

LEGISLATIVE ASSEMBLY OF ALBERTA
Member Expense Disclosure Report
Calgary-Currie - Christine Cusanelli
For Expenses Processed Jan 1 - Mar 31, 2015

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$1,643.30	\$4,174.54
Member Parking - \$	\$900.00	\$124.53	\$427.73
Member Travel (overnight stay in constituency) - \$			\$244.21
Member Travel (Extraordinary Accommodation) - \$		\$142.87	\$608.77
Taxi, Bus Travel - \$		\$172.17	\$172.17
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$2,327.61	\$2,327.61
Member Travel (Meal Per Diems) - \$			
Other			
Hosting - \$		\$237.83	\$938.72
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	30	120
Travel Accommodations Allowance (days; 10 max)	10		1
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000	804	9,419
Special Trips (5 trips per year) - NF	5		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		1	3
Use of a Private Automobile (52 trips per year) - NF	52	3	18
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



BDF290001

<p>FLEET MANAGEMENT SERVICES DETAIL DETAILS SERVICES DE GESTION DE PARC</p> <p>PAGE - 157 OF 299 DE</p>	<p>CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION</p> <p>SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-07-C. CUSANELLI</p> <p>- - - - - - - -</p>	<p>CLIENT NO. NO DU CLIENT INVOICE DATE DATE DE LA FACTURE INVOICE NO. NO DE LA FACTURE</p> <p>01/01/15 0006190888</p>
---	--	--

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 AUTHORISE 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
C	CUSANELLI				000406324199 12/16/14	FEDERATED COOPERATIVES L MITED CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.7	1.06	39.06	1.95 1.95	41.01 41.01
					000405121507 11/21/14	FEDERATED COOPERATIVES L MITED CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	90.9	1.22	105.53	5.28 5.28	110.81 110.81
					000404738470 11/16/14	FEDERATED COOPERATIVES L MITED AIRDR E AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	69.9	1.23	81.90	4.10 4.10	86.00 86.00
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	199.5		226.49	11.33	237.82
BKDN TOTALS / TOTALS CODIFICATION 01-07							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	199.5		226.49	11.33	
BKDN TOTALS / TOTALS CODIFICATION												237.82

BLG871

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

Element Fleet Management



BDFD290001

<p>FLEET MANAGEMENT SERVICES DETAIL DETAILS SERVICES DE GESTION DE PARC</p> <p>PAGE - 142 OF 258 DE</p>	<p>CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION</p> <p>SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-07-C. CUSANELLI</p>	<p>CLIENT NO. NO DU CLIENT INVOICE DATE DATE DE LA FACTURE INVOICE NO. NO DE LA FACTURE</p> <p>02/01/15 0006203641</p>
---	---	--

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
C	CUSANELLI				000406880152 12/30/14	FEDERATED COOPERATIVES L MITED CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	81.0	1.01	77.88	3.89 3.89	81.77 81.77
					000407057864 12/22/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	93.0	1.05	92.91	4.65 4.65	97.56 97.56 .93- 96.63
					000407057863 12/18/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	73.3	1.06	73.95	3.70 3.70	77.65 77.65 .74- 76.91
					000407057862 12/11/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	82.7	1.00	79.12	3.96 3.96	83.08 83.08 .79- 82.29
					000407057861 12/05/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	82.9	1.04	82.07	4.10 .24 4.34	91.16 91.16 .82- 90.34
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	412.9		410.68	20.54	431.22 3.28- 427.94
BKDN TOTALS / TOTAUX CODIFICATION 01-07							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	412.9		410.68	20.54	

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 - 143 OF 258
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-07-C. CUSANELLI - - - - - - - -

CLIENT NO. NO DU CLIENT	
INVOICE DATE	02/01/15
DATE DE LA FACTURE	
INVOICE NO.	0006203641
NO DE LA FACTURE	

UNIT NO	DRIVER NAME DRIVER ID.	V.I.N.	CARD NO.	KM AUTHORIZE	REFERENCE NO ACTIVITY DATE	SUPPLIER NAME SUPPLIER LOCATION	CHARGE DESCRIPTION	QTY	UNIT COST	EXTENDED PRICE	GST-HST PST/QST	TOTAL DUE
NO. D'UNITE	NOM DU CONDUCTEUR NO. DU CONDUCTEUR	NO. DE SERIE	NO. DE CARTE	KM AUTORISE	NO. DE REFERENCE DATE DE LA TRANS.	NOM DU FOURNISSEUR POINT DE VENTE	DESCRIPTION DES FRAIS	QTE	COUT UNIT	TOTAL	TPS-TVH TVP/TVQ	MONTANT TOTAL DU
BKN TOTALS / TOTAUX CODIFICATION												
BKN TOTALS / TOTAUX CODIFICATION										431.22		
DISCOUNT / RABAIS										3.28-		
TOTAL / TOTAL										427.94		

Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 153 OF 294
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-07-C. CUSANELLI - - - - - - - -

CLIENT NO. NO DU CLIENT	
INVOICE DATE DATE DE LA FACTURE	03/01/15
INVOICE NO. NO DE LA FACTURE	0006215640

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 AUTHORISE 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
C	CUSANELLI				000408840073 01/31/15	FEDERATED COOPERATIVES L MITED CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	89.0	1.00	84.76	4.24 4.24	89.00 89.00
					000408441086 01/25/15	FEDERATED COOPERATIVES L MITED CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	44.0	.91	38.10	1.91 1.91	40.01 40.01
					000408093009 01/15/15	FEDERATED COOPERATIVES L MITED CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	97.1	.91	84.10	4.21 4.21	88.31 88.31
					000408426742 12/22/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	93.0-	1.05	92.91-	4.65- 4.65-	97.56- 97.56- .93 96.63-
					000408631484 12/22/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	93.0	.95	83.61	4.65 4.65	88.26 88.26 .84- 87.42
					000408426741 12/18/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	73.3-	1.06	73.95-	3.70- 3.70-	77.65- 77.65- .74 76.91-
					000408631483 12/18/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	73.3	.96	66.62	3.70 3.70	70.32 70.32 .67- 69.65
					000408426740 12/18/14	FASGAS EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	82.7-	1.00	79.12-	3.70 3.70	70.32 70.32 .67- 69.65

BLG871

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

Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 154 OF 294
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION	
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-07-C. CUSANELLI	
-	-
-	-
-	-
-	-

CLIENT NO.	
NO DU CLIENT	
INVOICE DATE	03/01/15
DATE DE LA FACTURE	
INVOICE NO.	0006215640
NO DE LA FACTURE	

UNIT NO	DRIVER NAME DRIVER ID.	V.I.N.	CARD NO.	KM AUTHORIZE	REFERENCE NO ACTIVITY DATE	SUPPLIER NAME SUPPLIER LOCATION	CHARGE DESCRIPTION	QTY	UNIT COST	EXTENDED PRICE	GST-HST PST/QST	TOTAL DUE
NO. D'UNITE	NOM DU CONDUCTEUR	NO. DE SERIE	NO. DE CARTE	KM AUTORISE	NO. DE REFERENCE DATE DE LA TRANS.	NOM DU FOURNISSEUR POINT DE VENTE	DESCRIPTION DES FRAIS	QTE	COUT UNIT	TOTAL	TPS-TVH TVP/TVQ	MONTANT TOTAL DU
C	CUSANELLI				12/11/14	EDMONTON	AB				3.96-	
							GST-HST / TPS-TVH				3.96-	
							REF GST-HST / TPS-TVH REF					83.08-
							** REF NO TOT / TOT NO REF **					
							SUBTOTAL / SOUS TOT			79.12-	3.96-	83.08-
							DISCOUNT / RABAIS			.79		.79-
							TOTAL / TOTAL			78.33-		82.29-
					000408631482	FASGAS						
					12/11/14	EDMONTON	AB		82.7	1.00	79.12	
							GST-HST / TPS-TVH				3.96	
							REF GST-HST / TPS-TVH REF				3.96	
							** REF NO TOT / TOT NO REF **					83.08
							SUBTOTAL / SOUS TOT			79.12	3.96	83.08
							DISCOUNT / RABAIS			.79-		.79-
							TOTAL / TOTAL			78.33		82.29
					000408426739	FASGAS						
					12/05/14	EDMONTON	AB		82.9-	1.04	82.07-	
							UNLEADED PREMIUM GASOLINE				4.34-	
							GST-HST / TPS-TVH				4.34-	
							MISCELLANEOUS	1.0-	4.75	4.75-		
							REF GST-HST / TPS-TVH REF				4.34-	
							** REF NO TOT / TOT NO REF **					91.16-
							SUBTOTAL / SOUS TOT			86.82-	4.34-	91.16-
							DISCOUNT / RABAIS			.82		.82
							TOTAL / TOTAL			86.00-		90.34-
					000408631481	FASGAS						
					12/05/14	EDMONTON	AB		82.9	1.04	82.07	
							UNLEADED PREMIUM GASOLINE				4.10	
							GST-HST / TPS-TVH				4.34	
							MISCELLANEOUS	1.0	4.51	4.51		
							GST-HST / TPS-TVH				.24	
							REF GST-HST / TPS-TVH REF				4.34	
							** REF NO TOT / TOT NO REF **					90.92
							SUBTOTAL / SOUS TOT			86.58	4.34	90.92
							DISCOUNT / RABAIS			.82-		.82-
							TOTAL / TOTAL			85.76		90.10
					UNIT TOTAL / TOT UNITE							
							FUEL QTY / QTE CARB	230.1				
							TOT CHARGES / TOT FRAIS			190.09		
							TOT GST-HST / TOT TPS-TVH				10.36	
							UNIT TOTAL / TOT UNITE					200.45
							DISCOUNT / RABAIS					.16
							TOTAL / TOTAL					200.61
					BKDN TOTALS / TOTAUX CODIFICATION							200.45
					01-07							.16
												200.61
							FUEL QTY / QTE CARB	230.1				
							TOT CHARGES / TOT FRAIS			190.09		
							GST-HST/TPS-TVH				10.36	
							BKDN TOTALS / TOTAUX CODIFICATION					200.45
							DISCOUNT / RABAIS					.16
							TOTAL / TOTAL					200.61

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 - 151 OF 283
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-07-C. CUSANELLI
- -
- -
- -
- -

CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
INVOICE DATE 04/01/15
DATE DE LA FACTURE
INVOICE NO. 0006227619
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
[REDACTED] C	CUSANELLI	[REDACTED]	[REDACTED]	[REDACTED]	000411032472 03/09/15	FEDERATED COOPERATIVES L MITED CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	72.2	1.08	74.29	3.71 3.71	78.00 78.00
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	72.2		74.29	3.71	78.00
BKDN TOTALS / TOTAUX CODIFICATION 01-07							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	72.2		74.29	3.71	
BKDN TOTALS / TOTAUX CODIFICATION												78.00

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

Gas

Calgary Co-op
Richmond Rd Gas Bar
4940 Richmond Rd SW
Calgary Alberta
(403) 299-4374
GST#R100730894

IC # [REDACTED]

litres Price/L
0.42 \$1.369

Product Amount
Premium \$126.01

Total \$126.01

GST (Inc Pump) \$6.00

MASTERCARD

[REDACTED]

Auth#: [REDACTED]
Ref#: 0019740470 S
08/22/14 18:17
Or Approved - Thank
You 027

08/22/14 18:03
Store # 06
Receipt # 91/03
Term ID # 66073813

Purchase

Thank You !!!

126.01

6.00 gst incl

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

✓
#1 905 1ST AVE. N.W.
AIRDRIE AB T4B 2X7

ISS: EMPLESS PAY

MAC'S CONVENIENCE ST
00303174
#1-905 1 AVE N.W
AIRDRIE, AB T4B 2X7
URN:R104855408
09/03/2014 565352169
12:57:23 PM

PUMP#
SUPRM 73.584L
PRICE/L 1.359
FUEL TOTAL \$ 100.00

GST1 in fuel \$ 4.76
CREDIT \$ 100.00

TYPE: PURCHASE
ACCOUNT: MASTERCARD \$100.00
AUTH: [REDACTED] INVOICE: TFX63652
CARD NUMBER: C **** * [REDACTED]
VERIFIED BY PIN
A- MasterCard
B- 0000000041010

01 Approved - Thank You 027
LOYALTY: NO
IMPORTANT - retain this copy for your
records

THANK YOU

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

Calgary Co-op
Richmond Rd Gas Bar
4940 Richmond Rd SW
Calgary Alberta
(403) 299-4374
GST#R100730894

Member # [REDACTED]

Pump	Litres	Price/L
09	86.542	\$1.329

Product	Amount
Premium	\$115.01

Total \$115.01

GST (Inc Pumps) \$5.48

MASTERCARD
[REDACTED]

Auth#: [REDACTED]
Ref#: 0019990020 S
09/17/14 06:22
01 Approved - Thank
You 027

09/17/14	06:06
Store #	06
Receipt #	98502
Term ID #	66073813

Purchase

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

Calgary Co-op
Richmond Rd Gas Bar
4940 Richmond Rd SW
Calgary Alberta
(403) 299-4374
GST#R100730894

Member # [REDACTED]

Pump	Litres	Price/L
13	81.877	\$1.319

Product	Amount
Premium	\$108.00
Total	\$108.00
GST(Incl Pumps)	\$5.14

MASTERCARD
[REDACTED]

Auth#:
Ref#: 0018640220 S
09/20/14 16:21
01 Approved - Thank
You 027

09/20/14 16:09
Store # 06
Receipt # 99519
Term ID # 66073817

Purchase
Thank You !!!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas



===== TRANSACTION RECORD =====

Fas Gas
3006 Calgary Trail South
Edmonton, Alberta
T6J 6V4
780-461-4338

Store#	Batch	Seq	Register#	Slip#
50147	1564	156	02	269138
GST #838553816				Cashier: Cashier Pos2
Item				Amount

PREMIUM	\$107.91#
Pump #2 85.032 Litres@ \$1.269/L	

GST INCLUDED:	\$5.14
Sub Total:	\$107.91
Total:	\$107.91
DATE: 2014/10/09	TIME: 12:22:48

TYPE: Purchase

ACCT: MASTERCARD \$ 107.91

CARD NUMBER: *****
DATE/TIME: 10/09/2014 12:22:54
REFERENCE #: 0016990880 C
TERM: 66209142
AUTHOR.# :
AID: A0000000041010
TVR: 0000008000

VERIFIED BY PIN

MasterCard
01 Approved - Thank you 027

IMPORTANT:
retain this copy for your records

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas



===== TRANSACTION RECORD =====

Fas Gas
3006 Calgary Trail South
Edmonton, Alberta
T6J 6V4
780-461-4338

Store#	Batch Seq	Register#	Slip#
50147	1591 203	02	275101
GST #838653816		Cashier: Cashier Pos2	
Item	Amount		

PREMIUM	\$102.07#
Pump #4 86.941 Litres@ \$1.174/L	

GST INCLUDED:	\$4.86
Sub Total:	\$102.07
Total:	\$102.07
DATE: 2014/10/22	TIME: 18:54:50

TYPE: Purchase	INTERAC
ADCT: INTERAC	\$ 102.07

CARD NUMBER: [REDACTED]
DATE/TIME: 10/22/2014 18:54:52
REFERENCE #: 0017122330 C
TERMIN: 66209142
[REDACTED]

Interac

AID: A9000002771010
TVR: 8000008000

VERIFIED BY PIN

00 Approved - Thank you 001

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

CANADIAN TIRE
6106 50th Street
Leduc, Alberta
T9E-6P2

2014-10-22 08:45:21 TRANS #: 644530
GST: 863578019
Paypoint : 01K

FUEL	(L)	(\$/L)	(\$)
Pump 4			
Premium	17.112	1.169	20.00
GST INCLUDED IN FUEL \$ 0.95			
TOTAL		\$	20.00
CASH TENDERED			20.00
C.T. Money Issued			
Fuel Reward			0.70
Earned 4.0 CPL in CT Money			
STATION #: 1870			
ENTER SURVEY & WIN!!			
It pays to			
buy gas here			

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

87.254L @ 1.169/L

✓
DONS GAS # 108
5373 103 STREET
RIVIERA
EDMONTON AB T6H 4P8
(780) 421-1614

DEBIT SALE

MID: 4195594
TID: A4195594 REF#: 00000018
Batch #: 061 SEQ: 061001001018
10/26/14 19:14:48
APPR CODE: [REDACTED]
DEBIT/CHEQUING

AMOUNT \$102.00

00 - APPROVED - 001

4.86 gst incl

Interac
AID: A0000002771010
TVR: 80 00 00 80 00
TSI: 68 00

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Car wash at Western Pride

Western Pride
Car Wash

22-Sep-2014 5:22 PM

Purchase Txn: 0:10597 \$ 12.00
Extreme Wash

Payment: \$ 12.00
Credit Card: ?
Exp: XX-XX

Change: \$ 0.00

Thank-you for
using our wash.
Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:


Oil change for vehicle



Minit Lube
4529 Bow Trail SW
Calgary, Alberta T3C 2G3
(403) 539-9495

INVOICE #: 7181402
DATE: 11/12/2014

TIME: 6:12 PM
GST#: R103707055

CUSTOMER INFORMATION		VEHICLE INFORMATION	
CHRISTINE CUSANELLI [REDACTED]		[REDACTED]	
<p>IMPORTANT: OUR VISUAL INSPECTION IS ONLY INTENDED TO ADVISE YOU OF ITEMS WHICH MAY REQUIRE SERVICE ATTENTION. IT IS NOT A MECHANICAL INSPECTION. PLEASE SEE A QUALIFIED MECHANIC FOR MECHANICAL REPAIR.</p>			
MULTI-POINT INSPECTION CHECKLIST		DESCRIPTION	PRICE
1. Change Oil	Completed	Full Service 0W40 Mobil 1 Synthetic	1.00 95.95
2. Replace Oil Filter	Completed	Oil Filter FRAM CH11038 Porsche BMW	1.00 17.00
3. Lubricate Chassis	Sealed	Mobil 1 0W40 SYN (8.5 L.)	3.50 45.50
4. Wiper Blades	Cust OK	Gasket Alum 18mm	1.00 0.50
5. Battery	Maint Free	Oil level on arrival: Level OK	1.00 0.00
6. Windshield Washer Fluid	Level OK	Environmental Fee	1.00 3.99
7. Power Steering Fluid	Not Checked		
8. Radiator Fluid	Level OK		
9. Serpentine Belt	Appears OK		
10. Air Filter	Not Checked		
11. PCV Filter	N/A		
12. PCV Valve	N/A		
13. Cabin Filter	Not Checked		
14. Lights	Cust OK		
15. Transmission Fluid Level	Not Checked		
16. Front Diff. Fluid Level	Level OK		
17. Transfer Case Fluid	Level OK		
18. Rear Diff. Fluid Level	Level OK		
19. Check Hoses	Appears OK		
20. Check Front Tires	Level OK		
21. Check Rear Tires	Level OK		
22. Fuel System	Not Checked		
23. Double Check	O.K.		
		 FRAM® DATE DUE Feb 10, 15 MILEAGE 100678 ** based on 5000 LAST OIL Mobil 1 0W40 SYN PHONE # (403) 539-9495 www.minitlube.com	
		SubTotal 162.94 Sale 162.94 GST (5%) 8.15 Total 171.09 Interac 171.09	

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: _____

Expense Category: Car Wash

For hosting, select one:

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

Purpose:

Car wash for vehicle

Western Pride
Car Wash

19-Dec-2014 2:54 PM

Purchase Txn:0:13813
Extreme Wash \$ 12.00

 \$ 12.00

Change: \$ 0.00

Thank-you for
using our wash.
Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: _____

Expense Category: Car Wash

For hosting, select one:

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

Purpose:

Car wash for vehicle

Receipt
Western Pride
Car Wash

22-Nov-2014 11:30 AM

Purchase Txn:0:12147	
Extreme Wash	\$ 12.00
Amount:	\$ 12.00
Change:	\$ 0.00

Thank-you for
using our wash.
Please come again!

CHRISTINE CUSANELLI, MLA

CALGARY-CURRIE CONSTITUENCY

FUEL AND MINOR MAINTENANCE CATEGORY IS UNDERSTATED BY \$199.53

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking for am meeting with constituent

*Parking for am mtg @
PClub w
const.*
BOW VALLEY SQUARE

RECEIPT C1

ENTRY TIME:

19.09.14 07:26

EXIT TIME:

19.09.14 09:08

PARK-DUR.: 1HRS 42MIN

01:42

AMOUNT:

\$ 24.00

KIND OF PAYMENT:

CASH

IMPARK THANKS YOU

GST No. 887315638

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking for meetings

SECURITY (403) 537-7000

CALGARY PARKING AUTHORITY

Terminal: 421

Zone: 3127

Plate: _____

Valid through:

FRIDAY 24 OCT 14

1:06 PM

*UOI
meetings*

AMOUNT PAID: \$3.25 (GST incl.)

Auth No: _____

Start Time: 10/24/2014 12:01 PM

Receipt No: 18800

Security Services (403) 537-7006

FREE Battery Boosting & Tire Inflation



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
C CUSANELLI MLA
LEGIS ASSEMBLY OF AB

Membership Number

Date
December 16, 2014

Page 1 of 2

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
------------------	----------------------	--	----------------

Statement includes payments and charges received by December 16, 2014

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.

Credit Limit Summary On December 16, 2014

Total Credit Limit \$

Available Credit Limit \$

New Transactions for C CUSANELLI MLA

Amount \$

November 20	HYATT REGENCY CALGAR CALGARY Goods or Services	39.00
November 29	IMPARK00030080U CALGARY Goods or Services	10.50

December 6	ADV PARKING00590015A CALGARY Goods or Services	25.00
------------	---	-------

Total New Transactions for C CUSANELLI MLA

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

μ Please detach here μ

Membership Num

000269



C CUSANELLI MLA
LEGIS ASSEMBLY OF AB
901 9718 107 STREET
EDMONTON AB
T5K 1E4

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



2847



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
C CUSANELLI MLA
LEGIS ASSEMBLY OF AB

Membership Number

Date
January 16, 2015

Page 1 of 2

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$

Statement includes payments and charges received by January 16, 2015

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.

Credit Limit Summary On January 16, 2015

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

January 16 Payment Received Thank You

New Transactions for C CUSANELLI MLA

Amount \$

January 9	ADV PARKING00590015A CALGARY Goods or Services	25.00
January 14	CalgParkAuth 1595599 CALGARY GOVERNMENT SERVICES	4.00
Total New Transactions for C CUSANELLI MLA		29.00

μ Please detach here μ

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

Membership Number

Amount Due \$

29.00

Amount Paid \$

000256



C CUSANELLI MLA
LEGIS ASSEMBLY OF AB
901 9718 107 STREET
EDMONTON AB
T5K 1E4

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: Christine Cusanelli

Claimant Name:

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Travel from Edmonton to Constituency

Chelaine Winter

From: Christine Cusanelli [cusanelli4currie@gmail.com]
Sent: Thursday, September 11, 2014 5:12 PM
To: Chelaine Winter
Subject: Fwd: Invoice return to yyc

Please complete expense claim.

Sent from my iPhone

Begin forwarded message:

From: Red Arrow Reservations <itinerary@redarrow.ca>
Date: September 11, 2014 at 3:54:26 PM MDT
To: "Cusanelli4currie@gmail.com" <Cusanelli4currie@gmail.com>
Subject: Invoice



Invoice

Date: 2014-09-11

Bill To: You can reach us at:

Website User

Order#	Ordered	Customer#	P.O.	Group Name	Departing	Returning	Sales Rep	Sales Agent
1289375	2014-09-11	139230	-	-	2014-09-11	2014-09-11	-	Website User

Travellers:

Cusanelli/Christine

Product	Details	Duration	Price Basis	Qty	Each	Bill
ECEXP 18:30 Assigned to: 02B	Departs Edmonton (EDMTO / Edmonton Ticket Office) 2014-09-11 at 18:30 Arrives Calgary (CALTO / Calgary Ticket Office) 2014-09-11 at 21:50	3 hrs 20 mins	Adult	1	70.48	74.0

Payments Received:

Date	From	Reference	Amount
			74.00 CAD

Base Price:	70.48 CA
Discounts:	0.00 CAE
Service Charges:	0.00 CAE
GST	3.52 CAE
Invoice Total:	74.00 CA

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Taxi ride from bus terminal to home

ASSOCIATED CAB
221 35 AVENUE N E T2E2K7
CALGARY AB
22143100

1111 PURCHASE 1111

01-27-2014 22:39:02
Acct # [REDACTED]
Exp Date [REDACTED] Card Type MC
NAME MS CHRISTINE CUSANELLI
A0000000041010 MasterCard

Trace # 700016
E92113100479
Inv. # 2236
[REDACTED] RRN 001001109

Purchase	\$19.40
Tip	\$3.00
Total	\$22.40

(00) APPROVED-THANK YOU

Retain this copy for your records

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Checker/ Yellow cab ride

CHECKER/YELLOW CAB
316 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

Merchant ID: 4327658R
Driver ID: 7072
Record Num.: 0002

Sale

Application Label: Interac
Chequing

7695

AID: A0000002771010

INTERAC

Entry Method: Chip

Amount: \$ 16.10
Tip: \$ 0.00

Total: CAD\$ 16.10

2014/09/10

11:50

ISO Code: 00

Bank Code:

Card: 001001018

Code: 00

80000068000
68000

/A: 000040

Appr Code: 0000

Acqrd: OnLine

Batch#: 000007

DESCRIPTION

THANK YOU
CHECKER-YELLOW CAB
(403)259-9999
WWW.THECHECKERGROUP.COM

CARDHOLDER COPY

RETAIN THIS COPY FOR STATEMENT
VERIFICATION

TERMINAL ID: 319 633-021
VEHICLE ID: 0268
DRIVER ID: 7072
TRIP NUMBER: 27643
PASSENGERS: 1
09/10/2014
START: 11:47
DISTANCE: 7.50
END: 11:58
RATE: 1
FARE AMOUNT: \$ 16.10

TOTAL: \$ 16.10

INTERAC:

APPROVAL NUMBER:

PASSENGER COPY

THANK YOU
CHECKER-YELLOW CAB
(403)259-9999
WWW.THECHECKERGROUP.COM

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Christine Cusanelli

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

Associated cab ride

ASSOCIATED CABS
307-41 AVENUE N.E.
CALGARY, AB T2E 2N4
403-299-1111

Merch Id:
Item #: 0063
DBT PURCHASE
Acct:

00 APPROVED 001

Chequing	
AMOUNT	\$17.70
TIP	\$1.77
TOTAL	\$19.47

Ref. #: 60098428 0010014970 S
Auth. #:

THANK YOU
TAXI#26

Date: 14/09/12 Time: 09:44A
Response: AUTH 229123



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
C CUSANELLI MLA
LEGIS ASSEMBLY OF AB

Membership Number

Date
December 16, 2014

Page 1 of 2

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$

Statement includes payments and charges received by December 16, 2014

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.

Credit Limit Summary
On December 16, 2014

Total Credit Limit \$

Available Credit Limit \$

New Transactions for C CUSANELLI MLA

Amount \$

December 5 ASSOCIATED CAB//ALLI CALGARY
TAXICABS AND LIMOUSINES

17.80

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

μ Please detach here μ

Membership Number

000269



C CUSANELLI MLA
LEGIS ASSEMBLY OF AB
901 9718 107 STREET
EDMONTON AB
T5K 1E4

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



2847



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
C CUSANELLI MLA
LEGIS ASSEMBLY OF AB

Membership Number

Date
December 16, 2014

Page 1 of 2

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
------------------	----------------------	--	----------------

Statement includes payments and charges received by December 16, 2014

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.

Credit Limit Summary
On December 16, 2014

Total Credit Limit \$

Available Credit Limit \$

New Transactions for C CUSANELLI MLA

Amount \$

November 30	ENTERPRISE RENTACAR CALGARY		105.37
	Location	Date	
	Rental: Calgary	28/11/14	
	Return: Calgary	30/11/14	
	Agreement 000000000		

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

µ Please detach here µ

Membership Number

\$

000269



C CUSANELLI MLA
LEGIS ASSEMBLY OF AB
901 9718 107 STREET
EDMONTON AB
T5K 1E4

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: Christine Cusanelli

Claimant Name:

Expense Category: Vehicle Lease/Rental

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

Car rental in Calgary

Page 1 of 1

ENTERPRISE RENT A CAR, 1036 - 9 AVENUE SW, CALGARY, AB T2P1L9 (403) 212-5232

RENTAL AGREEMENT REF#

SUMMARY OF CHARGES

RENTER
CUSANELLI, CHRISTINE

DATE & TIME OUT
01/11/2013 02:30 PM
DATE & TIME IN
04/11/2013 06:52 AM

BILLING CYCLE
24-HOUR

VEH #1 2012 NISN ALTI 4DRS

KM DRIVEN 61

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	01/11 - 04/11	3	DAY	\$22.97	\$68.91
REFUELING CHARGE	01/11 - 04/11				\$0.00
Subtotal:					\$68.91
Taxes & Surcharges					
GST	01/11 - 04/11			5%	\$3.59
VLF	01/11 - 04/11	3	DAY	\$0.95	\$2.85
VLF AMVIC LEVY	01/11 - 04/11	3	DAY	\$0.02	\$0.06
Total Charges:					\$75.41
Bill-To / Deposits					
DEPOSITS					-\$75.41

Total Amount Due \$0.00

PAYMENT INFORMATION

AMOUNT PAID TYPE
\$75.41 Mastercard

CREDIT CARD NUMBER



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)

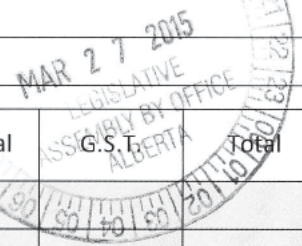
Member Name: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: January

Year: 2014

Employee #:



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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
13	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
22	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
30	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$149.43	\$7.47	\$156.90

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

Mar 26/15



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: February

Year: 2014

Employee #:

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	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
5	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$59.33	\$2.97	\$62.30

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

Mar 26/15
Date



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: April

Year: 2014

Employee #:

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
7	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
9	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
10	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
11	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
14	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
15	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
16	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
17	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
22	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
23	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
24	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$404.52	\$20.23	\$424.75

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

Mar 26/15



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: May

Year: 2014

Employee #:

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
5	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
6	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
13	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
27	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$246.14	\$12.31	\$258.45

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

Mar 26/15



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: June

Year: 2014

Employee #:

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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
17	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
18	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$136.29	\$6.81	\$143.10

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

Mar 26/15



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: July

Year: 2014

Employee #:

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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$48.33	\$2.42	\$50.75

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

Mar 26/15



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: August

Year: 2014

Employee #:

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
21	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$39.57	\$1.98	\$41.55

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

Mar 26/15



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: September

Year: 2014

Employee #:

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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$79.14	\$3.96	\$83.10

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

Mar 26/15



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: October

Year: 2014

Employee #:

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	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
8	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
9	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
22	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
23	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
29	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$136.10	\$6.80	\$142.90

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

CM MAR 24 2015 1

Date

March 12, 2015



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: November

Year: 2014

Employee #:

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
5	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
17	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
18	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
19	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
24	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
25	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
26	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$347.33	\$17.37	\$364.70

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

March 12, 2015
Date

CM MAR 24 2015 1



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: December

Year: 2014

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
2	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
3	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
4	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
5	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
11	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
18	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$307.86	\$15.39	\$323.25

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

March 12, 2015
Date

CM MAR 24 2015 1



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: January

Year: 2015

Employee #:

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
26	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
28	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
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						\$127.43	\$6.37	\$133.80

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

CM MAR 24 2015 1



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: Cusanelli, Christine

Constituency: Calgary-Currie

For the Month of: March

Year: 2015

Employee #:

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
10	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
11	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
13	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
25	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
26	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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						\$246.14	\$12.31	\$258.45

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

Mar 26/15

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli
Claimant Name: _____
Expense Category: Hosting

For hosting, select one:

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

Purpose:

Hosted coffee discussion with MLA and Constituents in Calgary-Currie Constituency.

FITZ FLOORING LTD
10 4623 BOW TRAIL SW
CALGARY, AB T2C 2G6
(403) 686-3370
95292495727

REPRINT

TERM ID: AA929249 BATCH#: 309
SHIFT#: 002

Sale
INV#: 000000017
MCARD Chip
SEQR: 309001001017
Application Label: MasterCard
AID: A6000000041010
TVR:00 00 00 00 00
TSI:E8 00
*****1

Amount: \$ 32.18
Tip: \$ 5.00
=====

Total: CAD\$ 37.18

APPROVED [Signature]
001/00
NO SIGNATURE REQUIRED

14-Nov -14 10:54:52

MERCHANT COPY
THANK YOU!

*Guest Check
Addition*

TABLE NO. N° DE TABLE	SERVER SERVEUR	GUESTS / NOMBRE DE PERSONNES	DATE
MEALS / REPAS			AMOUNT MONTANT
	MUFFINS x 8		1.50
	COFFEE x 3		1.50
	TEA x 2		1.50
	HC x 2		2.50
24.50			
BEVERAGES / BOISSONS			
	MLA		
	Trg coffee		2.15
	Cappuccino		1.00
SUB-TOTAL TOTAL PARTIEL			
GST / HST TPS / TVH			
PST TVP			
TOTAL			6973637
Thank You! Merci!			
Guest Receipt Reçu du client			
TABLE NO. N° DE TABLE	SERVER SERVEUR	GUESTS / NOMBRE DE PERSONNES	DATE
TOTAL			6973637

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosted coffee discussion with MLA and Constituents in Calgary-Currie Constituency.

COFFEE CATS CAFE
(403) 240-1842
2765-17 AVE SW
THANK YOU

11-21-2014 MC #:0000

DEPT 1	*2.38T1
DEPT 1	*2.38T1
DEPT 1	*2.62T1
DEPT 1	*5.20T1
DEPT 1	*2.15T1
DEPT 1	*4.50T1
DEPT 1	*2.38T1
DEPT 1	*2.38T1
DEPT 4	*2.86T1
DEPT 4	*2.86T1
DEPT 4	*2.86T1
DEPT 4	*2.86T1
	*1.77T1

TOTAL *37.20
CASH *37.20

AM 3-42 0078

HAVE A NICE DAY
PLEASE COME AGAIN

COFFEE CATS CAFE INC
2765 17TH AVE SW
CALGARY AB T2C 1P7

CARD *****
CARD TYPE MASTERCARD
DATE 2014/11/21
TIME 14:42:51
RECEIPT NUMBER
084012660400417 022-0

PURCHASE
AMOUNT \$37.20
TIP \$5.00
TOTAL

\$42.20

MasterCard
A0000000041010
776BA313524E0E27
0000008000-E800
546D9AEB9627D402

APPROVED

AUTH# 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Calgary - Currie Office

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☒ Group: Water for constituents that come into the office

Purpose:

To be able to offer water, coffee or tea when people come into the office for meetings



better water. pure and simple.™

H.S.T. # 813808607 RT 0001

INVOICE

Remit Payment to:
Culligan Water Treatment
1110 58th Ave., SE
Calgary AB T2H 2C9
(403) 243-5141
CalgCustServ@culliganwater.ca

Invoice #: 91949TD
Invoice Date: 09/12/2014
Shipped: / /
PO No:
Customer No: 
Due Date: 10/12/2014

Balance: \$40.39

Billing Address:
Calgary - Currie
CONSTITUENCY OFFICE
2108B 33 Ave Sw
Calgary AB T2T 1Z6

Location Address:
Calgary - Currie
2108B 33 Ave Sw
Calgary AB T2T 1Z6

Comments:

Service Date	Description	Comments	Reference	Qty.	Price	Amount
09/12/2014	Water Bottled Dist'd 18l			2	8.88	17.76
09/12/2014	Bottle Deposit	Dp. 2 Rt. 0		2	10.00	20.00
09/11/2014	Delivery Fee			1	2.50	2.50



Please include Customer No. and Invoice No. with your payment.

Page 1 of 1

Sub-Total: \$40.26



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Calgary - Currie

Expense Category: Hosting

For hosting, select one:

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

Purpose:

To be able to offer water, coffee or tea when people come into the office for meetings



better water. pure and simple.™

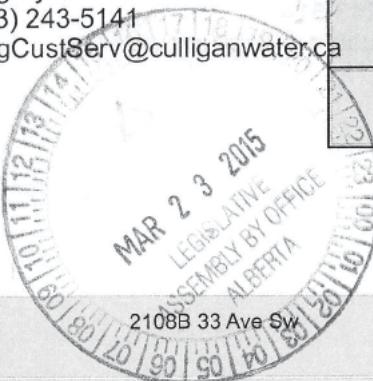
H.S.T. # 813808607 RT 0001

BILL TO:

Calgary - Currie
CONSTITUENCY OFFICE
2108B 33 Ave Sw
Calgary AB T2T 1Z6

INVOICE

Remit Payment To:
Culligan Water
1110 58th Ave., SE
Calgary AB T2H 2C9
(403) 243-5141
CalgCustServ@culliganwater.ca



Account Number	
Date	02/18/2015
Terms:	Net 30
PAYMENT NUMBER	
(paying this number pays this group of invoices detailed below totaling):	10.39
Total Account Balance (see attached summary at end)	10.39

Past Due Balances are now subject to 2% interest
Please pay within payment terms!

Calgary - Currie

2108B 33 Ave Sw

Calgary AB T2T 1Z6

INV#	DATE	PO#	DESCRIPTION	INVOICE TOTAL
65391TE	02/06/2015			30.39
	02/06/2015	2	Water Bottled Dist'd 18l	D-65391 6 17.76
	02/06/2015	1	Bottle Deposit	D-65391 6 10.00
	02/06/2015	1	Delivery Fee	D-N0008 2.50
	02/06/2015	0	Sales Tax	D-N0008 0.13

INV#	DATE	PO#	DESCRIPTION	INVOICE TOTAL
99645TD	12/09/2014			-20.00
	12/09/2014	-2	Bottle Deposit	D-99645 6 -20.00
	12/09/2014	0	Water Bottled Dist'd 18l	D-99645RD6 0.00
	12/09/2014	0	Delivery Fee	D-N0005 0.00



PLEASE SUBMIT PAYMENT STUB WITH CHEQUE
ONLINE PAYEE NAME IS CULLIGAN WATER CAMBRIDGE

Page 1



better water. pure and simple.™

From: Calgary - Currie
CONSTITUENCY OFFICE
2108B 33 Ave Sw
Calgary AB T2T 1Z6

ACCOUNT NUMBER	
Date	02/18/2015
PAYMENT NUMBER	10.39

Please specify any additional invoices you are paying:

INVOICE #	AMOUNT
TOTAL CHEQUE AMOUNT	

Culligan Water
1110 58th Ave., SE
Calgary AB T2H 2C9

CM MAR 25 2015 3

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: Bridget Swagar

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☒ Group: Group of Constituents

Purpose:

MLA held a open house on Feb 17th for constituents to drop in to talk about the 2015 Budget and give feedback



Safeway Westbrook
1200 - 37 Street SW Calgary AB
Phone: 403.246.0003
GST# 817093735

Served by: Yves D

Member card number [REDACTED]
Spr Water 500ML 24Pk \$5.69 D
+CRF/RECYCLING FEE 90930 DP \$0.24
+DEPOSIT 90126 DP \$2.40
Spr Water 500ML 24Pk \$5.69 D
+CRF/RECYCLING FEE 90930 DP \$0.24
+DEPOSIT 90126 DP \$2.40

Fruit Party Platter \$16.99 GD
Fruit Party Platter \$16.99 GD

AIR MILES Base Offer
=> 3 AIR MILES
3 @ 1 each

SUBTOTAL
5% GST

TOTAL

Visa
Cash

TENDER
CHANGE

NUMBER OF ITEMS 8

Member card number: [REDACTED]
AIR MILES earned this visit 3
AIR MILES Cash balance 0
AIR MILES Dream balance 5236

CLIENT ID 9803 INSERTED
TERMINAL ID 000
** PU
CARD
NO. *
DATE
AUTH
APPL.
AID
TVR

APPROVED

NO SIGNATURE REQUIRED

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

Term Tran Store Oper 02/17/15
2 5073 8809 126 13:30:29

Thank you for shopping at Our Store
Come Again Soon

How was your shopping experience?
Please share your thoughts online.
safewaycanada.survey.marketforce.com

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: christine Cusanelli

Claimant Name: Bridget Swagar

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: constituents

Purpose:

Host a coffee and chat so that constituents can stop in for an informal discussion with the member about concerns they may have.

YOUR RECEIPT
 THANK YOU
 CALL AGAIN

03-06-2015 17:30
 REG 0056

DEPT02	T1	\$1.50
DEPT02	T1	\$1.50
DEPT02	T1	\$3.00
DEPT02	T1	\$3.00
DEPT02	T1	\$2.00
DEPT02	T1	\$2.00
DEPT02	T1	\$3.00
DEPT02	T1	\$2.50
DEPT02	T1	\$2.50
DEPT02	T1	\$1.80
DEPT02	T1	\$1.80
DEPT02	T1	\$1.80
DEPT02	T1	\$1.80
TA1		\$28.20
TAX1		\$1.41
CHECK		\$29.61

FITZ FLOORING LTD
 10 4623 BOW TRAIL SW
 CALGARY, AB T2C 2G6
 (403) 686-3370
 99292495727

TERM ID: AA929249

BATCH#: 421
 SHIFT#: 003

Sale

INVT: 0000000018
 INTERAC Account Type: Chequing
 SEQ#: 421001001017

Application Label: INTERAC
 AID: A0000002771010
 TVR:80 80 00 00 00
 TSI:68 00

Total: CAD\$ 29.61

APPROVE

001700

NO SIGNATURE REQUIRED

06-Mar -15

12:31:36

THANK YOU!

*Guest Check
 Addition*

TABLE NO. N° DE TABLE	SERVER SERVEUR	GUESTS / NOMBRE DE PERSONNES	DATE
MEALS / REPAS			AMOUNT MONTANT
2 cookies			2.00
2 brownies			6.00
2 blueberry CHOC			3.00
2 croissants			4.00
2 kids HL			5.00
ARI Grey 4RA			1.50
BEVERAGES / BOISSONS			
sm coffee x 2			1.50
sm coffee x 2			1.50
sm coffee x 2			1.50
SUB-TOTAL TOTAL PARTIEL			28.20
GST / HST TPS / TVH			1.41
PST TVP			
TOTAL			29.61
Thank You! Merci!			6973189
Guest Receipt Reçu du client			
TABLE NO. N° DE TABLE	SERVER SERVEUR	GUESTS / NOMBRE DE PERSONNES	DATE
TOTAL			6973189

HP-GA

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MAC'S

11/13/2014

11:00 AM

857065

10 24

* REPRINT *

1087	COFFEE 12OZ	1.50
1087	COFFEE 12OZ	1.50
1087	COFFEE 12OZ	1.50
Cash		50.00
Cash Change Adjustment		0.02
SUBTOTAL		4.52
GST		0.23
TOTAL		4.75
TOTAL TENDERED		50.00
CHANGE		45.25

Store 22004 GST#R104855408
2104 33RD AVENUE S.W. CALGARY AB
Please Come Again!
For Customer Service call 800 424-2403
VISIT MACS.CA & apply to join our team!
Please ask about our Mac's Gift Card

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Christine Cusanelli

Claimant Name:

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

SHOPPERS
DRUG MART

53RD AVENUE 2387
2067 3rd AVENUE SW, CALGARY, AB, T2T 1Z5
403-685-6807

2387 1010 290522 230516 3

SALE

ASSIM NABOB	N	8.99
ASSIM HOUSE BLND	N	8.49

SUBTOTAL:

5.0%GST

3 items

TOTAL:

CASH:

CHANGE DUE:

ROUNDED CHANGE:

WITH A SHOPPERS OPTIMUM CARD
YOU COULD HAVE EARNED THESE POINTS: 280

Sign up for exclusive email offers
today at shoppersdrugmart.ca/email.

GST #: 83718-5156 RT0002



9990223871010002905226

Return Receipt for return within 30 days.
Visit shoppersdrugmart.ca for exclusions.

Discover the Best in Health and Beauty
Aug 12, 2014 2:37 PM

CHRISTINE CUSANELLI, MLA

CALGARY-CURRIE CONSTITUENCY

HOSTING ACCRUAL + \$10.39