

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2016-17
025 - Calgary-South East - Fraser, Rick
For Expenses Processed July 1 - September 30, 2016

| | Budget | Used this Quarter | Used To-Date |
|--|-------------|----------------------|-----------------|
| Financial Reporting - \$ (Receipts attached) | | | |
| Transportation | | | |
| Fuel and Minor Maintenance - \$ | | \$757.55 | \$2,385.60 |
| MLA Parking Cap - \$ | \$900.00 | \$67.11 | \$190.74 |
| Other Travel - Parking - \$ | | | |
| Member Travel (overnight stay in constituency) - \$ | | | |
| Taxi, Bus Travel - \$ | | \$172.10 | \$344.25 |
| Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ | | | |
| Member Travel (Meal Per Diems) - \$ | | \$375.96 | \$1,176.05 |
| Accommodation | | | |
| Edmonton Accommodation Allowance (\$23,160.00/yr max) | \$23,160.00 | \$5,790.00 | \$11,580.00 |
| Travel Accommodations Allowance | | | |
| Travel Accommodations Allowance (days; 10 max) - NF | 10 | | |
| Other | | | |
| Hosting - \$ | | \$311.99 | \$324.67 |
| Non-Financial Reporting | | | |
| Use of Private Automobile (43.5 cents per km) | | | |
| Constituency Travel (Kilometres) - NF | 35,000 | 7,258 | 9,733 |
| Special Trips (5 trips per year) - NF | 5 | | |
| Travel To and From the Capital | | | |
| Travel by Air, Bus or Train (Unlimited Trips) - NF | | | |
| Use of a Private Automobile (52 trips per year) - NF | 52 | 8 | 19 |
| 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



BFD290001

| | | |
|---|--|--|
| <p>FLEET MANAGEMENT SERVICES DETAIL DETAILS SERVICES DE GESTION DE PARC</p> <p>PAGE - 167 OF 260 DE</p> | <p>CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION</p> <p>SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-25-R FRASER</p> <p>- - - - - - - -</p> | <p>CLIENT NO. NO DU CLIENT INVOICE DATE DATE DE LA FACTURE INVOICE NO. NO DE LA FACTURE</p> <p>08/01/16 0006443170</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 |
|------------------------|---|------------------------|--------------------------|-----------------------------------|--|--|---|------------|------------------------|----------------------------|--|----------------------------------|
| | FRASER | | | | 000439267601 07/04/16 | IMPERIAL OIL PONOKA AB | ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 62.0 | .97 | 57.18 | 2.86 2.86 | 60.04 60.04 |
| | | | | | 000439267600 06/27/16 | IMPERIAL OIL CROSSFIELD AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 110.4 | .96 | 101.36 | 5.07 5.07 | 106.43 106.43 |
| | | | | | 000439267599 06/22/16 | IMPERIAL OIL CROSSFIELD AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 122.6 | .98 | 114.90 | 5.74 5.74 | 120.64 120.64 |
| | | | | | 000439267598 06/06/16 | IMPERIAL OIL CROSSFIELD AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 47.7 | 1.05 | 47.84 | 2.39 2.39 | 50.23 50.23 |
| | | | | | UNIT TOTAL / TOT UNITE | | FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE | 342.7 | | 321.28 | 16.06 | 337.34 |
| | BKDN TOTALS / TOTAUX CODIFICATION 01-25 | | | | 1 | | FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH | 342.7 | | 321.28 | 16.06 | |
| | | | | | | | BKDN TOTALS / TOTAUX CODIFICATION | | | | | 337.34 |

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 - 169 OF 262
DE

| CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION |
|---|
| SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-25-R FRASER - - - - - - - - |

| | |
|------------------------------------|------------|
| CLIENT NO. NO DU CLIENT | |
| INVOICE DATE DATE DE LA FACTURE | 09/01/16 |
| INVOICE NO. NO DE LA FACTURE | 0006455248 |

| 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 |
|------------------------|---|------------------------|--------------------------|-----------------------------------|--|--|---|------------|------------------------|-------------------------|--|----------------------------------|
| | FRASER | | | | 000440115518 07/29/16 | SHELL CANADA INC CALGARY AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 136.5 | .97 | 125.92 | 6.30 6.30 | 132.22 132.22 |
| | | | | | 000441424321 07/26/16 | IMPERIAL OIL CROSSFIELD AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 58.8 | .85 | 47.79 | 2.39 2.39 | 50.18 50.18 |
| | | | | | 000440689717 07/22/16 | SEVEN ELEVEN CALGARY AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 110.0 | .91 | 95.24 | 4.76 4.76 | 100.00 100.00 |
| | | | | | 000439845479 07/15/16 | FEDERATED COOPERATIVES LIMITED CALGARY AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 128.9 | .97 | 119.02 | 5.95 5.95 | 124.97 124.97 |
| | | | | | 000441424320 07/07/16 | IMPERIAL OIL CALGARY AB | UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL | 54.3 | .93 | 48.30 | 2.41 2.41 | 50.71 50.71 |
| | | | | | UNIT TOTAL / TOT UNITE | | FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE | 488.5 | | 436.27 | 21.81 | 458.08 |
| | BKDN TOTALS / TOTAUX CODIFICATION 01-25 | | | | 1 | | FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH | 488.5 | | 436.27 | 21.81 | |
| | | | | | | | BKDN TOTALS / TOTAUX CODIFICATION | | | | | 458.08 |

BLG871

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



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
R FRASER MLA
LEGIS ASSEMBLY OF AB

Membership Number
XXXX-XXXX-XXXX-XXXX

Date
July 16, 2016

Page 1 of 3

Statement includes payments and charges received by July 16, 2016

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

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

Listing of Charges and Credits

Amount \$

New Transactions for R FRASER MLA

Amount \$

| | | |
|---------|---|-------|
| June 21 | IMPARK00030179U CALGARY Goods or Services | 31.50 |
| July 6 | CalgParkAuth 2056263 CALGARY GOVERNMENT SERVICES | 1.50 |

| | | |
|---------|--|------|
| July 12 | IMPARK00030179U CALGARY Goods or Services | 9.45 |
|---------|--|------|

| | | |
|---------|---|------|
| July 14 | CalgParkAuth 2063638 CALGARY GOVERNMENT SERVICES | 2.00 |
|---------|---|------|

1 Please detach here 1

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

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

Do Not Enclose Cash

000275



R FRASER MLA
LEGIS ASSEMBLY OF AB
9820-107 ST NW FLR4
EDMONTON AB
T5K 1E7

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





The American Express® Corporate Card Statement of Account

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



Prepared For
R FRASER MLA
LEGIS ASSEMBLY OF AB

Membership Number
XXXX-XXXX-XXXX-XXXX
September 16, 2016

Page 1 of 3

Statement includes payments and charges received by September 16, 2016

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

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

Listing of Charges and Credits

Amount \$

New Transactions for R FRASER MLA

Amount \$

| | | |
|---|---|-------|
| August 17 | CalgParkAuth 2090708 CALGARY GOVERNMENT SERVICES | 9.50 |
| August 17 | CalgParkAuth 2090711 CALGARY GOVERNMENT SERVICES | 9.50 |
| September 3 | CalgParkAuth 2105221 CALGARY GOVERNMENT SERVICES | 5.00 |
| September 4 | CalgParkAuth 2105879 CALGARY GOVERNMENT SERVICES | 2.00 |
| Total New Transactions for R FRASER MLA | | 26.00 |

† Please detach here †

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- Your local bank branch
- Automatic banking machines

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000270



R FRASER MLA
LEGIS ASSEMBLY OF AB
9820-107 ST NW FLR4
EDMONTON AB
T5K 1E7

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





The American Express® Corporate Card Statement of Account

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Corporate Service Centre
PO Box 7000 Station B
Willowdale (Ontario) M2K 2R6



Prepared For
R FRASER MLA
LEGIS ASSEMBLY OF AB

Membership Number
XXXX-XXXX [REDACTED]

Date
July 16, 2016

Page 1 of 3

Statement includes payments and charges received by July 16, 2016

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

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

1816

Listing of Charges and Credits

Amount \$

New Transactions for R FRASER MLA

Amount \$

| | | |
|---------|---|-------|
| July 7 | CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES | 14.72 |
| July 8 | ALLIED LIMOUSINE/ASS CALGARY TAXICABS AND LIMOUSINES | 50.00 |
| July 9 | DELTA CABS LTD CALGARY TAXICABS AND LIMOUSINES | 41.80 |
| July 9 | CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES | 38.18 |
| July 13 | ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES | 36.00 |

1 Please detach here 1

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- Automatic banking machines

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000275



R FRASER MLA
LEGIS ASSEMBLY OF AB
9820-107 ST NW FLR4
EDMONTON AB
T5K 1E7

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





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: Fraser, Rick

Constituency: Calgary-South East

For the Month of: June

Year: 2016

Employee #: [REDACTED]

| Day of Month | Reason for Travel | Meal Purchase Location(s) | Meal | | | Subtotal | G.S.T. | Total |
|--------------|------------------------|---------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------|---------|----------|
| | | | B | L | D | | | |
| 1 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 2 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 19.81 | 0.99 | 20.80 |
| 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 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 19.81 | 0.99 | 20.80 |
| 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 checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 30.81 | 1.54 | 32.35 |
| 17 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 19.81 | 0.99 | 20.80 |
| 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 type="checkbox"/> | | | |
| 22 | | [REDACTED] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 23 | | [REDACTED] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 24 | | [REDACTED] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 25 | | [REDACTED] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 26 | | [REDACTED] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 27 | Travel to/from Capital | Edmonton | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 30.81 | 1.54 | 32.35 |
| 28 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 19.81 | 0.99 | 20.80 |
| 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 | | | | | | \$200.19 | \$10.01 | \$210.20 |

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

04/07/2016



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: Fraser, Rick

Constituency: Calgary-South East

For the Month of: July

Year: 2016

Employee #: [REDACTED]

| Day of Month | Reason for Travel | Meal Purchase Location(s) | Meal | | | Subtotal | G.S.T. | Total |
|--------------|------------------------|---------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------|--------|----------|
| | | | B | L | D | | | |
| 1 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 2 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 3 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 4 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 5 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8.76 | 0.44 | 9.20 |
| 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 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 27 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8.76 | 0.44 | 9.20 |
| 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 | | | | | | \$96.67 | \$4.83 | \$101.50 |

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

15/08/2016



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: Fraser, Rick

Constituency: Calgary-South East

For the Month of: August

Year: 2016

Employee #: [REDACTED]

| Day of Month | Reason for Travel | Meal Purchase Location(s) | Meal | | | Subtotal | G.S.T. | Total |
|--------------|------------------------|---------------------------|-------------------------------------|-------------------------------------|-------------------------------------|----------|--------|---------|
| | | | B | L | D | | | |
| 1 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 2 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 3 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 4 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 5 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 6 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 7 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 8 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 9 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 10 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 11 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 12 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 13 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 14 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 15 | Travel to/from Capital | Edmonton | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 19.76 | 0.99 | 20.75 |
| 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 | | | <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 | Travel to/from Capital | Edmonton | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 19.76 | 0.99 | 20.75 |
| Grand Total | | | | | | \$79.10 | \$3.95 | \$83.05 |

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

Sept. 1, 2016



Members' Temporary Accommodation Allowance Claim Form

25

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

Member Name: Fraser, Rick

Constituency: Calgary-South East

Employee #: [REDACTED]

Date: 5/12/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

JULY 2016



Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,930.00

x 12 = \$ 23,160.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

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

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


Member Signature



Members' Temporary Accommodation Allowance Claim Form

25

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

Member Name: Fraser, Rick

Constituency: Calgary-South East

Employee #: [REDACTED]

Date: 5/12/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

AUGUST 2016



Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,930.00

x 12 = \$ 23,160.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

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

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


Member Signature



Members' Temporary Accommodation Allowance Claim Form

25

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

Member Name: Fraser, Rick

Constituency: Calgary-South East

Employee #: [REDACTED]

Date: 5/12/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017



Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,930.00

x 12 = \$ 23,160.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

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

September 2016

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

Member Signature

Updated April 2016

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Rick Fraser

Claimant Name: Smitty's

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Lake Chaparral Pancake Breakfast

[illegible]

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Rick Fraser

Claimant Name: Jennifer Gibson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee / hosting supplies for the office

DOLLARAMA

4307 130 Ave. SE
Calgary AB T2Z 3V8
GST 863624433

STARLIGHT MINTS

1.00 F

SUBTOTAL

GST 5%

TOTAL

DEBIT

TYPE: PURCHASE

ACCT: CHEQUING

\$

Card Type: Interac

CARD NUMBER:

XXXXXXXXXX

DATE/TIME:

16/04/22 10:14:31

REFERENCE #:

66228009 0010017070 C

AUTHOR. #:

Interac

A0000002771010

8000008000 6800

00/001 APPROVED - THANK YOU

-- IMPORTANT --

Retain This Copy For Your Records

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THANK YOU FOR SHOPPING AT DOLLARAMA

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2016-04-22 10:14:37

000407 01 0201

2886

WWW.DOLLARAMA.COM

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Rick Fraser

Claimant Name: Jennifer Gibson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

Coffee / hosting supplies for the office

YOUR RECEIPT
THANK YOU
CALL AGAIN

05-20-2016 09:37
REG 0002

| | |
|--------------|---------|
| DEPT01 | \$12.49 |
| TOTAL | \$12.49 |
| ROUNDING AMT | \$0.01 |
| CASH | \$12.50 |
| CHANGE | \$0.00 |

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Rick Fraser

Claimant Name: Jennifer Gibson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee / hosting supplies for the office



RCSS 1546 - 4700 130th AVE SE
403-257-6537

Big on Fresh, Low on Price

06516800313 PREMIUM RST MRJ 10.99

SUBTOTAL

9=GST 5% 5.00 @ 5.000%

TOTAL

-----TRANSACTION RECORD-----

GLOBAL PAYMENTS MERCHANT # 4041489

Superstore

4700 130 Ave Se Suite 100

Calgary AB

STORE 01546

TERM 20154611

SLIP # 228600

REG 11

RETAIN THIS COPY FOR YOUR RECORDS

** Purchase

** Chip

Chequing

CARD # *****

EXP **/**

Interac

REF #

AUTH #

RESP 001

247001001002

ISO 00

AID: A000000277010

TSI 6800

TVR 8000008000

| DATE | TIME | AMOUNT |
|------------|----------|----------|
| 07/19/2016 | 10:17:00 | \$ 16.24 |

APPROVED

DEBIT TND

16.24

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David Porteous

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TO COLLECT POINTS!!

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2016/07/18

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10:17

11 2286

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OR CALL 1-877-234-2322

SEE CUSTOMER SERVICE DESK FOR FULL

CONTEST RULES OR WWW.STOREOPINION.CA

STORE: 01546

CODE: 071816 101711 2286 01546

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Rick Fraser

Claimant Name: Purifi Water

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Water for office

