LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2017-18 018 - Calgary-Lougheed - Rodney, Dave For Expenses Processed Jul 1 - Sep 30, 2017

Budget	Used this Quarter	Used To-Date
7.		
\$900.00	\$815.64 \$74.86	\$3,414.94 \$132.92
	\$31.73 \$158.29	\$41.26 \$1,305.91
\$23,160.00 10.0	\$5,790.00	\$11,580.00
	\$710.78	\$1,518.43
35,000.0 5.0	6,715.0	9,485.0
52.0	2.0	12.0
5.0		
	\$900.00 \$23,160.00 10.0 35,000.0 5.0 52.0	Budget Quarter \$900.00 \$815.64 \$900.00 \$74.86 \$31.73 \$158.29 \$23,160.00 \$5,790.00 10.0 \$710.78 35,000.0 6,715.0 52.0 2.0

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



BLE871

GST-HST REG. N0 / N0 ENRG TPS-TVH R104164223 QST ID. N0 / N0 ID TVQ 1001439118



BKDN TOTALS / TOTAUX CODIFICATION

BKDN TOTALS / TOTAUX COD FICATION

657.86

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

BLE871



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

BLE871

LEGISLATIVE ASSEMBLY OF ALBERTA Personal Expense Claim Receipt Description SHELL CANADA PRODUCTS 10855 BONAVENTURE DRIVE SE Member Name: NON CALGARY, AB T2J 618 (403)278-4000 and Claimant Name: Tax Description Qty as Expense Category: F Silver B No11 94.777 L @ \$1.129/ L For hosting, select one: Individual Constituent(s) Sub Total 5.0% GST tax on \$0.00 Individual Stakeholder(s) 0.0% PST tax on \$0.00 \$101.90 + GST Group: TOTAL. VISA: Change Purpose: Fuel Includes GST 5.0% Fuel Includes PST 0.0% -GST - Fuel - AB No. 137400032RT 01 APPROVED - THANK YOU 001

Visa Credit AID_A0000000031010 TVR 0000008000 TSI E800

PURCHASE

INV No. 1015126963

Amount

\$107.00

\$107.00

\$0.00

\$107.00

\$107.00

\$0.00

\$5.10

C

TERMINAL No. 89101512

\$0.00

\$0.00

VERIFIED BY PIN

IMPORTANT retain this copy for your records

Total Miles received this visit: 1

***** Accumulate 95 AIR MILES Cash Miles and get \$10 off your purchase! (51) ****** * You've fil' Bonus Miles Rewards* ****** Visit ro 卡米米米米米

	ne American tatement of A	Account	- ship Number	July 16, 2017	www.americanexpress.ca Amex Bank of Canada Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6
EGIS ASSI	EMBLY OF AB		7.2		
Previous Ba		New Charges including Delinquency Assessment, if any	New Balance \$		Page 1 of 2
Statement includes	payments and charges received by July 1	6.2017			
	pout Your Statement" section fo		ation		
	your balance in full up			nk you for your ong	oing membership.
Credit Lin On July 1	mit Summary 16, 2017	Total	Credit Limit \$	Available Cre	edit Limit \$
listing of Charges a	nd Credits			12	Amount \$
June 27	Payment Received Th	ank You			
New Trans	actions for D RODNE	Y MLA			Amount \$
		X		(e)	
		CALCARY			3.00
June 21	CalgParkAuth 235496 GOVERNMENT SERVI	CES			5.00
June 26	CalgParkAuth 235910 GOVERNMENT SERVI	1 CALGARY CES			10.00
July 1	IMPARK00030303U Goods or Services	CALGARY			10.00
July 7	IMPARK00030185U Goods or Services	CALGARY			18.00
July 15	STAMPEDE PARKING Sporting Events	CALGARY			25.00

\$62.86 + GST

† 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



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

Membership Number Amount Paid \$ Amount Due \$

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



074

	e Americar atement of	n Express® Corpor Account	rate Card	Ame Corpora PO E	ericanexpress.ca ex Bank of Canada ate Service Centre Box 7000 Station B (Ontario) M2K 2R6
RODNEY	MLA MBLY OF AB	Au	gust 16, 2017		
Previous Bala	nce Payments and Credits	New Charges including Delinquency Assessment, if any New Balance \$	35		Page 1 of 2
Statement includes p	ayments and charges received by Au	igust 16, 2017	-		
	out Your Statement" section				
Please pay	your balance in full (upon receipt of statement. Tha	ank you for your ong	oing membersh	nip.
Credit Lin	nit Summary	Total Credit Limit \$	Available Cr	edit Limit \$	
On Augus	st 16, 2017	10,000	NOVAMORADOR (BOX	9,994	
listing of Charges and	d Credits				Amount \$
August 3	Payment Received	Fhank You			99.31 CR
and the first of the first of the second	actions for D RODN	EYMLA			Amount \$
New Transa	CONTRACTOR CONTRACTOR CONTRACTOR				
New Transa August 9	CalgParkAuth 23976 GOVERNMENT SER			Ľ	2.59
		VICES 743 CALGARY		ĺ.	4.00

\$6.28 + GST

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



	e America Itement of		[®] Corpora	te Card	Corporate S PO Box	ank of Canada Service Centre 7000 Station B
Prepared For D RODNEY M LEGIS ASSEN		Membersh	September	er 16, 2017	Willowdale (Ont	ario) M2K 2H6
Previous Balanc	e Payments and Credits	New Charges including Delinquency Assessment, il any	New Balance \$			Page 1 of 2
		L				
	ments and charges received by S t Your Statement" section		tion.			
Please see "Abou	t Your Statement" section	n for important informal	20A (251)	you for your ongoin	ng membership	
Please see "Abou Please pay y Credit Limi	t Your Statement" section our balance in full t Summary	n for important informal upon receipt of s	20A (251)	you for your ongoin		
Please see "Abou Please pay y Credit Limi On Septem	t Your Statement" section our balance in full t Summary ber 16, 2017	n for important informal upon receipt of s	statement. Thank			Amount \$
Please see "Abou Please pay y Credit Limi On Septem Listing of Charges and C	t Your Statement" section our balance in full t Summary ber 16, 2017	n for important informat upon receipt of s Total C	statement. Thank			
Please see "Abou Please pay y Credit Limi On Septem isting of Charges and C August 30	t Your Statement" section our balance in full t Summary ber 16, 2017	n for important informat upon receipt of s Total C Thank You	statement. Thank			
Please see "Abou Please pay y Credit Limi On Septem Listing of Charges and C August 30	t Your Statement" section our balance in full t Summary ber 16, 2017 Payment Received	n for important informat upon receipt of s Total C Thank You IEY MLA ES CALGARY	statement. Thank			Amount\$

\$5.72 + GST

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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







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 least 60 kms by primary highway from your declared permanent residence, and you had made and you had be a solution of the Members' Allowances Order and details on form completion, see reverse. Effective September 1, 2013 D = Brookfact (\$9, 20) | 1 = Lunch (\$11.60) | D = Dinner (\$20.75)

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

Member Name: Rodney, Dave For the Month of: June						Lougheed	0 0 2017	NT ES
For the Mo	onth of: June	Year: 2017	E	mplo	yee	# <u>10</u>		Est.
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Mea L	D	Subtotal.	G.S.T.	Potal
1	Travel to/from Capital	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	20 90 1.98	41.55
2								
3		20 A						
4								
5	Travel to/from Capital	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.55
6	60 km from Perm. Res.	Edmonton		\boxtimes	\boxtimes	39.57	1.98	41.55
7	Travel to/from Capital	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.55
8								
9								
10	2							
11							-	
12		В						
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29								1000
30								
31								
	I I have met the requirements c	of section 7 of the	Gran	d To	tal	\$158.29	\$7.91	\$166.20
	<i>llowances Order, RMSC 1992, c</i> ed meal expenses on the dates		her		60		The	5/2007

Member Signature

07



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: 04/03/2017				
Claim Type: Temporary Residence Accommodatio	n Allowance in Edmonton - Claimed Annually				

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually Maximum of \$23,160 per fiscal year.

Fiscal Year: 2017-2018

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		
			1	3A
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		
		2 monthly payments in Jear. This monthly amo		

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 2017

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: R	odney, Dave	Constituency: Calgary-Lougheed	
Employee #:		Date: 04/03/2017	
Claim Type: Temp	orary Residence Accommoda	tion Allowance in Edmonton - Claimed Annually	

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2017-2018

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.		No		
			1	
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00	x 12 =	\$ 23,160.00	
Please Note: The Member is responsible for retaining all r	ecords which suppo	ort the annual amount i	dentified above.	
Claim Payment Authorization (please check)	✓ 12 Monthly	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 2017

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: 04/03/2017
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: 2017-2018

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				
		and the second se				59
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00	x 1	2 =	\$	23,160.00	
Please Note: The Member is responsible for retaining all r	ecords which suppo	ort the annual amou	int id	lent	tified above.	
Claim Payment Authorization (please check)	✓ 12 Monthly I	Payments				
	Lauthorize 1	2 monthly payment	s in t	he	amount specified	above for the

entire fiscal year. This monthly amount is static for the entire fiscal year.

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 2017

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

Member Name: Dwe	Indney
Claimant Name:	Radrey
Expense Category: Hosti	ng J
	0
For hosting, select one:	
Individual Constituent(s)	
Individual Stakeholder(s)	
Group:	26.99+ GST

Purpose:



KFC #1791 200 SOUTHRIDGE DRIVE **UNIT 235** OKOTOKS AB TIS 0B2 4039381498

SALE

MID: 3101791 TID: K3101791 REF#: 00000080 Batch #: 028 SEQ: 028001001080 07/01/17 APPR CODE: 067651 18:35:58 VISA

AMOUNT

\$28.34

00 - APPROVED - 001

Visa Credit AID: A000000031010 TVR: 00 00 00 00 00

THANK YOU

KECTACO PAR VISA
2017-07-01 6:28 PM
Tell us about your Visit!
And Receive Free Food for your Feedback! See Below for Conditions
Visit:
WWW.KFCLISTENS.CA
STORE #1791 #235 - 200 Southridge Road
0kotoks 403938149
GST #832197909RT0001

- 76

1791 2 16 2121

CHKNSHR 8 TNDRS 2 *BBQ DIPS 8 *OR TENDER	10.00
8PC OR	16.99
TAKE OUT	26;99
GST	1.35
Amount Due	\$28.34
TND:VISA	\$28.34
Amount Due	\$.00

Get your choice of a FREE Small Popcorn Chicken OR Strawberry Chee With the Purchase of any drink On your next visit to our store.

> Visit: WWW.KFCLISTENS.CA within 7 days and tell us about your visit

Write the code below and Bring your receipt to redeem in store! CODE:

Void where prohibited. Limit one coupon per guest per visit. Offer valid only at this KFC. Not valid Expires 14 days after purchase date. Like our facebook page KFC CANADA - HIFLYER We Deliver : Order online @KFC.ca Or Call 1 866 532 4968 ***************

Member Name:	Dave Kochey	
Claimant Name:	Paul Bedney	
Expense Categor	v: Hosting	

For hosting, select one:

Individual	Constituent(s)	

Individual Stakeholder(s)

Group:

\$ 72 46+GST

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Purpose:

Figance)		
Treasure		
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	PHOENIX (#335 160	
a	MACLEOD T	
	CALGARY, AB	
	(A 4035099	
	SAL	Store
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	Server #: 08 Beatric	e A
	Table #: 30 Check #: 0000020013	FRANCE
	MID: 5631067	·
		REF#: 00000004
	Batch #: 022 07/08/17	13.22:13
	APPR CODE: 064741	
7	VISA	Chip
	AMOUNT	\$65.73
	TIP	\$9.86
	TOTAL	\$75.59
	APPROV	ED
	Visa Credit	
	AID: A000000031010	
	TVR: 00 00 00 80 0 TSI: F8 00	10
	BY ENTERING A VERIFIED FIN TO PAY ISSUER SUCH TOTAL ISSUERS AGREEMENT WI ACCORDANCE WITH	IN ACCORDANCE WITH TH CARDHOLDER

AGREENENT AITH CARDHOLDER

THANK YOU

PLEASE COME AGAIN

CUSTOMER COPY

Thank you!



PHOENIX GRILL #335 - 16061 McTeod T 403-509-9111	rail
Server: 08 Beatrice	07/08/2017
Table 30(1	1:12 PM
Guests: 4	20013
POP	3.60
STEAK SANDWICH	17.25
SML BEEF BARLEY	2.00
STEAK SANDWICH	17.25
KALE SALAD TUSC	13.75
W.CHOC BROWNIE	8,75
Subtotal	62.60
Tax	3.13
Total	65,73

Balance Due

65.73

GS1 # 863158788 E-MAIL at phoenixgrill@shaw.ca THANKS FOR SUPPORTING LOCAL THE PHOENIX GR

Member Name: D Claimant Name; D Expense Category:	ave F Host	<u>edne</u>	y	
For hosting, select on I Individual Constit I Individual Stakeh G Group:	e: tuent(s)		\$95.45+GS7	ſ
Purpose:				
L		- 6	5 74	
	10840 Calg 4	ncLeod ary AB 03-278		
	Tran. # RVC: Re Table # Check # Group # Employed	1014 staura 14 4136 1 9 #1 5	n t	
	Visa Cre Pre-Auth	dit		
		Amount Tip	\$87.15	
	00-001 0 EA26WS04 12400100 2017/07/	32651 /EA26W 1008	C04	
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EARLS RESTAUR	ants affairs Is
- Thank 59 KIMBERLE	you!
Tbl 14/1 Chk 4136 11Jul'17 12:	
1 POP 1 TEA 1 ESPRESSO 2 IIII 0 3.75 1 STEAK/COCO PRW 1 Goz SIRLOIN No Sauce	3.75 3.75 4.00 7.50 29.00 25.00
add Gravy 1 COCONUT PIE	2.00
Subtotal GST Tax 02:53PM Total	83.00 4.15 87.15
PLEASE SEND YOUR FEE GENERAL MANAGER JORE JMORGAN@EARLS.CA	

THANK YOU

170

٧

GST# R893005637RT

Member Name: Dave +	Sodney
Claimant Name: Tave F	Sodney
Expense Category: 14054	ing
For hosting, select one:	3
Individual Constituent(s)	
Individual Stakeholder(s)	and the second second second
Group:	\$ 63.66 + GST

Purpose:

Wellness.

SAIGON M	OON
403-933-5	751
MON-SUN: 11AM-	-7PM
Sh Prk Sld Roll	8.00
Seafood NSoup	14.50
GrPrawn Vermicli	14.50
SF Veg Rice	14.00
Hot Black Coffee	4.00
ITEM CT	5
TAX	2.75
CASH 57	.75
06-13-2017 17:5	51
0001 CLERK10 00	042777

212	DIAMONDAB 224840 2484002
**** PUR	ICHASE TYPE
06-13-2017	11.47:01
Exp Date **/** Name: DAVID ROD A000000031010	C Card Type VI NEY Visa Credit
Trace # 566 Inv. # 623	WALKESS RRN 001491016
Purchase Conc Tip	\$57.75
Total	4. \$8.66 \$66.41
(001) APPROV	ED-THANK YOU
Retain this c	
reco	

15

 $= \tau_{\rm C}$

Member Name: <u>Dave Rodney</u> Claimant Name: <u>Dave Rodney</u> Expense Category:	**************************************		
For hosting, select one: Individual Constituent(s) Individual Stakeholder(s)	Waiter O N,	st 1	******
Group:			
Purpose:	1 REG OMLET 1 Tradition		12.95 10.75
Infrastructure		Taxable:	23.70
		Sub-total: GST:	23.70 1.19
A 100	To	otal Due:	24.89
SUMMIT CAFE TOSTIND	Cash:		24.89
1001 COUGAR CREEK DETVE CANMORE AB			
CARD TYPE VISA	Reference; Thank you fo	or visiting Summit (Cafe
DATE 2017/06/14 TIME 3003 10:50:23 RECEIPT NUMBER	Have A Great	Day In The Mounta	ins
C84021028-001-001-563-0			
PURCHASE			
AMOUNT \$2.4.89 TIP \$2.49			
TOTAL INFRA STRUCTURE			
\$27.38			
Visa Credit			
A0000000031010 BD9940093F3EDB58			
0000008000-E8DQ \ /	*		
E37BFD8D4BC216A9			
APPROVED		×.	
THANK YOU			
CARDHOLDER COPY			
IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS			

Member Name:	Dave Rodney
Claimant Name:	Dave Rodrey
Expense Category:	Hosting J

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

Purpose:

Hty on Sz's.

4 78.49+ GST

-	Λ	st	7	1_4	5
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Earls 276 TAYLYN Chk 5400 Tbl 312/1 Gst 3 20Jun'17 11:37AM 3 POP @ 3,75 11.25 1 POP REFILL 0.00 2 DECAF @ 3.75 7.50 1 BURGER* 15.00 1 MED LING/PRW 19.50 1 ITALIA PIZZA 15.00 Subtotal 68.25 GST Tax 3.41 12:48PM Total 71.66 PLEASE SEND YOUR FEEDBACK TO GENERAL MANAGER JORDAN MORGAN JMORGAN@EARLS.CA THANK YOU GST# R893005637RT

EARLS RESTAURANTS

LEGISLATIVE ASSEMBLY OF ALBERTA

5

THANK YOU PLEASE COME AGAIN www.FirstDataCanada.ca

IRON GO	AT_
**************************************	****
06/22/17 12:06 PM Delivery T Table 42 Cust 3 Order # 4602 Your Server: Valerie	76
1 Pop 1 Ice Tea 1 Coffee 1 Lemonade 1 Shrimp Sausage Pasta 1 Chicken Carbonara 1 Halibut Tacos	2.62 3.09 2.92 3.09 22.95 22.95 15.95
Taxable:	73.57
Sub-total: GST:	73.57 3.68

Total Due: 77.25 GST# 816 902 159 RT0001

Thenks U

.

Member Name:	Dave	Rode	very	
Claimant Name:	Purcha	se or	der	2070
Expense Category:	Hostir	25		

For hosting, select one:

Individua (Constituent(s)

Individual Stakeholder(s)

Group:

\$137.27 + GST

Purpose:

Annual Picnic In the Park Supplies

ADDRESS/ADRESSE 3114 2520	Wanna	6290	104
PHONE/ELÉPHONE ALL CLAIMS MOI RETURNET GOODS MUSE BE ACCOMPANIED B TOUTES LES RECLAMITIONS ET LA VARICHARDISE RETOLANCE LO ACCOMPAGNEES DE CETTE FACTURE.	Y THIS BILL ALL IVENT ÊTRE TOU	SPERSON/PRÉPOSÉ À LA VENI AMOUNTS DUE AND PAYABLE S LES MONTANTS DUS DOIVEN S LES 30 JOURS	WITHIN 30 DAYS
ITEM DESCRIPTION	DESCRIPTION	AMOUNT/A	IONTANI
			1.1
alle la ll Celle	FEE 00661	8802040 8802040	\$9,98 \$9,98
Caffee to office The		8809040 8898794	\$7.98
) T 49	MAX HOUS 0066 MAX HOUS 00661	8828784	\$7.97
	MAX HOUS 0086	9898784	\$7.97 \$8.97
Cordinants Line	SIMO REDE 0060 RELISH 0020	20098773	\$2.27
farPienic (iii	RELISH 03289	1538051	\$2.27
Hostins 2	TARD 06289	1500120	\$1.00
Satar for 1	CHUP ILTR 00570	0000299	\$2,83
provide in Park/SM		18987920	\$2.97 \$0.96
PLANC INTEG I Y AND	DEPOSIT 0681	31710E3 0007920	\$2.40 \$2.97
- a AI	BEV CRF 00003		\$0,96
98	DEPUSIT 0681 24X500ML 06053	10003 10007920	\$2.40 \$2.97
	REV CRF 0000. DEPOSIT 0681	3171083	\$0.96
	BEV ERF 00000	0635235	\$2,97 \$0,96 \$2,40
G AS	DEFESIT 04811	3171083	32.40
CUSTOMER'S SIGNATURE	1	42	
SIGNATURE DU CLIENT	un p	I	
	Sail RC	drey .	MA - 175

-

Member Name:	Dave B	adney	6
Claimant Name:	Purchase	order	2070
Expense Category:	Hosting		

For hosting, select one:

	Individua	Con	stit	uen	t(s))
		-	-	and the second second		
_				272		

Individual Stakeholder(s)

Group:

Purpose:



		15 10
Wa	Imart	家
NAME/NOM	5	

CHARGE ACHAT CRÉDITÉ NUMBER 6290753

HONE/TÉLÉPHONE LL CLAIMS AND FETURNED GOODS MUST BE ACCOMPANI OUTES LES RÉCLAMATIONS ET LA MARCHANDISE RETOURNE COOMPAGNÉES DE GETTE FACTURIE	date Ed by This Bill. E doivent être	ALL ASSOCIA		E WITHIN 30 DAYS. /ENT ÉTRE PAYÉS
ITEM DESCRIPTION	DESCRI	PTION	AMOUNT	MONTANT
	-			~
For Portins	AV 24X500ML AV DEPOSIT AV DEPOSIT AV 24X500ML AV BEY CRF AV DEPOSIT AV DEPOSIT AV DEPOSIT	0605388 0000306 0681131 0605388 0601306 0605388 0605388 0605388 0605388 0605388	35235 71083 87928 35235 71083 87928 435235	\$7.97 \$0.04 \$2.40 \$2.97 \$0.96 \$2.40 \$2.97 \$0.96 \$2.40
	051 1016551 +++++++++++++ + T Å X ++++++++++++	466199 R 356 TQ 0 ******* E X E M ******** CELLANED 00000000	001 PT S 1111111111	ALE 111111111111111111111111111111111111
	TF# 174	raday fl	352 0621 yer star at en vi 11:52:	sucur Jeu

20284989 RR Donnelley @2009 . All rights reserved. - 9355

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WMA - 1758

CUSTOMER'S SIGNATURE SIGNATURE DU CLIENT : _

CUSTOMER COPY / EXEMPLAIRE DU CLIENT

Member Name:	Dave Rodney	
Claimant Name:	Purchase order MLA 207067	
Expense Category	"Hostins	

\$ 96.80

For hosting, select one:

	Individual	Constituent(s)
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Individual Stakeholder(s)

Group:

Purpose:

Supples water, junce plates, etc. for annual Picnic in the Par

	1.0.0	Walmart >	× •
F			
HPPL AB C	DE	005796100022 068113170994	\$0.98 D \$0.02 H \$0.10 H
AB D APPL AB C AB D	EP 10 E JUICE RF EP 10	005796100022 068113170994 068113170993 005796100022 068113170994	30.98 1
APPL AB C	E JUICE	068113170993 005796100022 068113170994	\$0.10 H \$0.98 D \$0.02 H
	RF EP 10 EP 10	068113170993 005796100022 068113170994	\$0.10 H \$0.98 D \$0.02 H
APPLE AB CF		005796100022 068113170994 068113170993	\$0.98 D \$0.02 H \$0.10 H \$0.98 D \$0.02 H \$0.98 D \$0.02 H \$0.98 D \$0.02 H \$0.98 D \$0.98 D \$0.98 D \$0.98 D \$0.98 D
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APPLE AB CR	JUICE F P.10	005796100022 068113170993 005796100022 068113170993 005796100022 068113170993 005796100022 068113170994 068113170993 005796100022 068113170993 005796100022 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994 068113170994	\$0.98 D \$0.02 H \$0.10 H
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AB CR	JUICE F 10 JUICE F 10 JUICE F 10 JUICE F 10 JUICE F 10 JUICE F 10 JUICE F 10 JUICE F 10 JUICE	068113170993 005796100022 068113170994 068113170993 005796100022 068113170993 068113170993 068113170993 068113170994 068113170994 068113170994 068113170993 062891508473 068113170993	\$0.98 D \$0.02 H \$0.10 H
A A A A A A A A A A A A A A A A A A A	F P.10 L GRP	068113170994 068113170993 062891508473	
	P.10 L GRP	068113170994 068113170993 062891508473	\$1.00 D \$0.02 H \$0.10 H \$1.00 D
	F P.10 NGPEACH	068113170994 068113170993 060538892660	\$0.02 H \$0.10 H \$1.00 D
ALNIC IN the Park Husting	10 NGPEACH	060538892660 068113170994 068113170993 060538892660 060538892660	\$0.02 H \$0.10 H \$1.00 D \$0.02 H \$0.10 H \$1.00 D \$0.02 H \$0.10 H \$1.00 D \$0.02 H \$0.02 H \$0.02 H \$0.10 H \$1.00 D \$0.02 H \$1.00 D
	NGPEACH	060538892660 068113170994 068113170993 060538892660 068113170994 068113170994 068113170993 060538892660 068113170994	\$1.00 D \$0.02 H \$0.10 H \$1.00 D \$0.02 H \$0.10 H \$1.00 D
	5		\$0.02 H
	GPEACH	068113170993 060538892660	\$0.10 H \$1.00 D \$0.02 H
	IO NGPEACH	068113170993 060538892660 068113170994 068113170993	\$1.00 D \$0.02 H \$0.10 H \$1.00 D \$0.02 H \$0.10 H
	GPEACH (068113170994	\$1.00 D \$0.02 H \$0.10 H \$1.00 D
	GPEACH	060538892660 068113170994 068113170993	\$0.02 H \$0.10 H \$0.10 H
GVORAL GVORAL AB DEF AB DEF AB DEF AB DEF AB DEF AB DEF AB DEF	GPEACH () GPEACH (060538892660 068113170994 068113170993	\$0.02 H \$0.10 H
	GPEACH (068113170993 160538892660 068113170994 068113170993 060538892660 068113170993 060538892660 068113170993 060538892660 068113170994 068113170994 068113170993	\$1.00 D \$0.02 H \$0.10 H \$1.00 D \$0.02 H
/ AB UEF	(500ML (60538887928	\$1.00 D \$0.02 H \$0.10 H \$2.97 D \$0.96 H
AB BEV AB DEF GV 242	(500ML (/ CRF (POSIT ((500ML (000030630230	\$0.96 H \$2.40 H \$2.97 D
AB BEV AB DEF GV 24)	/ LRF OSIT (COOML (OSIT (COOML (060538887928 00030635235 068113171083 060538887928	\$0.10 \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 H \$2.97 \$0.96 \$0.97 \$0.97 \$0.96 \$0.97 \$
AB BEY AB DEP GV 24X AB BEY	COSIT (500ML (CRF (060538887928 000030635235 068113171083 060538887928	\$0.96 H \$2.97 D \$0.96 H \$2.40 H
		000030635235 068113171083 006827409633 000030635228	\$0.96 H \$2.40 H \$2.77 D \$0.48 H \$1.20 H
AND DEFLE	20SIT (20SIT	006827409633 000030635228 068113171075 006827409633 000030635228 068113171075	\$1.20 H \$2.77 D \$0.48 H
L THE ME	WINDA (06618800257	\$1.20 H \$7.97 D
		006618809040	\$7.97 D \$9.98 D \$9.98 D

LEGISLATIVE ASSEME		3	CH.	ARGE
Personal Expense	e Claim Receipt Description	Walmart 2	ACHAT	
	Dia	NAME/IGM Legisla		0001
Member Name:	ave Bodney	ADDRESS/ADDRESSE OF ALL	perta. 1029	USOT
Claimant Name:	10 207070.	PHONE/TÉLÉPHONE	DATE SEDT 1554 ESPERSON/PREPOSE A	LA VENTE G
Expense Category:	Hosting	ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIE TOUTES LES RÉCLAMATIONS ET LA MARCHANDISE RETOURNÉE ACCOMPAGNÉES DE CETTE FACTURE.		PAYABLE WITHIN 30 DAYS. IS DOIVENT ÊTRE PAYÉS
Factor and a		ITEM DESCRIPTION	DESCRIPTION AMOU	JNT/MONTANT
For hosting, select one:		10		~ .
Individual Stakehol				
	\$ 08.32	/ S		'1 TR♦ 07537 \$2.83 D
Group:	- 40000		ETCHUP 1LTR 005700000299 ETCHUP 1LTR 005700000299 HORANGPEACH 060538892660	\$2.83 D \$1.00 D
Purpose:			B CRF 068113170994	\$0.02 H \$0.10 H
	IL OF	Panis In the la		\$1.00 D \$0.02 H
Fichic	c in the Park.	Park Supplies A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$0.10 H \$1.00 D
		h A	B CRF 068113170994	\$0.02 H \$0.10 H
			APL 6RP 032891508473	\$1.00 D \$0.02 H
			B DEP .10 068113170993	\$0,10 H \$1,00 D
	CHARGE		B CRF 068113170994	\$0.02 H \$0.10 H
Walmart	ACHAT CRÉDITÉ		H APL GRP 062891508473 B CRF 068113170994	\$1.00 D \$0.02 H
IAME/NOM	NOMBER	(D. D.C. M. C.	NEP 10 068113170993	\$0,10 H
DDRESS/ADRESSE	6290880	(3) OT Supplies		
HONE/TÊLÊPHONE	DATE SPOT 15 DELES ON MANDED SEA LA VENTE	2) the Hosting	AS MAX MORN 006618800257	\$7.97 D \$7.97 I
L CLAIMS AND RETURNED GOODS MUST BE ACCOM DUTES LES RÉCLAMATIONS ET LA MARCHANDISE RETO		(noffice supple	5081018	la ce
ITEM DESCRIPTION	DESCRIPTION AMOUNT/MONTANT	U. H	CHRG TEN	D
			CHANGE DU 651/HST 137466199 BT 0001	and a second sec
			agt 1016551356 Tu 0001	
	**************************************	CUSTOMER'S SIGNATURE	Dhinni for	>
	***************************************	SIGNATURE DU CLIENT :	ave Rodney.	
	REASON: MISCELLANEOUS (7) QUST ID 00000000000000000000000000000000000	CUSTOMER COPY / EXEMPLA	NRE DU CLIENT	WMA - 175B
	* ITEMS SOLD 26 TC* 1348 7622 8159 1976 7689			
	New Thursday flyer start date (irculaire maintenant en visueur Jeud 09/15/17 10:39:22	Ř.		
	09/15/17 10:39:22			
		¥		
		N		
CUSTOMER'S SIGNATURE SIGNATURE DU CLIENT : 2	Dave Rodney			
	Dave Hodney			
CUSTOMER COPY / EXEMP	1/MA 175P			