

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2024-25
052 - Brooks-Medicine Hat - MLA Danielle Smith
For Expenses Processed Jan 1 - Mar 31, 2025

	Budget	Reimbursed This Qtr	Reimbursed To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$		\$683.97	\$1,987.73
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$1,007.65	\$3,344.78
Accommodation			
Edmonton Accommodation Allowance (\$26,400.00/yr max)	\$23,160.00	\$3,826.74	\$7,488.18
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$1,405.42	\$1,662.60
Event Tickets Disclosable - \$			
Non-Financial Reporting			

Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.0		
Constituency Travel Staff (KM) - NF		1,462.0	5,199.0
Total Constituency Travel (KM) - NF	80,000.0	1,462.0	5,199.0
Adverse Driving Conditions			
Special Trips (5 trips per year) - NF			
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	52.0		
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		

\$ - Reported on CAD dollar amount of actual expense

NF - Reported based on number of trips, number of kilometres, or number of days

Budget reported is the maximum annual amount that may be claimed

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

Note:

Expenses are reported in the Quarter the expense is reimbursed and not necessarily the Quarter the expense was

The reader should take this into account when reviewing the disclosure



Legislative Assembly of Alberta

VF31743 - Vendor Payment Submission Form

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Other



Ramada by Wyndham Brooks

1319 2nd Street West
Brooks
Alberta, T1R 1P7 Canada
Phone: 1-403-3626440
Email: gm@ramadabrooks.com

Folio 1

Name: SMITH, DANIELLE

Confirmation Number:

Phone #: [REDACTED]

Email: [REDACTED]

Guest

Company

Address:

Address:

Room: 435

Room Type: ENK1

Rate Plan: L06

Daily Rate: CAD 159.00

Arrival: Dec 13, 2024 (Fri)

Departure: Dec 14, 2024 (Sat)

Loyalty Level: Platinum

Guests: 1/0

Nights: 1

GTD: AX 1009

Room Rate:

Dec 13, 2024 (Fri)

CAD 159.00 per night

Total Estimated Stay Amount: CAD 178.51

Date	Code	Description	Amount	Balance
Dec 13, 2024 (Fri)	RM	ROOM CHARGE	CAD 159.00	CAD 159.00
Dec 13, 2024 (Fri)	1001	DMF	CAD 4.77	CAD 163.77
Dec 13, 2024 (Fri)	1002	Tourism Levy	CAD 6.55	CAD 170.32
Dec 13, 2024 (Fri)	1003	GST	CAD 8.19	CAD 178.51
Dec 14, 2024 (Sat)	AX	AX [REDACTED]	CAD (178.51)	CAD 0.00

Summary

Room	Taxes and Fees	F&B	Other	Payments	Balance Due
CAD 159.00	CAD 19.51	CAD 0.00	CAD 0.00	CAD (178.51)	CAD 0.00

Guest Signature: _____

By signing above, I agree to these terms and conditions

GST # 894648450RT001

Printed on: Dec 14, 2024 (Sat)
07:03:41 PM

Page 1 of 2

Printed by:

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



Legislative Assembly of Alberta

VF31910 - Vendor Payment Submission Form

Member Travel (overnight stay in constituency) -\$170.32

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Other



Ramada by Wyndham Brooks

1310 2nd Street West
Brooks
Alberta, T1R 1P7 Canada
Phone: 1-403-3626440
Email: gm@ramadabrooks.com

Folio 1

Name: SMITH, DANIELLE

Confirmation Number:
81114EE023672

Phone #: [REDACTED]

Email: [REDACTED]

Guest Address:

Company Address:

Room: 435

Room Type: ENK1

Rate Plan: LNCG

Daily Rate: CAD 159.00

Arrival: Jan 02, 2025 (Thu)

Departure: Jan 03, 2025 (Fri)

Loyalty Level: Platinum

Guests: 1/0

Nights: 1

GTD: [REDACTED]

Room Rate:

Jan 02, 2025 (Thu)

CAD 159.00 per night

Total Estimated Stay Amount: CAD 178.51

Date	Code	Description	Amount	Balance
Jan 02, 2025 (Thu)	RM	ROOM CHARGE	CAD 159.00	CAD 159.00
Jan 02, 2025 (Thu)	1001	DMF	CAD 4.77	CAD 163.77
Jan 02, 2025 (Thu)	1002	Tourism Levy	CAD 6.55	CAD 170.32
Jan 02, 2025 (Thu)	1003	GST	CAD 8.19	CAD 178.51
Jan 03, 2025 (Fri)	AX	[REDACTED]	CAD (178.51)	CAD 0.00

Summary

Room	Taxes and Fees	F&B	Other	Payments	Balance Due
CAD 159.00	CAD 19.51	CAD 0.00	CAD 0.00	CAD (178.51)	CAD 0.00

Guest Signature: _____

I, the undersigned, agree to these terms and conditions

GST # 894648450RT001

Printed on: Jan 03, 2025 (Fri) 04:44:50 PM

Page 1 of 2

Printed by:

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Ramada by Wyndham Brooks

1319 2nd Street West
Brooks
Alberta, T1R 1P7 Canada
Phone: 1-403-3626440

Email: gm@ramadabrooks.com

Folio 1

Name: SMITH, DANIELLE

Confirmation Number:
81114EE025756

Phone #: [REDACTED] Email: [REDACTED]

Guest [REDACTED] Company [REDACTED]

Address: [REDACTED] Address: [REDACTED]

Room: 435

Room Type: ENK1

Rate Plan: LNGC

Daily Rate: CAD 169.00

Arrival: Mar 05, 2025 (Wed)

Departure: Mar 06, 2025 (Thu)

Guests: 1/0

Nights: 1

GTD: AX 1009

Room Rate:

Mar 05, 2025 (Wed)

CAD 169.00 per night

Total Estimated Stay Amount: CAD 189.73

Date	Code	Description	Amount	Balance
Mar 05, 2025 (Wed)	RM	ROOM CHARGE	CAD 169.00	CAD 169.00
Mar 05, 2025 (Wed)	1001	DMF	CAD 5.07	CAD 174.07
Mar 05, 2025 (Wed)	1002	Tourism Levy	CAD 6.96	CAD 181.03
Mar 05, 2025 (Wed)	1003	GST	CAD 8.70	CAD 189.73
Mar 06, 2025 (Thu)	AX	AX [REDACTED]	CAD (189.73)	CAD 0.00

Summary

Room	Taxes and Fees	F&B	Other	Payments	Balance Due
CAD 169.00	CAD 20.73	CAD 0.00	CAD 0.00	CAD (189.73)	CAD 0.00

Guest Signature: _____

By signing above, I agree to these terms and conditions

GST # 894648450RT001

TownePlace Suites® Medicine Hat

#7 Stober Bay, Medicine Hat, AB T1B 4Y2 P 403.487.5131

Marriott.com/YXHTS

Danielle/Ms Smith

Room: 404

Room Type: ONBR

Number of Guests: 1

Rate: \$153.00

Clerk: SAD

Ab

Arrive: 04Mar25

Time: 04:55PM

Depart: 05Mar25

Time: 11:16AM

Folio Number: [REDACTED]

DATE	DESCRIPTION	CHARGES	CREDITS
04Mar25	Room Charge	153.00	
04Mar25	Alberta Tourism Levy	6.24	
04Mar25	Destination Market Fee	3.06	
04Mar25	Gst Goods Services Tax	7.80	
05Mar25	American Express		170.10

CARD #: XXXXXXXXXXXXX [REDACTED] XX

Card Type: AMEX Card Entry: MANUAL Approval Code [REDACTED]

BALANCE: 0.00

Marriott Bonvoy Account # XXXXX [REDACTED]. Your Marriott Bonvoy points/miles earned on your eligible earnings will be credited to your account. Check your Marriott Bonvoy account statement or your online statement for updated activity.

See our "Privacy & Cookie Statement" on Marriott.com.



Legislative Assembly of Alberta

MP50230 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP50230
Description	December 2024 - Per-Diems
Claimant	Danielle Smith
Employee Number	
Constituency	Brooks-Medicine Hat 52 (Danielle Smith)
Date Submitted	December 20, 2024
Date Received	January 2, 2025
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
12519	Dec 2, 2024	60 km from Perm. Res.	Edmonton	X		X	38.10	1.90	40.00
12520	Dec 3, 2024	60 km from Perm. Res.	Edmonton	X		X	38.10	1.90	40.00
12521	Dec 4, 2024	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
12522	Dec 5, 2024	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
12523	Dec 14, 2024	60 km from Perm. Res.	Brooks	X			12.38	0.62	13.00
							145.72	7.28	153.00

This Claim Form has been certified by the Member to 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.



Legislative Assembly of Alberta

MP50853 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP50853
Description	January 2025 - Per-Diems
Claimant	Danielle Smith
Employee Number	
Constituency	Brooks-Medicine Hat 52 (Danielle Smith)
Date Submitted	January 30, 2025
Date Received	February 13, 2025
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
12889	Jan 2, 2025	60 km from Perm. Res.	Medicine Hat/ Brooks		X	X	41.90	2.10	44.00
12890	Jan 3, 2025	60 km from Perm. Res.	Brooks	X	X		28.57	1.43	30.00
							70.47	3.53	74.00

This Claim Form has been certified by the Member to 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.



Legislative Assembly of Alberta

MP51344 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP51344
Description	February 2025 - Per-Diems
Claimant	Danielle Smith
Employee Number	
Constituency	Brooks-Medicine Hat 52 (Danielle Smith)
Date Submitted	March 19, 2025
Date Received	March 22, 2025
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
13156	Feb 18, 2025	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
13157	Feb 25, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13158	Feb 26, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13159	Feb 27, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							191.44	9.56	201.00

This Claim Form has been certified by the Member to 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.



Legislative Assembly of Alberta

MP51862 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP51862
Description	March 2025 - Per-Diems
Claimant	Danielle Smith
Employee Number	
Constituency	Brooks-Medicine Hat 52 (Danielle Smith)
Date Submitted	April 2, 2025
Date Received	April 3, 2025
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
13602	Mar 4, 2025	60 km from Perm. Res.	Medicine Hat		X	X	41.90	2.10	44.00
13603	Mar 5, 2025	60 km from Perm. Res.	Medicine Hat/Brooks	X	X	X	54.29	2.71	57.00
13604	Mar 6, 2025	60 km from Perm. Res.	Edmonton, Brooks	X	X	X	54.29	2.71	57.00
13605	Mar 7, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13606	Mar 13, 2025	60 km from Perm. Res.	Edmonton			X	25.71	1.29	27.00
13607	Mar 14, 2025	Travel to/from Capital	Calgary	X	X		28.57	1.43	30.00
13608	Mar 17, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
13609	Mar 18, 2025	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
13610	Mar 19, 2025	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
13611	Mar 20, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
13612	Mar 24, 2025	Travel to/from Capital	Edmonton	X	X		28.57	1.43	30.00
13613	Mar 25, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13614	Mar 26, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13615	Mar 31, 2025	60 km from Perm. Res.	Medicine Hat/ Brooks	X	X	X	54.29	2.71	57.00
							616.21	30.79	647.00

This Claim Form has been certified by the Member to 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.



Legislative Assembly of Alberta

VF31910 - Vendor Payment Submission Form

Edmonton Accommodation Allowance (\$26,400.00/yr max) \$1,632.52

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Other



American Express® Corporate Card Statement of Account

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

Prepared For
M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB
XXXX-XXXX-XXXX-XXXX
Account Number
January 16, 2025
Date

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, 2025

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, 2025	Total Credit Limit \$	Available Credit Limit \$

Listing of Charges and Credits

Amount \$

New Transactions for M. DANIELLE SMITH

Amount \$

January 9	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	240.26
January 9	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	720.78
January 9	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	749.96

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

Account Number	
Amount Due \$	Amount Paid \$

M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB
4TH FLOOR
EDMONTON AB
T5K 1E7

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



Legislative Assembly of Alberta

VF25173 - Vendor Payment Submission Form

MSC ORDER NO. 04/24 revised Temporary Residence Allowance Daily Rate up to \$350.00

Catch up Edmonton Accommodation Allowance in Amex May/24 statement - \$389.05

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Other



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

Prepared For
M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB

Account Number
XXXX-XXXX-XXXX-XXXX

Date
May 16, 2024

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 May 16, 2024

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

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

Credit Limit Summary On May 16, 2024	Total Credit Limit \$	Available Credit Limit \$

Listing of Charges and Credits

April 22	Payment Received Thank You	
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New Transactions for M. DANIELLE SMITH

Card XXXX-XXXX-XXXX-XXXX

April 15	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	703.94
April 22	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	720.78

May 6	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	720.78
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Total New Transactions for M. DANIELLE SMITH

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M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB
4TH FLOOR
EDMONTON AB
T5K 1E7

Account Number	
Amount Due \$	Amount Paid \$

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



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Prepared For
M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB

Account Number
XXXX-XXXX [REDACTED]
Date
June 16, 2024

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

Statement includes payments and charges received by June 16, 2024

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

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

Credit Limit Summary On June 16, 2024		Total Credit Limit \$	Available Credit Limit \$
		[REDACTED]	[REDACTED]
New Transactions for M. DANIELLE SMITH			Amount \$
Card XXXX-XXXX [REDACTED]			
May 16	Delta Hotels by Marr Edmonton Arrival 13/05/24 Departure 16/05/24		840.05
May 21	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS		480.52
May 27	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS		720.78
[REDACTED]			
Total New Transactions for M. DANIELLE SMITH			[REDACTED]

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Account Number	
[REDACTED]	
Amount Due \$	Amount Paid \$
[REDACTED]	

M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB
4TH FLOOR
EDMONTON AB
T5K 1E7




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Corporate Service Centre
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Prepared For
**M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB**

XXXX-XXXX-XXXX-XXXX Account Number
February 16, 2025 Date

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 February 16, 2025

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

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

Credit Limit Summary On February 16, 2025	Total Credit Limit \$	Available Credit Limit \$
New Transactions for M. DANIELLE SMITH		
Card XXXX-XXXX-XXXX-XXXX		Amount \$
January 21	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	374.98
Total New Transactions for M. DANIELLE SMITH		

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Account Number	
Amount Due \$	Amount Paid \$

M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB
4TH FLOOR
EDMONTON AB
T5K 1E7



Legislative Assembly of Alberta

VF32092 - Vendor Payment Submission Form

Edmonton Accommodation Allowance - \$150.77 + GST

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Other



Mail Payment To:

Premier's Office
455 Terrace Bldg, 9515 -107 St EDMONTON AB T5K 2C1

Account Inquiries by Telephone or Email:

Toll Free [REDACTED]
Email [REDACTED]

LEGISLATIVE ASSEMBLY OF ALBERTA
FINANCIAL MANAGEMENT AND ADMINISTRATIVE SERVICES
4TH FL-9820 107 ST NW
EDMONTON AB
T5K 1E7

INVOICE

Document No. : 1800025351
Customer No. : 0070004024
Reference No. :
Document Date : 11-Feb-2025
Due Date : 13-Mar-2025
Email ID :
Contract ID :

Amount Due: \$158.31

Amount Remitted: _____

Please cut along line and return top portion with payment

S/N	Description	Order No.	Quantity	UOM	Unit Price	GST	Tax Amt	Amount CAD
1	Caucus Expenses D Smith Edmonton Dec 2-4					5.00%	\$8.92	\$178.56
2	Caucus Expenses D Smith Edmonton Dec 2-4					5.00%	\$-1.38	\$-27.79
Sub Total								\$150.77
Total (GST)								\$7.54
Amount Due								\$158.31

Please make payment payable to Government of Alberta.

Government of Alberta - GST Registration Number: 124072513RT0001

Page No.: 1 of 1

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

Prepared For
**M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB**

Account Number
XXXX-XXXX Date
March 18, 2025

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 March 18, 2025

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

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

Credit Limit Summary On March 18, 2025

Total Credit Limit \$ Available Credit Limit \$

Listing of Charges and Credits

Amount \$

February 24 Corporate Remittance Received-Thank You

New Transactions for M. DANIELLE SMITH

Card XXXX-XXXX

Amount \$

February 25	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	437.84
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March 6	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	227.90
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March 13	WESTIN EDMONTON WEST EDMONTON MEETINGS/CONVENTIONS	196.47
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Total New Transactions for M. DANIELLE SMITH

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Account Number	
Amount Due \$	Amount Paid \$

**M. DANIELLE SMITH
LEGIS ASSEMBLY OF AB
4TH FLOOR
EDMONTON AB
T5K 1E7**



Legislative Assembly of Alberta
VF32471 - Vendor Payment Submission Form

Hosting - \$87.00

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Hosting - Individual Constituent(s)

Heritage Inn Hotel & Convention Centre
1217 - 2nd Street W.
Brooks, Alberta T1R 1P7
Telephone: 403-362-6666 Fax: 403-362-7319

Constituency Office Brooks Medicine Hat Page # 1 Inv.# 2503140010
Res. # 253772

Room Rate 0.00
Promo Code
Room 5010

Date	Description	Reference	Charges	Credits
Mar05	Banquets Food	#007448	87.00	

Total Outstanding this Invoice

Brooks Medicine Hat Const

Payment due within 30 days of invoice. After 30 days, 2% monthly interest applies (24% per annum), calculated daily & compounded monthly on all outstanding amounts. Effective annual rate: 26.82%. Interest capped at legal maximum.

Our G.S.T. # is R102201423

Charge Summary:

DIRECT BILL
Banquets Food
Service Charge - GST Appl
Equipment Rentals
Room - Meeting Rm Rental
GST

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



Hosting - \$126.00

Legislative Assembly of Alberta

VF32472 - Vendor Payment Submission Form

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Hosting - Individual Constituent(s)

Heritage Inn Hotel & Convention Centre
1217 - 2nd Street W.
Brooks, Alberta T1R 1P7
Telephone: 403-362-6666 Fax: 403-362-7319

Constituency Brooks Medicine Hat

Page # 1 Inv.# 2503140011
Res. # 253773

Room Rate 0.00
Promo Code
Room 5011

Date	Description	Reference	Charges	Credits
Mar06	Banquets Food	#007556	126.00	

Total Outstanding this Invoice

Brooks Medicine Hat Const
Attn: Heather Pigott

Payment due within 30 days of invoice. After 30 days, 2% monthly interest applies (24% per annum), calculated daily & compounded monthly on all outstanding amounts. Effective annual rate: 26.82%. Interest capped at legal maximum.

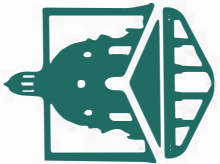
Our G.S.T. # is R102201423

Charge Summary:

DIRECT BILL
Banquets Food
Service Charge - GST Appl
Equipment Rentals
Room - Meeting Rm Rental
GST

126.00

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



Legislative Assembly of Alberta
SE50064 - Staff Other Expenses Claim Form

Receipt Description	Pop and punch supplies for open house from Walmart
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Hosting - Group (Medicine Hat Constituency (Brooks)) Hosting Purpose - Christmas Open House

Hosting - \$43.24 + GST

WIN!
1 of 3 \$1000
gift cards

Rules and regulations apply.
See contest rules for details.

STORE 3160
2051 STRACHAN ROAD S.E.
MEDICINE HAT, AB
T1B 0M4
403-604-4410

ST# 03160 OP# 006468 TR# 06 TR# 04336
SCHWP CLB SO 00166000039L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
SCHWP CLB SO 00166000039L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
SCHWP CLB SO 00166000039L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
SCHWP CLB SO 00166000039L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
SCHWP GINGER 001660000029L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
SCHWP GINGER 001660000029L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
SCHWP GINGER 001660000029L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
SCHWP GINGER 001660000029L \$2.67 J
MULTI 323
AB CRF 068113171102 \$0.05 A
AB DEPOSIT 068113171101 \$0.25 H
ORANGEJUICE 006960006164 \$2.67 D
ORANGEJUICE 006960006164 \$2.67 D
ORANGEJUICE 006960006164 \$2.67 D
ORANGEJUICE 006960006164 \$2.67 D
MM PINK LEMON 006960006177 \$1.77 D
MM PINK LEMON 006960006177 \$1.77 D
MM PINK LEMON 006960006177 \$1.77 D
MM LIMEADE 006960006178 \$1.77 D
MM LIMEADE 006960006178 \$1.77 D
MM LIMEADE 006960006178 \$1.77 D
MM LIMEADE 006960006178 \$1.77 D
SUBTOTAL \$48.60

MULTI DISCOUNT
Per 2L 2 for 4\$ 323L
x1 MULTI DISCOUNT \$5.36-J

SUBTOTAL \$43.24
GST 5.0000% \$0.82
TOTAL \$44.06
MCARD TEND \$44.06

Mastercard
APPROVAL #
REF # 433200481433
PAYMENT SERVICE - A
AID A0000000041010
IC FA3CA6B95B873E6E
TERMINAL # WHTK000903
NO SIGNATURE REQUIRED

11/27/24 16:24:40
CHANGE DUE \$0.00
GST/HST 137466199 RT 0001
GST 1016651366 TR 0001

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



Legislative Assembly of Alberta

SE50064 - Staff Other Expenses Claim Form

Receipt Description	Costco supplies for open house Dec 13
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Hosting - Group (Medicine Hat Constituency (Brooks)) Hosting Purpose - Christmas Open House

COSTCO
WHOLESALEMedicine Hat #593
2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8AA Member [REDACTED]
*****Bottom of Basket*****

500666	KS WATR500**	4.89
	ENVIRO FEE C	0.80
	DEPOSIT CL	4.00
500666	KS WATR500**	4.89
	ENVIRO FEE C	0.80
	DEPOSIT CL	4.00
500666	KS WATR500**	4.89
	ENVIRO FEE C	0.80
	DEPOSIT CL	4.00

*****BOB Count 3*****

1777799	OS CRAN JUIC	11.99
	ENVIRO FEE C	0.10
	DEPOSIT CL	0.50
1777799	OS CRAN JUIC	11.99
	ENVIRO FEE C	0.10
	DEPOSIT CL	0.50

1165373	GINGERALE	11.99 G
	ENVIRO FEE C	0.24 G
	DEPOSIT CL	2.40
1165373	GINGERALE	11.99 G
	ENVIRO FEE C	0.24 G
	DEPOSIT CL	2.40

1473917 KS TRAT 4IX 22.99 G

145866	LINDOR ROLLS	24.99 G
1886517	TPD/145866	5.00-G
145866	LINDOR BALLS	24.99 G
1886517	TPD/145866	5.00-G

SUBTOTAL

TAX

*** TOTAL

IMPORTANT - retain this copy
for your records
CUSTOMER COPYMasterCard
CHANGEG GST 5%
TOTAL NUMBER OF ITEMS SOLD =
TOTAL DISCOUNT(S) \$
2027/10/10 10:47:00 593 3 86

22059300300862411221047

OP#: 14 Name: JUDY R

Thank You!
Please Come Again

R = RET D=DET

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



Hosting - \$27.00
Legislative Assembly of Alberta
SE50224 - Staff Other Expenses Claim Form

Receipt Description	Bags of Ice
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Hosting - Group (Medicine Hat Constituency (Brooks)) Hosting Purpose - Christmas Open house for MLA/ Premier in Medicine



INVOICE

Williams, Danielle & Jim
7 Carr Crescent S.E.
MEDICINE HAT AB T1B 1T3
CANADA

Invoice Date
9 Dec 2024

Invoice Number
INV-44122

Reference
150

GST #880423124
880423124RT0001



Icy Mountain Water Co.
1001 FOUNDRY STREET SE
MEDICINE HAT, AB T1A 1X6
4035263806
ICYMOUNTAINWATER.COM

09-Dec-2024 12:24:31p.m.

Transaction 218171	
1 0 Xero Sale	\$27.00
Tax Exempt 0%	\$0.00

Total \$27.00

CREDIT CARD SALE \$27.00
MASTERCARD

Retain this copy for statement
validation

Description	Quantity	Unit Price	
Cubed Ice (Delivered)	9.00	3.00	Ze

Pick up Friday Dec 13, 2025

Subtotal 27.00

TOTAL CAD 27.00

Less Amount Paid 27.00

AMOUNT DUE CAD 0.00

Due Date: 16 Dec 2024

PAYMENT ADVICE

To: Icy Mountain Water Co.
1001 Foundry Street SE
Medicine Hat, AB T1A 1X6
P. 403.526.3806
icymountainwater.com

Customer Williams, Danielle & Jim
Invoice Number INV-44122

Amount Due 0.00

Due Date 16 Dec 2024

Amount Enclosed

Enter the amount you are paying above

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



Legislative Assembly of Alberta
SE50224 - Staff Other Expenses Claim Form

Hosting - \$79.96 + GST

Receipt Description	Coffee from Tims for open house
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Hosting - Group (Medicine Hat Constituency (Brooks)) Hosting Purpose - Christmas Open House for Premier/MLA

Tim Hortons

Tim Hortons # 104064
2410 Division Ave NW, Medicine Hat, AB, T1A 0C3
403-527-7533

Take Out
Order #: 460

3 Take 12 Original Blend	\$59.97
1 Take 12 Decaf	\$19.99

Subtotal:	\$79.96
GST:	\$4.00
Total Tax:	\$4.00

Grand Total: \$83.96

Mastercard: \$83.96
Change Due: \$0.00
Cashier: SHIFT 2

GST/HST#:

12-10-2024 02:59:53 PM

Receipt #: 406021004

Order ID: 407145904

4654-2990-4150-0111-40448

Upon survey completion enter validation code
here: _____

And return this receipt to a participating Tim Hortons
in Canada to receive offer.

*Plus tax. See website for full Terms and Conditions

Mastercard

Card Entry:TAP_ICC

Sequence:000102

Trans Type:Purchase

\$83.96

Term #:

202

REF #:

00000102

Application Label:

Mastercard

AID #:

A0000000041010

TUR #:

000000001

TSI #:

E800

Auth #

approved

Guest Copy

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



Legislative Assembly of Alberta
SE50225 - Staff Other Expenses Claim Form

Hosting - \$37.62+ GST

Receipt Description	Open House for Premier/MLA Dec 13
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Hosting - Group (Medicine Hat Constituency (Brooks)) Hosting Purpose - Christmas Open House for Premier/MLA

COSTCO WHOLESALE
Medicine Hat #593
2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8

SELF-CHECKOUT

BX Member [REDACTED]
165763 CD ALE 15.29 G
ENVIRO FEE C 0.32 G
DEPOSIT CL 3.20
84 COKE 32X355 15.29 G
ENVIRO FEE C 0.32 G
DEPOSIT CL 3.20
SUBTOTAL 37.62
TAX 1.56
*** TOTAL 39.18

XXXXXXXXXX [REDACTED]
ACCT: MASTERCARD
REFERENCE #: 0010013240 H
AUTH #: [REDACTED] 2024/12/10 15:43:49
Invoice Number: 206324
Purchase - Mastercard
A000000000 [REDACTED]
0000008000 E800

01 APPROVED - THANK YOU 027
AMOUNT: \$39.18

IMPORTANT - retain this copy
for your records
CUSTOMER COPY
MasterCard 39.18
CHANGE 0.00

G GST 5% 1.56
TOTAL NUMBER OF ITEMS SOLD = 2
*UPVATPAC 15:43:50 593 206 136 706

SEASONS GREETINGS & HAPPY HOLIDAYS

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



Legislative Assembly of Alberta
SE50332 - Staff Other Expenses Claim Form

Hosting - \$17.94

Receipt Description	cranberries for the punch
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Hosting - Group (Medicine Hat Constituency (Brooks)) Hosting Purpose - Christmas Open House for Premier/MLA

SAFeway

Safeway Division Avenue
615 Division Avenue S. Medicine Hat AB
Phone: 403.504.2920
GST# R95588788RT0001

Served by: Helen A

PRODUCE

Cranberries 12oz	\$2.99	C
YOU SAVED \$0.50		
Cranberries 12oz	\$2.99	C
YOU SAVED \$0.50		
Cranberries 12oz	\$2.99	C
YOU SAVED \$0.50		
Cranberries 12oz	\$2.99	C
YOU SAVED \$0.50		
Cranberries 12oz	\$2.99	C
YOU SAVED \$0.50		
Cranberries 12oz	\$2.99	C
YOU SAVED \$0.50		

SUBTOTAL \$17.94
TOTAL TAX \$0.00
TOTAL \$17.94

MasterCard TENDER \$17.94
Cash CHANGE \$0.00

NUMBER OF ITEMS 6
*****YOUR SAVINGS*****
Discounts & Specials \$3.00
Your Total Savings \$3.00
Tax 14%

RF
TERMINAL ID S02226579301
** Purchase ** \$ 17.94
CARD MC RCPT 6454000
NO. ***** RESP 001
DATE 12/12/2024 TIME 19:00:40
AUTH *****
REF# 001023357
APPL Mastercard
ATD A0000000041010

00 APPROVED - THANK YOU

Term Tran Store Oper 12/12/24
1 6454 8915 149 19:00:41

Thank you for shopping at Our Store
Come Again Soon

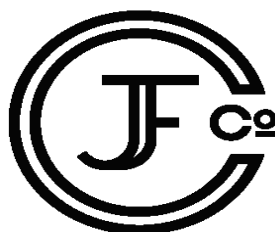
I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



Legislative Assembly of Alberta

VF30633 - Vendor Payment Submission Form

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Hosting - Individual Constituent(s)



JF Catering Co
Jeffery Frostad
42 Strong Ave SE
Medicine Hat, AB T1B 3L1
(403)360-6116
GST #79191 2538 RT0001
Invoice 2466

December 13, 2024
Danielle Smith
Medicine Hat, Alberta

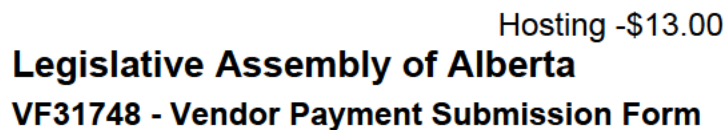
Luncheon at the Constituency Office

1 sandwich tray (divided)	\$150.00
1 fruit tray (divided)	\$100.00
1 sweets tray (divided)	\$120.00
Sub Total	\$370.00
GST	\$18.50
Total	\$388.50

Total of Invoice \$388.50
(This amount does not include a gratuity)

Remit to
JF Catering
E-transfer - jfcateringco@gmail.com

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



Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Hosting - Individual Constituent(s)



**MEDICINE HAT
COLLEGE**

299 College Dr SE
Medicine Hat, AB T1A 3Y6
403-529-3811

To:
Legislative Assembly of Alberta - Town Hall

INVOICE

INVOICE #	DATE
4401336	01/02/2025

CUSTOMER #	GST #
40399	119036796

[illegible]

Thank you for your business!

Please reference invoice #4401336 with payment.

OrderNo 924

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

Hosting \$ 43.20

SE50683

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

COSTCO
WHOLESALE

Medicine Hat #593
2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8

9J Member [REDACTED]

1473917 KS TRAIL MIX23.99

84 COKE 32X35515.69

ENVIRO FEE C0.32

DEPOSIT CL3.20

[REDACTED]

XXXXXXXXXXXX5559
ACCT: MASTERCARD
REFE [REDACTED]
2025/01/15 17:03:17
Invoice Number: 003692
Purchase - Mastercard
A0000000041010
0000008000 E800
01 [REDACTED]

IMPORTANT - retain this copy
for your records
[REDACTED]

TOTAL NUMBER OF ITEMS SOLD [REDACTED]
2025/01/15 17:03:17 593 3 272 33
22059300302722501151703
OP#: 33 Name: KAYLEEN S

Thank You!
Please Come Again

G = GST P=PST
GST #121476329RT
Whse:593 Trm:3 Trn:272 OP:33

Items Sold: [REDACTED] 17:03

Office supplies	Receipt Description
Danielle Smith	Member Name
Heather Pigott	Claimant
Hosting - Individual Stakeholder(s)	Expense Category
Hosting Purpose - Beverages for constituents	





Hosting -\$9.59

Legislative Assembly of Alberta

SE50310 - Staff Other Expenses Claim Form

Receipt Description	Water for office
Member Name	Danielle Smith
Claimant	Heather Pigott
Expense Category	Hosting - Individual Constituent(s)

COSTCO
WHOLESALE
Medicine Hat #593
2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8

P4 Member [REDACTED]
*****Bottom of Basket*****
500666 KS MATR500M 4.79
ENVIRO FEE C 0.80
DEPOSIT CL 4.00
*****BOS Count 1*****

SUBTOTAL 9.59
TAX 0.00
**** TOTAL 9.59

XXXXXXXXXX
ACCT: MASTERCARD
REFERENCE #: 0010018850 H
AUTH # [REDACTED] 2024/12/12 17:16:21
Invoice Number: 004885
Purchase - Mastercard
AUG0000041010
0000008000 E800

01 APPROVED - THANK YOU 027
AMOUNT: \$9.59

IMPORTANT - retain this copy
for your records
CUSTOMER COPY
MasterCard 9.59
CHANGE 0.00

TOTAL NUMBER OF ITEMS SOLD = 1
P4 17:16:23 593 4 351 12

SEASON'S GREETINGS & HAPPY HOLIDAYS

[REDACTED]

OP#: 12 Name: SHEA R

Thank You!
Please Come Again

0 - GST P=ST
GST #121476329RT
Unse:593 Trm:1 Trm:351 OP:12

Total BOS Item Count = 1
Items Sold: 1
P4 2024/12/12 17:16

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



Hosting - \$26.50 + GST

Legislative Assembly of Alberta

VF32486 - Vendor Payment Submission Form

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Hosting - Individual Stakeholder(s)



MEDICINE HAT COLLEGE

299 College Dr SE
Medicine Hat, AB T1A 3Y6
403-529-3811

INVOICE

INVOICE #	DATE
4401506	03/13/2025

CUSTOMER #	GST #
	119036796

To:

Legislative Assembly of Alberta - Town Hall
Unit A-503 4 Ave W
Brooks, AB T1R 0B3

Description	Amount
Catering March 12, 2025	26.50
<hr/>	
	SUBTOTAL \$26.50
	GST \$1.33
	TOTAL \$27.83

Thank you for your business!

Please reference invoice #4401506 with payment.

OrderNo 1030

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



Legislative Assembly of Alberta
SE51290 - Staff Other Expenses Claim Form

Hosting - \$19.99

Receipt Description	heat deflectors for boardroom- triggering alarm
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Other

Tim Hortons

Tim Hortons # 104064
2410 Division Ave NW, Medicine Hat, AB, T1A 0C3
403-527-7533

Take Out
Order #: 484

1 Take 12 Original Blend \$19.99
1 Points Earned

Grand Total:

Mastercard:

Change Due:

Cashier: SHIFT 1

GST/HST#:

01-02-2025 11:25:56 AM

Receipt #: 407196204

Order ID: 407538704

Enjoy any French Vanilla Hot Chocolate
or Get Coffee for \$1.99
Visit www.timhortons.ca to learn more.
Survey Code:

1684-1570-4122-0020-50432

Upon survey completion enter validation code

here:

And return this receipt to a participating Tim Hortons
in Canada to receive offer.

*Plus tax. See website for full Terms and Conditions

Mastercard

Card Entry:TAP_ICC

Trans Type:Purchase

Term #:

REF #:

Application Label:

AID #:

TUR #:

TSI #:

Auth #:

SEQUENCE:000001

202

00000051

Mastercard

A0000000041010

0000000001

E800

Approved

Guest Copy
RECEIPT REPRINT

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



Legislative Assembly of Alberta
SE52015 - Staff Other Expenses Claim Form

Hosting - \$10.98

Receipt Description	Tea supplies replenished for boardroom coffee stat
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Other

**LONDON
DRUGS**

LD MEDICINE HAT (403) 528-8360
LOOKING FOR WORK? www.londondrugs.com

MESSMER TEA 1.99
MESSMER TEA 1.99
STASH TEA 3.99
** PM2 DEAL REACHED REDUCED PRICE **
STASH TEA 3.01
**** TAX .00 BAL 10.98
VF MasterCard 10.98
XXXXXXXXXXXX
AUTH:
CHANGE .00
(P)ST .00
(G)ST .00

LDExtras #:

3/26/25 15:45 0060 12 0316 075177
(B)OTH = G.S.T P.S.T
LONDON DRUGS LIMITED GST #R103378972



032625 1545 0060 0012 0316

Check your LDExtras points, vouchers,
and rewards straight from your phone.
Download the London Drugs app

CREDIT CARD TRANSACTION RECORD

LONDON DRUGS #60
3201 13AVE SE ME
DICINE HAT, AB
T1B 1E2

CASH REG. 012 EMPLOYEE: 75177 1

NO.: XXXXXXXXXX

AMOUNT \$10.98

MASTERCARD PURCHASE

03/26/25 15:45:05 AUTH:
REFERENCE: 66272655 0010418700 H

APL: Mastercard
APN:
AID: A0000000041010
TVR: 0000008000

01 APPROVED - THANK YOU 027

*Tea for
Boardroom
coffee area.*

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



Legislative Assembly of Alberta
SE51548 - Staff Other Expenses Claim Form

Hosting - \$30.85

Receipt Description	Dinner before Town Hall in Brooks
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Hosting - Individual Stakeholder(s) Hosting Purpose - dinner before town hall



South Country Co-op
Northlands Food Centre
10 Northlands Way NE
403-528-6607

MEAT/CHEESE SNACK \$7.79 G
CLASSIC SNACK BOX \$7.79 G
CLASSIC SNACK BOX \$7.79 G
STRAW PINE MIX \$6.01 G
0.303 kg @ \$20.04/kg
4 BALANCE DUE \$30.85

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

TYPE: Purchase

ACCT: MASTERCARD \$ 30.85

CARD NUMBER: *****
DATE/TIME: 03/05/2025 1:18
REFERENCE #: 0010013220 H
TERM: 66339246
AUTHOR.# :
AID: 4000000000000000
TVR: 0000000001
Mastercard

01 APPROVED - THANK YOU 027

FF/DT: 00

NO SIGNATURE TRANSACTION

IMPORTANT:
retain this copy for your records

CUSTOMER COPY

MASTERCARD \$30.85
Auth Code # [REDACTED]
CHANGE \$0.00

TAX-CODE TAXABLE-VAL TAX-VALUE
GST \$29.38 \$1.47

DANIELLE WILLIAMS
MEMBER# [REDACTED]

C0113 #4521 10:48:19 5MAR2025
501691 R001

How did we do?
Let us know and you could
win a gift card!
www.alberta.ca/foodsurvey

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



Legislative Assembly of Alberta
VF32469 - Vendor Payment Submission Form

Hosting - \$90.00 + GST

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Hosting - Group (Garnet Altwasser)

The Steaming Cup

40 Upland Dr
Brooks AB T1R 0P8
steamcup@telus.net
Receiver General Registration No.:
818184426RT0001

Invoice



BILL TO

Brooks-Medicine Hat Constituency
Office

INVOICE #	DATE	TOTAL DUE			ENCLOSED
1105	06/03/2025	\$94.50			

DATE	ACTIVITY	DESCRIPTION	TAX	QTY	RATE	AMOUNT
	Beverage Sales	Coffee/decaf/tea/water for 20	GST	1	90.00	90.00
		Delivery Free				

Etransfer to steamcup@telus.net
Credit Card or cheque

SUBTOTAL 90.00
RECEIVER GENERAL @ 5% 4.50
TOTAL 94.50
BALANCE DUE **\$94.50**

TAX SUMMARY

	RATE	TAX	NET
Receiver General @ 5%		4.50	90.00

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



Legislative Assembly of Alberta

VF32479 - Vendor Payment Submission Form

Hosting - \$36.00

Member Name	Danielle Smith
Claimant	Danielle Smith
Expense Category	Hosting - Group (Garnet Altwasser)



To:
Heather Pigott
Constituency Manager
Honourable MLA, Danielle Smith
Brooks-Medicine Hat
503 4 Avenue W, Unit A
Brooks, AB T1R 0B3

brooks.medicinehat@assembly.ab.ca

Invoice No. 202503.01
Newell Hotel Co.
PO Box 340
107 2nd St W
Brooks, AB
T1R 1B4
403.409.9491

Item	Qty	Rate	Total	Note
Non-alcoholic drinks	9	\$4	\$36	
			Subtotal	
			GST	
			Total	

Thank-you for your business, we appreciate you.
ettransfer payable to: stuartjward@gmail.com
Cheque payable to: Newell Hotel Company

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



Legislative Assembly of Alberta
SE51764 - Staff Other Expenses Claim Form

Hosting - \$77.98

Receipt Description	Office supplies
Member Name	Danielle Smith
Claimant	Danielle Williams
Expense Category	Other

COSTCO
WHOLESALE

Medicine Hat #593
2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8

SELF-CHECKOUT

HY Member [REDACTED] R [REDACTED]
1212212 MCCAFF 25.99
1477486 MCCAFF 80CT 51.99
SUBTOTAL
TAX
*** TOTAL

XXXXXXXXXXXX [REDACTED]
ACCT: MASTERCARD
REFERENCE #: 0010019430 H
AUTH #: [REDACTED] 2025/03/07 12:55:51
Invoice Number: 202943
Purchase - Mastercard
A0000000041010
0000008000 E800

01 APPROVED - THANK YOU 027
AMOUNT: [REDACTED]

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

G GST 5%
TOTAL NUMBER OF ITEMS SOLD
2025/03/07 12:55:52 593 202 82 702

22059320200822503071255

OP#: 702 Name: SCO

Thank You!
Please Come Again

G - GST P-PST
GST #121476329RT
Whse:593 Trn:202 Trn:82 OP:702

Items Sold [REDACTED]
HY 2025/03/07 12:55

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