LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2024-25
039 - Edmonton-North West - MLA David Eggen
For Expenses Processed Jul 1 - Sep 30, 2024

	Budget	Reimbursed This Qtr	Reimbursed To-Date
Financial Reporting - $ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - $			
MLA Parking Cap - $	$900.00		
Other Travel - Parking - $			
Member Travel (overnight stay in constituency) - $			
Taxi, Bus Travel - $			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - $		$118.46	$118.46
Member Travel (Meal Per Diems) - $			
Accommodation			
Edmonton Accommodation Allowance ($23,160.00/yr max)			
Travel Accommodations Allowance		$879.33	$879.33
Travel Accommodations Allowance (days; 10 max) - NF	10.0	3.0	3.0
Other			
Hosting - $		$472.23	$472.23
Event Tickets Disclosable - $			
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.0	2,499.0	4,165.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0	2,499.0	4,165.0
Adverse Driving Conditions			
Special Trips (5 trips per year) - NF	5.0		
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	5.0		

$ - 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

Note:
Expenses are reported in the Quarter the expense is reimbursed and not necessarily the Quarter the expense was incurred. The reader should take this into account when reviewing the disclosure

Legislative Assembly of Alberta

VF26635 - Vendor Payment Submission Form

Member Name	David Eggen
Claimant	David Eggen
Expense Category	Other

Budget GST/TPS 880643820RT0001

PLEASE QUOTE THE INVOICE NUMBER ON ALL CORRESPONDENCE
VEUILLEZ INDIQUER LE N° DE FACTURE SUR TOUTE CORRESPONDANCE

INVOICE/FACTURE [redacted]

Out/Départ	24JUL24/0922	ED2	Class/Classe	F	km Out/km départ	12890
In/Retour	25JUL24/2000	ED2	Description	WHI HYUN ELSE FWD	km In/km retour	14121
			Plate/Plaque	L69180	total km	1231
			MVA	36007521		
			VIN	KMHLM4AG3PU598619		

NDP Caucus of Alberta
[redacted]
9820 107 St NW 5th Floor Federal Building
Edmonton, AB T5K 1E7

Account#/n° compte [redacted]
AWD/BCD A162100
PO/Bon de commande
Renter/Conducteur EGGEN,DAVID

Rental details/Détail de la location	Charges/Coûts	
2 days/jours @ $57.00		114.00
NET TIME AND MILEAGE/TEMPS ET KILOMÈTRES NETS		**114.00**
FEES/SURCHRGS		4.46
Subtotal		**118.46**
GST/TPS		0.00
		0.00
Total charges / Charges totales		**118.46**
On the road / Sur la route		*0.00*
Net charges / Charges nettes		**118.46**
Prepayment / Montant prépayé		*0.00*
AMOUNT DUE / MONTANT DÛ	**CAD**	**118.46**

PAYMENT IS DUE UPON RECEIPT / PAIEMENT DÛ SUR RÉCEPTION

PLEASE DETACH AND RETURN WITH YOUR PAYMENT / DÉCOUPER ICI ET RETOURNER AVEC VOTRE PAIEMENT

Budget

FOR BILLING INQUIRIES/EN CAS DE QUESTIONS
Budget City Centre Mall
attn Zoran Bubevski
10200 102 Avenue - Unit C225
Edmonton AB
ph./tel. 780-448-0066 fax 780-448-9836

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PLEASE QUOTE THE INVOICE NUMBER ON ALL CORRESPONDENCE
VEUILLEZ INDIQUER LE N° DE FACTURE SUR TOUTE CORRESPONDANCE
[redacted]

Amount Due / Montant dû **CAD** **118.46**

REMIT TO / DESTINATAIRE
Budgetcar Inc.
Accounts Receivable
9412 51 Avenue NW, Edmonton (AB) T6E 5A6
ph./tel. 780-448-2060 fax
AREdmonton@avisbudget.com

Amount Paid / Montant Versé

NDP Caucus of Alberta
Account#/n° compte [redacted]
AWD/BCD A162100
Wizard# $$

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.

Legislative Assembly of Alberta

VF26337 - Vendor Payment Submission Form

Member Name	David Eggen
Claimant	David Eggen
Expense Category	Other

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
DAVID EGGEN
LEGIS ASSEMBLY OF AB

Account Number
XXXX-XXXXX[redacted]

Date
June 16, 2024

New Charges
[redacted]

Statement includes payments and charges received by June 16, 2024

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.

Credit Limit Summary On June 16, 2024	Total Credit Limit $	Available Credit Limit $
	[redacted]	[redacted]

New Transactions for DAVID EGGEN

Card XXXX-XXXX[redacted]

			Amount $
June 9	**ALT HOTEL CALGARY UN CALGARY**		**761.52**
	Arrival	Departure	
	05/07/24	07/07/24	
Total New Transactions for DAVID EGGEN			**761.52**

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. Learn about all of your payment options, including how to enroll your bank account, make a one-time payment or enroll in our pre-authorized payment plan by visiting www.amex.ca/paymentmethods. Go paperless and get your full statements faster: www.amex.ca/paperless. DETAILS ENCLOSED.

Account Number [redacted]	
Amount Due $ [redacted]	Amount Paid $

DAVID EGGEN
LEGIS ASSEMBLY OF AB
4103 9820 107 ST NW
EDMONTON AB
T5K 1E7

[redacted]

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.

Legislative Assembly of Alberta

VF27774 - Vendor Payment Submission Form

Member Name	David Eggen
Claimant	David Eggen
Expense Category	Other

RAMADA BY WYNDHAM

Ramada by Wyndham Medicine Hat
3282 13 Ave SE
Medicine Hat,Alberta,T1B 1H8,Canada
Phone: 403-5271200
Email: imperialinnmedicinehat@gmail.com

Folio

Name:	Eggen, David			Confirmation Number:	[redacted]
Phone #:	[redacted]	Email:	edmonton.northwest@assembly. ab.ca	Loyalty Level:	[redacted]
Guest Address:	[redacted]	Company Address:	N/A	Guests:	2/0
Room:	270	Room Type:	ENK1	Nights:	1
Rate Plan:	[redacted]	Daily Rate:	CAD 141.80	GTD:	AX 1003
Arrival:	Jul 24, 2024 (Wed)	Departure:	Jul 25, 2024 (Thu)		

Room Rate:

Jul 24, 2024 (Wed) CAD 141.80 Per Night

Total Estimated Stay Amount: CAD 141.80 + CAD 17.01 Taxes and Fees = CAD 158.81

Date	Code	Description	Amount	Balance
Jul 24, 2024	RM	ROOM CHARGE	CAD 141.80	CAD 141.80
Jul 24, 2024	1000	State Tax 5%	CAD 7.09	CAD 148.89
Jul 24, 2024	1001	Tourism levy Tax 4%	CAD 5.67	CAD 154.56
Jul 24, 2024	1002	Destination Marketing Fee 3%	CAD 4.25	CAD 158.81
Jul 25, 2024	AX	AX[redacted]	CAD (158.81)	CAD 0.00

Summary

Room:	Taxes and Fees	F&B	Other	Payments	Balance Due
CAD 141.80	CAD 17.01	CAD 0.00	CAD 0.00	CAD (158.81)	CAD 0.00

Guest Signature: _____

By signing above, I agree to these terms and conditions

Printed on: Thu, Jul 25, 2024 at 07:12:43 AM

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.

Hosting - $472.23

Legislative Assembly of Alberta

SE46706 - Staff Other Expenses Claim Form

Receipt Description	Chips for Griesbach Party in the Park Event
Member Name	David Eggen
Claimant	Lyndsey Henderson
Expense Category	Other

COSTCO WHOLESALE

W Edmonton BCTR #656
10310 186 Street NW
Edmonton, AB T5S 2X6

GI Member [redacted]
27 @ 17.49
1099716 VICKIES 36CT 472.23 G

[redacted]

XXXXXXXXXX) [redacted]
ACCT: MASTERCARD
REFERENCE #: 0010016790 C
AUTH #: [redacted] 2024/09/05 14:58:51
Invoice Number: 009679
Purchase - Mastercard
A0000000041010
0000008000 E800

01 APPROVED - THANK YOU 027
AMOUNT: [redacted]

IMPORTANT - retain this copy
for your records
CUSTOMER COPY
MasterCard
CHANGE

[redacted]

G GST 5%
TOTAL NUMBER OF ITEMS SOLD =
TOTAL DISCOUNT(S) $
2024/09/05 14:59:37 656 9 30

22065600903052409051459

OP#: 633 Name: HALEY T (FE)
Thank You!
Please Come Again
G=GST P=PST
GST #121476329
Whse:656 Trm:9 Trn:305 OP:633

[redacted]

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.