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

\$ 78.86 + GST

Purpose:

Indigenous Relations

porol

Chrysler Club

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Auth #				
CreditCard		\$72.30		
Subtotal		\$0.00		
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01165Stefanie			/	
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JUL-10-2016 6:26PM				
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