LEGISLATIVE ASSEMBLY OF ALBERTA
Member Expense Disclosure Report
Cypress-Medicine Hat - Mr. Drew Barnes
For Expenses Processed April 1 - June 30, 2014

	Budget	Used this Quarter	Used To-Date
Financial Reporting - $ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - $		$1,784.45	$1,784.45
Member Parking - $	$900.00		
Member Travel (overnight stay in constituency) - $			
Member Travel (Extraordinary Accommodation) - $			
Taxi, Bus Travel - $		$319.44	$319.44
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - $			
Member Travel (Meal Per Diems) - $		$666.14	$666.14
Other			
Hosting - $		$155.56	$155.56
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	15	15
Travel Accommodations Allowance (days; 10 max)	10		
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000	5,720	5,720
Special Trips (5 trips per year) - NF	5.0		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		2.0	2.0
Use of a Private Automobile (52 trips per year) - NF	52.0	1.0	1.0
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

PHH Arval

PHH

BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-55-D. BARNES
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 05/01/14
INVOICE NO.
NO DE LA FACTURE 0006106822

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]	D BARNES		[redacted]		000392083525 04/13/14	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE	95.4	1.20	108.90		
							GST-HST / TPS-TVH				5.45	
							REF GST-HST / TPS-TVH REF				5.45	
							** REF NO TOT / TOT NO REF **					114.35
							TOTAL / TOTAL			108.90	5.45	114.35
					000392318028 03/21/14	PETRO CANADA BROOKS AB	UNLEADED REGULAR GASOLINE	60.2	1.27	72.74		
							GST-HST / TPS-TVH				3.64	
							REF GST-HST / TPS-TVH REF				3.64	
							** REF NO TOT / TOT NO REF **					76.38
							TOTAL / TOTAL			72.74	3.64	76.38
					000390818563 03/20/14	SHELL CANADA INC EDMONTON AB	UNLEADED REGULAR GASOLINE	69.8	1.21	80.38		
							GST-HST / TPS-TVH				4.02	
							REF GST-HST / TPS-TVH REF				4.02	
							** REF NO TOT / TOT NO REF **					84.40
							TOTAL / TOTAL			80.38	4.02	84.40
		UNIT TOTAL / TOT UNITE					FUEL QTY / QTE CARB	225.4				
							TOT CHARGES / TOT FRAIS			262.02		
							TOT GST-HST / TOT TPS-TVH				13.11	
							UNIT TOTAL / TOT UNITE					275.13
	BKDN TOTALS / TOTAUX CODIFICATION 01-55	UNITS / VEHIC 1					FUEL QTY / QTE CARB	225.4				
							TOT CHARGES / TOT FRAIS			262.02		
							GST-HST/TPS-TVH				13.11	
							BKDN TOTALS / TOTAUX CODIFICATION					275.13

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

PHH Arval

PHH

BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-55-D. BARNES
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CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 06/01/14
INVOICE NO.
NO DE LA FACTURE 0006116918

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]	D BARNES		[redacted]		000394075409	FEDERATED COOPERATIVES LIMITED		UNLEADED REGULAR GASOLINE	82.5	1.18	92.74		
					05/14/14	BOW ISLAND	AB	GST-HST / TPS-TVH				4.64	
								REF GST-HST / TPS-TVH REF				4.64	
								** REF NO TOT / TOT NO REF **					97.38
								TOTAL / TOTAL			92.74	4.64	97.38
					000393841739	SHELL CANADA INC		UNLEADED REGULAR GASOLINE	61.6	1.19	69.75		
					05/13/14	MEDICINE HAT	AB	GST-HST / TPS-TVH				3.49	
								REF GST-HST / TPS-TVH REF				3.49	
								** REF NO TOT / TOT NO REF **					73.24
								TOTAL / TOTAL			69.75	3.49	73.24
					000393665132	SHELL CANADA INC		UNLEADED REGULAR GASOLINE	82.4	1.19	93.33		
					05/09/14	MEDICINE HAT	AB	GST-HST / TPS-TVH				4.67	
								REF GST-HST / TPS-TVH REF				4.67	
								** REF NO TOT / TOT NO REF **					98.00
								TOTAL / TOTAL			93.33	4.67	98.00
					000393212731	SHELL CANADA INC		UNLEADED REGULAR GASOLINE	65.8	1.19	74.49		
					05/04/14	MEDICINE HAT	AB	GST-HST / TPS-TVH				3.72	
								REF GST-HST / TPS-TVH REF				3.72	
								** REF NO TOT / TOT NO REF **					78.21
								TOTAL / TOTAL			74.49	3.72	78.21
					000393898909	PETRO CANADA		UNLEADED REGULAR GASOLINE	41.4	1.21	47.62		
					05/03/14	MEDICINE HAT	AB	GST-HST / TPS-TVH				2.38	
								REF GST-HST / TPS-TVH REF				2.38	
								** REF NO TOT / TOT NO REF **					50.00
								TOTAL / TOTAL			47.62	2.38	50.00
					000393137249	SHELL CANADA INC		UNLEADED REGULAR GASOLINE	93.5	1.21	107.62		
					05/01/14	MEDICINE HAT	AB	GST-HST / TPS-TVH				5.38	
								REF GST-HST / TPS-TVH REF				5.38	
								** REF NO TOT / TOT NO REF **					113.00
								TOTAL / TOTAL			107.62	5.38	113.00
					000393898908	PETRO CANADA		UNLEADED REGULAR GASOLINE	63.8	1.22	74.03		
					04/29/14	MEDICINE HAT	AB	GST-HST / TPS-TVH				3.70	
								REF GST-HST / TPS-TVH REF				3.70	
								** REF NO TOT / TOT NO REF **					77.73
								TOTAL / TOTAL			74.03	3.70	77.73
		UNIT TOTAL / TOT UNITE						FUEL QTY / QTE CARB	491.0				
								TOT CHARGES / TOT FRAIS			559.58		
								TOT GST-HST / TOT TPS-TVH				27.98	
								UNIT TOTAL / TOT UNITE					587.56
	BKDN TOTALS / TOTAUX CODIFICATION 01-55	UNITS / VEHIC 1						FUEL QTY / QTE CARB	491.0				
								TOT CHARGES / TOT FRAIS			559.58		
								GST-HST/TPS-TVH				27.98	

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

PHH Arval

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FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-55-D. BARNES
- -
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CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 06/01/14
INVOICE NO.
NO DE LA FACTURE 0006116918

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
BKDN TOTALS / TOTAUX CODIFICATION							BKDN TOTALS / TOTAUX CODIFICATION					587.56

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

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes

Claimant Name: Drew Barnes

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

SHELL CANADA PRODUCTS
ON BEHALF OF
1343 TRANSCANADA WAY
MEDICINE HAT AB
T1B 0J1
(403)527-6610

Tax	Description	Amount
F	Bronze No1	
	94.696 L @ $1.167 / L	$110.70

Sub Total	$110.70
Amount GST Taxable	$0.00
5.0% GST Tax	$0.00
Amount PST Taxable	$0.00
0.0% PST Tax	$0.00
Total	**$110.70**
Debit:	$110.70
Change	$0.00

00 APPROVED - THANK YOU 001

[redacted]
PINPAD No. 281231
CHI
1236125070
[redacted]
INTERAC
AID A0000002771010
TVR 0000008000

VERIFIED BY PIN

IMPORTANT
Retain this copy for your records

Fuel Includes	GST	5.0%	$5.27
Fuel Includes	PST	0.0%	$0.00

GST - Fuel - AB No. 137400032 RT

YOUR OPINION COUNTS
Tell us about your recent
Shell station visit at
www.shell.ca/opinion
and you could win a
$25 Shell Gift Card
*Receipt Required

THANK YOU
Questions? 1-800-661-1600

REG: 2 CSH:Kevad TRAN:9181
2014/04/18 10:57:41 ST:C12361

PHH Arval

PHH

BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-55-D. BARNES
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CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 07/01/14
INVOICE NO.
NO DE LA FACTURE 0006126578

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]	D BARNES		[redacted]		000395538925 06/13/14	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	75.8	1.17	84.43		
								GST-HST / TPS-TVH				4.22	
								REF GST-HST / TPS-TVH REF				4.22	
								** REF NO TOT / TOT NO REF **					88.65
								TOTAL / TOTAL			84.43	4.22	88.65
					000395213572 06/09/14	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	91.5	1.17	101.90		
								GST-HST / TPS-TVH				5.10	
								REF GST-HST / TPS-TVH REF				5.10	
								** REF NO TOT / TOT NO REF **					107.00
								TOTAL / TOTAL			101.90	5.10	107.00
					000395432217 06/03/14	IMPERIAL OIL REDCLIFF	AB	ETHANOL REGULAR GRADE	86.3	1.28	105.17		
								GST-HST / TPS-TVH				5.26	
								REF GST-HST / TPS-TVH REF				5.26	
								** REF NO TOT / TOT NO REF **					110.43
								TOTAL / TOTAL			105.17	5.26	110.43
					000394760394 05/31/14	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	60.4	1.16	66.67		
								GST-HST / TPS-TVH				3.33	
								REF GST-HST / TPS-TVH REF				3.33	
								** REF NO TOT / TOT NO REF **					70.00
								TOTAL / TOTAL			66.67	3.33	70.00
					000395673291 05/29/14	HUSKY OIL CAMROSE	AB	ETHANOL BLEND	54.3	1.20	62.08		
								GST-HST / TPS-TVH				3.03	
								REF GST-HST / TPS-TVH REF				3.03	
								** REF NO TOT / TOT NO REF **					65.11
								SUBTOTAL / SOUS TOT			62.08	3.03	65.11
								DISCOUNT / RABAIS			.54-		.54-
								TOTAL / TOTAL			61.54		64.57
					000394637889 05/28/14	SHELL CANADA INC AIRDRIE	AB	UNLEADED REGULAR GASOLINE	85.4	1.20	97.53		
								GST-HST / TPS-TVH				4.88	
								REF GST-HST / TPS-TVH REF				4.88	
								** REF NO TOT / TOT NO REF **					102.41
								TOTAL / TOTAL			97.53	4.88	102.41
					000394516958 05/26/14	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	89.1	1.18	100.00		
								GST-HST / TPS-TVH				5.00	
								REF GST-HST / TPS-TVH REF				5.00	
								** REF NO TOT / TOT NO REF **					105.00
								TOTAL / TOTAL			100.00	5.00	105.00
					000394440998 05/23/14	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	38.0	1.18	42.67		
								GST-HST / TPS-TVH				2.13	
								REF GST-HST / TPS-TVH REF				2.13	
								** REF NO TOT / TOT NO REF **					44.80
								TOTAL / TOTAL			42.67	2.13	44.80
					000395554349	PETRO CANADA		UNLEADED REGULAR GASOLINE	90.5	1.17	100.78		

BLG871

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

PHH Arval

PHH

BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-55-D. BARNES
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CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 07/01/14
INVOICE NO.
NO DE LA FACTURE 0006126578

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]	D BARNES		[redacted]		05/19/14	MEDICINE HAT AB	GST-HST / TPS-TVH				5.04	
							REF GST-HST / TPS-TVH REF				5.04	
							** REF NO TOT / TOT NO REF **					105.82
							TOTAL / TOTAL			100.78	5.04	105.82
			UNIT TOTAL / TOT UNITE				FUEL QTY / QTE CARB	671.3				
							TOT CHARGES / TOT FRAIS			761.23		
							TOT GST-HST / TOT TPS-TVH				37.99	
							UNIT TOTAL / TOT UNITE					799.22
							DISCOUNT / RABAIS					.54-
							TOTAL / TOTAL					798.68
	BKDN TOTALS / TOTAUX CODIFICATION 01-55		UNITS / VEHIC 1				FUEL QTY / QTE CARB	671.3				
							TOT CHARGES / TOT FRAIS			761.23		
							GST-HST/TPS-TVH				37.99	
							BKDN TOTALS / TOTAUX CODIFICATION					799.22
							DISCOUNT / RABAIS					.54-
							TOTAL / TOTAL					798.68

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

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes

Claimant Name: Drew Barnes

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

PAHL'S AUTO SERVICE LTD.
120079 HIGHWAY 3
BURDETT AB T0K0J0
4038333803

Merchant ID: 17750830010
Term ID: 003 Ref #: 022

Sale

[redacted]

VISA Entry Method: Chip

04/25/14 16:54:12

Inv #: 000022 [redacted]

Apprvd Batch#: 000020

Total: $ 101.00

By entering a verified PIN, cardholder agrees to pay issuer such total in accordance with issuer's agreement with cardholder (Merchant agreement if credit voucher).

Retain this copy for statement verification.

Application Label: SCOTIABANK VISA
AID: A0000000031010
TVR: 00 00 00 80 00
TSI: F8 00

Customer Copy

please reimburse me
pahl card
no work claim

PAHL'S AUTO SERVICE LTD.

BUSINESS PHONE 833-3803
RESIDENCE PHONE 833-3823

TEXPAR

G.S.T. Reg. #R104049671RT

AUTO & TIRE SERVICE
ON HIGHWAY #3
BURDETT, AB

Date April 25 2014

M Drew Barnes

SOLD BY	C.O.D.	CHARGE	ON ACCT.	ACCT. FWD.
1				
2	83.4 l gas			101 00
3				
4				
5				
6	Paid			
7	Visa			
8				
9				
10				
11				
12				
13				
14				
15				

paramountprinters.com

Accounts Over 30 Days Are Charged 2% Per Month (24% Per Annum)

№ 19266

THANK YOU!

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
D BARNES MLA
LEGIS ASSEMBLY OF AB

Membership Number [redacted]

Date
April 17, 2014

[redacted]

Statement includes payments and charges received by April 17, 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.

[redacted]

Listing of Charges and Credits — Amount $

[redacted]

New Transactions for D BARNES MLA — Amount $

[redacted]

April 7	**CO-OP TAXI 450243150 EDMONTON** TAXICABS AND LIMOUSINES	**61.00**

[redacted]

[redacted]

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

[redacted]

000282

[redacted]

D BARNES 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

[redacted]

[redacted]

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

[redacted]

Prepared For
D BARNES MLA
LEGIS ASSEMBLY OF AB

Membership Number [redacted]

Date
May 17, 2014

[redacted]

Statement includes payments and charges received by May 17, 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.

3042

[redacted]

Listing of Charges and Credits — Amount $

[redacted]

New Transactions for D BARNES MLA — Amount $

[redacted]

April 16	**FLAT RATE CABS EDMON EDMONTON** TAXICABS AND LIMOUSINES	**60.00**
[redacted]		
April 22	**AIRPORT TAXI SERVICE EDMONTON** TAXICABS AND LIMOUSINES	**60.00**
[redacted]		
April 24	**CO-OP TAXI 450243150 EDMONTON** TAXICABS AND LIMOUSINES	**54.00**

[redacted]

µ Please detach here µ

AMERICAN EXPRESS®

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

Do Not Enclose Cash

[redacted]

000292

[redacted]

D BARNES 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

[redacted]

[redacted]

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes

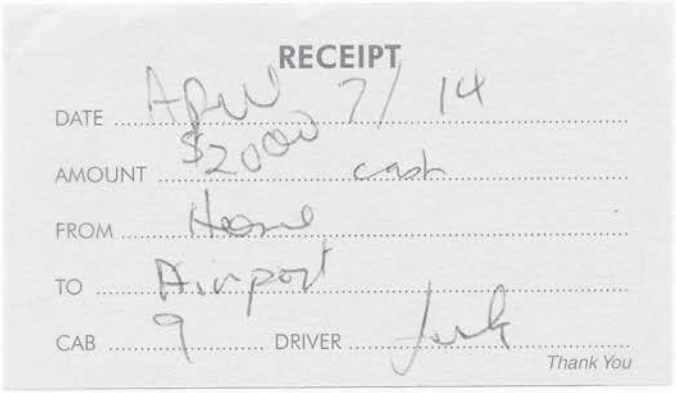
Claimant Name: Drew Barnes

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:



RECEIPT

DATE April 7/14

AMOUNT $2000 cash

FROM Home

TO Airport

CAB 9 DRIVER Jack

Thank You

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes

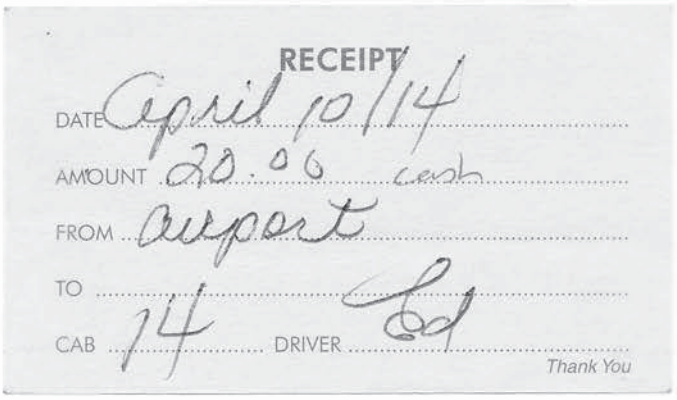
Claimant Name: Drew Barnes

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:



RECEIPT

DATE April 10/14

AMOUNT 20.06 cash

FROM airport

TO

CAB 14 DRIVER Ed

Thank You

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes

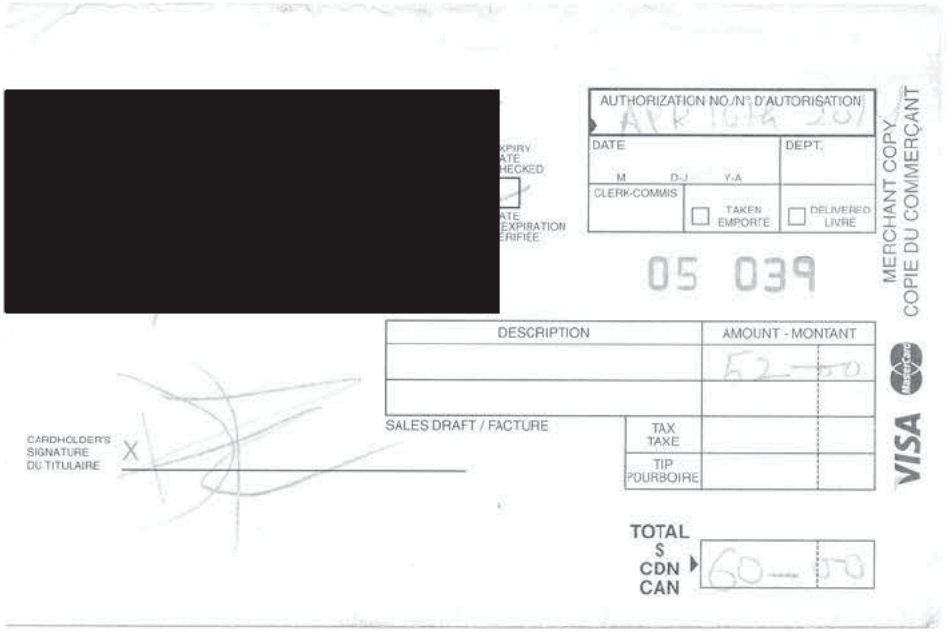
Claimant Name: Drew Barnes

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:



22 (55)

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) [redacted]

Member Name: Barnes, Drew **Constituency:** Cypress-Medicine Hat

For the Month of: April **Year:** 2014 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7	Travel to/from Capital	B in Calgary, L & D in Edmonton	☒	☒	☒	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
9	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
10	Travel to/from Capital	B & L in Edmonton, D in Calgary	☒	☒	☒	39.57	1.98	41.55
11			☐	☐	☐			
12			☐	☐	☐			
13	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
14	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
15	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
16	Travel to/from Capital	Edmonton	☐	☒	☒	30.81	1.54	32.35
17	Travel to/from Capital	B & L in Edmonton, D in Calgary	☒	☒	☒	39.57	1.98	41.55
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22	Travel to/from Capital	Calgary	☐	☐	☒	19.76	0.99	20.75
23	Travel to/from Capital	Edmonton	☐	☒	☒	30.81	1.54	32.35
24	Travel to/from Capital	B & L in Edmonton, D in Calgary	☒	☒	☒	39.57	1.98	41.55
25			☐	☐	☐			
26		[redacted]	☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
					Grand Total	$417.71	$20.89	$438.60

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**

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: Barnes, Drew **Constituency:** Cypress-Medicine Hat

For the Month of: May **Year:** 2014 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2	60 km from Perm. Res.	Lethbridge	☐	☒	☐	11.05	0.55	11.60
3			☐	☐	☐			
4	Travel to/from Capital	Calgary/Edmonton	☐	☒	☒	30.81	1.54	32.35
5	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
6	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
7	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton/Edmonton/Calgary	☒	☒	☒	39.57	1.98	41.55
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15		[redacted]	☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
29	Travel to/from Capital	Edmonton	☒	☐	☒	28.52	1.43	29.95
30			☐	☐	☐			
31			☐	☐	☐			
					Grand Total	$248.43	$12.42	$260.85

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**

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes

Claimant Name: 1603539 Alberta Inc

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Town hall meeting joint event with Blake Pedersen, MLA Medicine Hat.

Invoice

Southside Events Centre (1603539 Alberta Inc.)
4 Strachan Court SE, Medicine Hat Alberta, T1B 4R7 (403) 528-9997

Date: Apr 29 2014
Invoice #: 383
Customer ID:

To: *Legislative Assembly Offi* [redacted]
Cypress Medicine Hat
Attention Shelley &/or Keith

Southside Events Centre

Salesperson	Job	Payment Terms	Due Date
Kevin	Town Hall Meeting		4/29/14

Qty	Description	Unit Price	Line Total
[redacted]			
1.00	Coffee/Tea Service	75.00	75.00
5.00	Dozen Cookies	18.00	90.00
1.00	Veggie Platter & Dip	60.00	60.00
1.00	**Socan Fee**		-
		Gratuity	-
		Subtotal	[redacted]
	GST Exempt	Sales Tax	$ -
1.00	Room Discount		$ -
1.00	Less Discount		$ -
1.00	Less Down Payment prior to event.		-

[redacted]

RECEIVED MAY 14 2014

1/2

Blanket SR. ci

Make all cheques payable to 1603539 Alberta Inc.

4 Strachan Court SE, Medicine Hat Alberta, T1B 4R7, (403) 528 - 9997
Thank you for your business!

[redacted]

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes

Claimant Name: Drew Barnes

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Discuss local concerns.

Constituents

#5

Perkins Restaurant & Bakery
2301 Trans Canada Way S.E.
Medicine Hat,AB T1B 4E9
Phone (403)527-9311
Business # R105395123

Date: May 10, 2014 Time: 08:16AM
Server: Allison # Guest: 3
Bill: 0026 Table : 5

3	Coffee	8.25
2	Twice as Nice Combo	19.98
1	All Canadian	10.49
	Subtotal	38.72
	GST	1.94
Total		**40.66**

tip + 4.34

Open Time : May 10, 2014 08:16AM

45.00

Your feedback is important to us
Complete a survey about your
visit within the next
3 days and get

10 % Off YOUR NEXT VISIT

Go to
www.perkinsexperiencesurvey.com

Write validation code here:

Store # 3882

No purchase necessary.
Official rules at
perkinsrestaurants.com/rules