

LEGISLATIVE ASSEMBLY OF ALBERTA - 28th and 29th LEG

Member EDR 2015-16

055 - Cypress-Medicine Hat - Barnes, Drew

For Expenses Processed January 1 - March 31, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$2,429.07	\$7,406.84
MLA Parking Cap - \$	\$900.00		\$86.08
Other Travel - Parking - \$		\$23.57	\$23.57
Member Travel (overnight stay in constituency) - \$			\$159.61
Member Travel (Extraordinary Accommodation) - \$			\$772.57
Taxi, Bus Travel - \$		\$157.58	
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			\$2,283.90
Member Travel (Meal Per Diems) - \$		\$839.62	
Other			
Hosting - \$		\$595.60	\$1,484.02
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	30	94
Travel Accommodations Allowance (days; 10 max)	10		1
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000	11,169	36,645
Special Trips (5 trips per year) - NF	5	1	1
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		1	5
Use of a Private Automobile (52 trips per year) - NF	52	6	15
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

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

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CLIENT NO. [REDACTED]
NO DU CLIENT
INVOICE DATE 01/01/16
DATE DE LA FACTURE
INVOICE NO. 0006352800
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM 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
D	BARNES				000427791666 12/15/15	FEDERATED COOPERATIVES L MITED MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.6 2.0	.98 3.75	52.85 7.49	2.64 2.64	62.98 62.98
					000427315507 12/11/15	SHELL CANADA INC HANNA AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	32.7	1.09	33.95	1.70 1.70	35.65 35.65
					000427616854 12/10/15	PETRO CANADA EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	40.0	1.03	39.25	1.96 1.96	41.21 41.21
					000427326155 12/06/15	FEDERATED COOPERATIVES L MITED BROOKS AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	44.6	1.04	44.22	2.21 2.21	46.43 46.43
					000426854037 12/05/15	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.0	.88	54.40	2.72 2.72	57.12 57.12
					000427493684 12/03/15	HUSKY OIL EDMONTON AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	59.5	1.02	57.80	2.81 2.81	60.61 60.61 60.61 60.61
					000426534095 11/29/15	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	41.5	.90	35.54	1.78 1.78	37.32 37.32
					000426200816 11/21/15	SHELL CANADA INC MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.2	1.13	62.55	3.13 3.13	65.68 65.68

BLG871

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

FLEET MANAGEMENT SERVICES DETAIL
 DETAILS SERVICES DE GESTION DE PARC

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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
 INVOICE DATE 01/01/16
 DATE DE LA FACTURE
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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
	D BARNES				000427197936 11/19/15	IMPERIAL OIL LEDUC AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.1	1.03	54.94	2.75 2.75	57.69 57.69
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	454.2		442.99	21.70	464.69 .60- 464.09
BKDN TOTALS / TOTAUX CODIFICATION 01-55							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	454.2		442.99	21.70	464.69 .60- 464.09

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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	
INVOICE DATE DATE DE LA FACTURE	02/01/16
INVOICE NO. NO DE LA FACTURE	0006365629

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
	D BARNES				000429439321 01/18/16	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	47.5	.82	37.06	1.85 1.85	38.91 38.91
					000429234638 01/13/16	FEDERATED COOPERATIVES L MITED BOW ISLAND AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.0	.86	47.51	2.38 2.38	49.89 49.89
					000429236724 01/09/16	FEDERATED COOPERATIVES L MITED MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	64.4	.86	52.74	2.64 2.64	55.38 55.38
					000428956189 01/08/16	PETRO CANADA MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	35.0	1.02	33.93	1.70 1.70	35.63 35.63
					000428956188 01/03/16	PETRO CANADA MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.4	1.02	56.68	2.83 2.83	59.51 59.51
					000428068373 12/24/15	SHELL CANADA INC MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.9	1.02	55.24	2.76 2.76	58.00 58.00
					000428956187 12/19/15	PETRO CANADA MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	70.7	1.02	68.64	3.43 3.43	72.07 72.07
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	390.9		351.80	17.59	369.39
					BKDN TOTALS / TOTAUX CODIFICATION 01-55	UNITS / VEHIC 1	FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	390.9		351.80	17.59	

BLG871

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

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-55-D BARNES - - - - - - - -

CLIENT NO. NO DU CLIENT	
INVOICE DATE DATE DE LA FACTURE	02/01/16
INVOICE NO. NO DE LA FACTURE	0006365629

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
												369.39

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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	
INVOICE DATE	03/01/16
DATE DE LA FACTURE	
INVOICE NO.	0006379844
NO DE LA FACTURE	

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM 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
D	BARNES				000430329037 02/07/16	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	88.4	.69	58.00	2.90 2.90	60.90 60.90
					000430791868 02/05/16	PETRO CANADA LETHBRIDGE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	61.0	.87	50.48	2.52 2.52	53.00 53.00
					000430889498 02/04/16	FEDERATED COOPERATIVES L MITED INNISFAIL AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	47.8	.80	36.64	1.83 1.83	38.47 38.47
					000430023008 02/01/16	SHELL CANADA INC STRATHMORE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.0	.88	47.70	2.39 2.39	50.09 50.09
					000430953659 01/30/16	KINGSWAY GAS & CARWA MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	81.8	.65	53.35	2.66 2.66	56.01 56.01
					000429662028 01/25/16	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	84.4	.70	56.19	2.81 2.81	59.00 59.00
					000429932278 01/22/16	FEDERATED COOPERATIVES L MITED INNISFAIL AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	59.4	.89	50.36	2.52 2.52	52.88 52.88
					000430671240 01/20/16	IMPERIAL OIL BROOKS AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.3	.94	51.23	2.56 2.56	53.79 53.79
UNIT TOTAL / TOT UNITE								537.1		403.95	20.19	
								FUEL QTY / QTE CARB				
								TOT CHARGES / TOT FRAIS				
								TOT GST-HST / TOT TPS-TVH				

BLG871

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

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CLIENT NO. [REDACTED]
 NO DU CLIENT
 INVOICE DATE 03/01/16
 DATE DE LA FACTURE
 INVOICE NO. 0006379844
 NO DE LA FACTURE

UNIT NO ----- NO. D'UNITE	DRIVER NAME DRIVER ID. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. ----- NO. DE SERIE	CARD NO. ----- NO. DE CARTE	KM AUTHORIZE ----- KM AUTORISE	REFERENCE NO ACTIVITY DATE ----- NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION ----- NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION ----- DESCRIPTION DES FRAIS	QTY ----- QTE	UNIT COST ----- COUT UNIT	EXTENDED PRICE ----- TOTAL	GST-HST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE ----- MONTANT TOTAL DU
	D BARNES											
UNIT TOTAL / TOT UNITE							424.14					
BKN TOTALS / TOTAUX CODIFICATION							424.14					
01-55												
UNITS / VEHIC							1					
FUEL QTY / QTE CARB							537.1					
TOT CHARGES / TOT FRAIS							403.95					
GST-HST/TPS-TVH							20.19					
BKN TOTALS / TOTAUX CODIFICATION							424.14					

Element Fleet Management



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FLEET MANAGEMENT SERVICES DETAIL DETAILS SERVICES DE GESTION DE PARC
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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-55-D BARNES - - - - - -

CLIENT NO. NO DU CLIENT	
INVOICE DATE DATE DE LA FACTURE	04/01/16
INVOICE NO. NO DE LA FACTURE	0006393974

UNIT NO NO. D'UNITÉ	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. NO. DE SERIE	CARD NO. NO. DE CARTE	KN AUTHORIZE KN 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
	D BARNES				000432961120 03/21/16	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	86.0	.88	71.96	3.60 3.60	75.56 75.56
					000432442881 03/13/16	SHELL CANADA INC STRATHMORE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	59.0	1.13	63.39	3.17 3.17	66.56 66.56
					000432667660 03/12/16	PETRO CANADA MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	84.4	.97	77.90	3.90 3.90	81.80 81.80
					000432895192 03/10/16	FEDERATED COOPERATIVES LIMITED INNISFAIL AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	46.9	.93	41.57	2.08 2.08	43.65 43.65
					000432667662 03/07/16	PETRO CANADA AIRDRIE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	34.8	1.00	33.12	1.66 1.66	34.78 34.78
					000431837286 03/02/16	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	85.6	.76	61.90	3.10 3.10	65.00 65.00
					000432328944 03/01/16	IMPERIAL OIL REDCLIFF AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.1	.89	50.85	2.54 2.54	53.39 53.39
					000432667658 02/29/16	PETRO CANADA MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	59.4	.93	52.53	2.63 2.63	55.16 55.16
					000431604060 02/27/16	SHELL CANADA INC VIKING AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF	84.0	.76	62.29	3.12 3.12	

BLG871

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

CLIENT NO.
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INVOICE DATE
DATE DE LA FACTURE
INVOICE NO.
NO DE LA FACTURE

04/01/16
0006393974

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
	D. BARNES						** REF NO TOT / TOT NO REF ** TOTAL / TOTAL			62.29	3.12	65.41 65.41
					000432899807 02/26/16	HUSKY OIL BROOKS AB	ETANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	71.0	.74	50.04	2.41 2.41	52.45 52.45 71- 51.74
					000431598852 02/24/16	FEDERATED COOPERATIVES LIMITED MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	93.3	.76	67.48	3.37 3.37	78.34 78.34
					000431241353 02/19/16	SHELL CANADA INC MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.1	.80	45.71	2.29 2.29	48.00 48.00
					000431956992 02/19/16	FASGAS CAMROSE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	39.5	.83	31.17	1.56 1.56	32.73 32.73 40- 32.33
					000432667659 02/18/16	PETRO CANADA MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.3	.82	40.77	2.04 2.04	42.81 42.81
					000432867661 02/18/16	PETRO CANADA AIRDRIE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	30.6	1.00	29.14	1.46 1.46	30.60 30.60
					000431249095 02/12/16	FEDERATED COOPERATIVES LIMITED MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	81.9	.67	52.22	2.61 2.61	54.83 54.83
					000432417626	XTR ENERGY LTD	UNLEADED REGULAR GASOLINE	83.6	.69	54.89		

016871

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

BDF290001

FLEET MANAGEMENT SERVICES DETAIL
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 217 OF 269
 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

CLIENT NO.
 NO DU CLIENT
 INVOICE DATE 04/01/16
 DATE DE LA FACTURE
 INVOICE NO. 0006393974
 NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	D BARNES				02/09/16	BCW ISLAND AB	GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL			2.74 2.74 54.89	2.74	57.63 57.63
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	1112.5	894.42	44.28		938.70 1.11- 937.59
BKDN TOTALS / TOTAUX CODIFICATION 01-55							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	1112.5	894.42	44.28		938.70 1.11- 937.59
BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL												938.70 1.11- 937.59

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:

oil change.
\$335.91

DREW BARNES

INVOICE

1235 - 101 St. SW
Edmonton, Alberta T6X 1A1

DUPLICATE 1
PAGE 2

Telephone (780) 462-2834
Fax (780) 485-1044
Toll Free 1-888-948-2834

BUS:		CELL:		SERVICE ADVISOR:		8460 CODY MACKIE		
COLOUR	YEAR	MAKE/MODEL		VIN		LICENSE	KILOMETRES IN/OUT	TAC
DEL DATE		PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
10SEP05 DE		09SEP2009	17:00	29OCT15			CASH	29OCT15
R.O. OPENED		READY		OPTIONS: ENG:3.1 Liter				
07:36 28OCT15		15:41 29OCT15						
LINE OPCODE TECH TYPE HOURS						LIST	NET	TOTAL

176958 1.00 REPLACED FUEL FILTER. CLEARED FAULTS AND TEST DROVE VEHICLE. FOUND SAME FAULT P2543 LOW PRESSURE FUEL SYSTEM SENSOR CIRCUIT INTERMITTENT (OPEN CIRCUIT/ SHORT CIRCUIT TO GROUND STATIC) TO COME BACK. NEXT STEP IS TO REPLACE THE FUEL PUMP AND CONTROL MODULE.

ENVIRONMENTAL SURCHARGE/SHOP SUPPLIES 35.76

830410858 (#1 R830410858)

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

STATEMENT OF DISCLAIMER
The factory warranty constitutes all of the warranty with respect to the sale of this merchandise. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this merchandise.

DESCRIPTION	TOTALS
LABOUR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
G.S.T. / P.S.T.	
PLEASE PAY THIS AMOUNT	

IS2HEN DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER SIGNATURE

CUSTOMER COPY

DREW BARNES

INVOICE

1235 - 101 St. SW
Edmonton, Alberta T6X 1A1

DUPLICATE 1
PAGE 1

Telephone (780) 462-2834
Fax (780) 486-1044
Toll Free 1-866-948-2834

COLOUR	YEAR	CELL:	MAKE/MODEL	SERVICE ADVISOR:	VIN	8460 CODY MACKIE	LICENSE	KM OMETRES IN/OUT	TAX
--------	------	-------	------------	------------------	-----	------------------	---------	-------------------	-----

10SEP05 DD	09SEP2009	17:00	29OCT15	149.00	CASH	29OCT15
R.O. OPENED	READY	OPTIONS:	ENG:3.1 Liter			

07:36	28OCT15	15:41	29OCT15
LINE	OPCODE	TECH	TYPE HOURS

A CUSTOMER STATES CHECK ENGINE LIGHT WAS ON FLASHING. CURRENTLY NOT ON
04AUZ DIAG

8275	CA					
PARTS:	0.00	LABOR:	149.00	OTHER:	0.00	TOTAL LINE A:
176954	1.00	VEHICLE IS IN MILES, CHECKED FAULTS AND FOUND P2543 LOW				149.00
PRESSURE FUEL SYSTEM SENSOR CIRCUIT INTERMITTENT. FOLLOWED TEST PLAN						
AND PERFORMED PINPOINT TESTS. FOUND TEST PLAN TO INDICATE POSSIBLE						
CLOGGED FUEL FILTER OR IN TANK PICK UP. WILL NEED TO START WITH FUEL						
FILTER AND GO FROM THERE. RECOMMEND CUSTOMER NO LONGER DRIVE VEHICLE AS						
IT IS UNSAFE TO DRIVE.						

B AUDI 6 CYLINDER OIL AND FILTER CHANGE						
6CLOF AUDI 6 CYLINDER OIL AND FILTER CHANGE						
8275	CA					
1 EHC50 ENVIRO CHARGE						149.95
7 EHC10 ENVIRO CHARGE						0.50
6CLOF AUDI 6 CYLINDER OIL AND FILTER CHANGE						0.10
8275	ISM					
1 06E-115-562-C FILTERELEM						(N/C)
70 G-052-167-S0 ENGINE OIL						(N/C)
PARTS:	1.20	LABOR:	149.95	OTHER:	0.00	TOTAL LINE B:
176954	TECH PERFORMED OIL AND FILTER CHANGE RESET SERVICE LIGHT,					151.15
TOPPED UP FLUIDS, ADJUSTED TIRE PRESSURES, LUBRICATED LOCKS AND HINGES,						
UPPER CONTROL ARM BUSHINGS ARE SEPARATED AND A SAFETY CONCERN. REAR						
BRAKES ARE AR 2mm. VALVE COVERS ARE LEAKING. SEE ESTIMATE FOR DETAILS.						

C WASH AND VACUUM VEHICLE. SOUTHGATE AUDI IS NOT RESPONSIBLE FOR CRACKS						
CREATED WHEN WASHING THE CAR FROM ROCK CHIPS.						
WASH WASH AND VACUUM VEHICLE. SOUTHGATE AUDI IS						
NOT RESPONSIBLE FOR CRACKS CREATED WHEN						
WASHING THE CAR FROM ROCK CHIPS.						
999	CA					
PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE C:
						0.00

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

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DESCRIPTION	TOTALS
LABOUR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
G.S.T. / P.S.T.	
PLEASE PAY THIS AMOUNT	

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER SIGNATURE

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes

Claimant Name: Drew Barnes

Expense Category: Member Parking

For hosting, select one:

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

Purpose:

airport parking while
in Edmonton for session.

23.57
+ 1.18 GST
\$24.75

SECURITY RECEIPT
REÇU À TEINTE DE SÉCURITÉ



RECEIVED FROM	DATE	22 NOV 15	684232
REÇU DE			
ADDRESS	HIS		
ADRESSE			
FOR		DOLLARS	
POUR		AIRPORT PARKING	
FROM		22 NOV	TO
DU			27 NOV
ACCOUNT - COMPTE		TAX REG. NO.	
TOTAL AMOUNT		N° DE TAXE	
MONTANT TOTAL		121408967RT	
AMOUNT PAID			
MONTANT PAYÉ			
BALANCE DUE			
SOLDE DU			
☐ CASH			
COMPTANT	\$ 24.75		
☐ CHEQUE			
CHEQUE	\$		
☐ MONEY ORDER			
MANDAT	\$		
BY			
PAR			

S27B

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: Economic Club of Canada

Purpose:

Costs of Climate Change -
Beijing Flood Insurance Right
Speaker

9.52
+ 0.48 GST
\$10.00

YELLOW CAB

780.462.3456

edmtaxi.com

GST# Nov 26

Date: [REDACTED] Amount: \$10.00

Driver: Amardeep Car#: 007

From: Hotel Western

To: 97 AVE + 107 St.

10135-31 Avenue, Edmonton, AB T6N 1C2



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:

tax to airport in YEG

Date 25/11/16 Amount \$10.00
GST INCLUDED

From _____

To _____

To _____

Driver  Car# _____

780.425.2525 780.425.8310

www.co-optaxi.com

9.52
+ 0.48 GST
\$10.00

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: AAMDC

Purpose:

attended the AAMDC luncheon

\$9.52

Date 16/03/2016 Amount 10.-
GST INCLUDED

From Ed. Bully

To shaw

To AAMDC Council

Driver _____ Car# _____

780.425.2525 780.425.8310
www.co-optaxi.com



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

Date
December 16, 2015



Page 1 of 4

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

Statement includes payments and charges received by December 16, 2015

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 December 16, 2015

Total Credit Limit \$

Available Credit Limit \$

New Transactions for D BARNES MLA

Amount \$

November 23	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	63.25
November 23	YELLOW CAB 450241247 EDMONTON TAXICABS AND LIMOUSINES	8.97

1951

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

000293



D BARNES MLA
LEGIS ASSEMBLY OF AB
901 9718 107 STREET
EDMONTON AB
T5K 1E4

↑ Please detach here ↑

Membership Number	
Amount Due \$	Amount Paid \$

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



The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: December 16, 2015

Page 2 of 4

New Transactions for D BARNES MLA Continued

Amount \$

November 26	YELLOW CAB 450241247 EDMONTON TAXICABS AND LIMOUSINES	63.25
-------------	--	-------

63.25

Total New Transactions for D BARNES MLA

\$129.02



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: December

Year: 2015

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
2	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
3	Travel to/from Capital	Edmonton/Calgary	☒	☒	☐	19.81	0.99	20.80
4			☐	☐	☐			
5			☐	☐	☐			
6	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
7	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
8	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
9	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
10	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
Grand Total						\$277.00	\$13.85	\$290.85

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

Jan 4, 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: Barnes, Drew

Constituency: Cypress-Medicine Hat

For the Month of: January

Year: 2016

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20	Travel to/from Capital	Strathmore, Edmonton	☐	☒	☒	30.81	1.54	32.35
21	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
22	Travel to/from Capital	Edmonton	☒	☒	☐	19.81	0.99	20.80
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
Grand Total						\$90.19	\$4.51	\$94.70

I certify that I have met the requirements of section 7 of the *Members' Allowances Order, RMSC 1992, c. M-1*, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date

Feb 5, 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: Barnes, Drew

Constituency: Cypress-Medicine Hat

For the Month of: February

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	☐	☐	☒	19.76	0.99	20.75
2	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
3	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
4	Travel to/from Capital	Calgary	☐	☐	☒	19.76	0.99	20.75
5			☐	☐	☐			
6			☐	☐	☐			
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18	Travel to/from Capital	Brooks/YEG/YEG	☒	☒	☒	39.57	1.98	41.55
19	Travel to/from Capital	Edmonton	☒	☐	☐	8.76	0.44	9.20
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
Grand Total						\$147.19	\$7.36	\$154.55

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date



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: March

Year: 2016

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	60 km from Perm. Res.	Calgary	☐	☐	☒	19.76	0.99	20.75
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
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	Edmonton	☒	☒	☒	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	☒	☐	☒	28.52	1.43	29.95
17	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
18			☐	☐	☐			
19		[REDACTED]	☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
Grand Total						\$325.24	\$16.26	\$341.50

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

March 31, 2016

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:

*budget
health care
discussion*

*133.40
+ 6.67 GST
\$140.07*

*hosting
constituent
subject
health care*
CYPRESS CLUB
MEDICINE HAT, AB
(403) 526-2988
GST# 108079484

RECEIPT

1. Duplicate

Account #32

Barnes, Drew

4 x 9.00	36.00
SOUP & SAND SPEC	
4 x 13.50	54.00
lunch special 1	15.00
OPEN FOOD	2.00
SM POP	
6 x 1.50	9.00
COFFEE	

Gratuity	17.40
GST	6.67

Total 140.07

Charge 140.07

2:10 PM 10/23/2015 2 KENNEDY

3

THANK YOU

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes, MLA

Claimant Name: Drew Barnes, MLA

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

discuss economy

50.03
+ 2.50 GST
\$52.53

*constituent
- economy*

CYPRESS CLUB
MEDICINE HAT, AB
(403) 526-2988
GST# 108079484

CYPRESS CLUB COPY

Account #32

Barnes, Drew

SOUP & SAND SPEC	10.00
2 x 14.50	
lunch special 2	29.00
3 x 1.50	
COFFEE	4.50

Gratuity	6.53
GST	2.50

Total 52.53

2:21 PM 1/6/2016 6 AMANDA 1

THANK YOU

Signature: _____

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes, MLA

Claimant Name: Drew Barnes, MLA

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

discuss highway 3 issues

STREATSIDE EATERY LTD.
317-8TH STREET S.
LETHBRIDGE, AB T1J2J5
4033288085

SALE

Server #: 000002
MID: 5772220
TID: 005 REF#: 00000003
Batch #: 043
01/08/16 12:58:29
APPR CODE: [REDACTED]
VISA
***** [REDACTED] **/**

AMOUNT \$42.84
TIP \$6.43
TOTAL \$49.27

APPROVED

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

THANK YOU/MERCI

CUSTOMER COPY

Streetside
LEATERY

STREATSIDE EATERY

Order #: 1-107688

11

3 Guests

Server: Cora

Cashier: Cora

2016-01-08 12:57:14

1 London Road Burger	13.00
- beef - no cheese - fries	
2 Quiche	25.30
- soup	
1 Herbal Tea	2.50

Subtotal:	40.80
Tax (5% of 40.80):	2.04
Total:	42.84

Left burger
King 3
constituent
Amount Due: 42.84

Streetside Eatery
317 8th Street South
Lethbridge, AB T1J2J5
Canada
403-328-8085
streetside@gmail.com
streetsideeatery.com
Manager: GST# R105074581

47.23
+ 2.04 GST
\$49.27

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes, MLA

Claimant Name: Shelley Beck

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

coffee for constituent meetings in office

\$19.98

You're at home here.



WELCOME TO
MEDICINE HAT CO-OP
G.S.T.# R103619193

SPECIAL
TIM HORT DRK SS \$9.99 N
TIM HORT DRK SS \$9.99 N

TYPE: Purchase

ACCT: MASTERCARD \$

CARD NUMBER: *****
DATE/TIME: 11/17/2015 13:20:51
REFERENCE #: 0010017420 C
TERM: 66209741
AUTHOR.# :
AID: A0000000041010
TVR: 0000008000
TSI: E800

MasterCard
01 APPROVED - THANK YOU 027

IMPORTANT:
retain this copy for your records

CUSTOMER COPY

MASTERCARD
Auth Code =
CHANGE \$0.00
TOTAL TAX \$0.00

Member Number

C0213 #6051 13:21:06 17NOV2015
S01691 R006

Thank-You
For Shopping Co-op!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes, MLA

Claimant Name: Shelley Beck

Expense Category: Hosting

For hosting, select one:

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

Purpose:

coffee for constituent meetings in office

Tim Hortons Store 2739
3201 13th Ave SE
Medicine Hat, AB
T1B 1E2
403-504-0824

Dec 17 2015 12:57 pm GST# 133343236 Trans# 943351

TRANSACTION RECORD

Card Number : *****
Card Type : DEBIT
Card Entry : CHIP
Account Type : CHEQUING
Trans Type : PURCHASE
Amount : \$ 59.94

Auth # :
Sequence # : 000077
Reference # : 00000077
Trace # : 00071353
Term ID : 202
Date : 15/12/17
Time : 12:57:02

APPROVED

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

Application Label: Interac
AID: A0000002771010
TVR: 8000008000
TC : B45E6CAB5F4E17D
TSI: 6800

Tim Hortons #2739
3201 13th Ave SE
Medicine Hat, AB
GST# 133343236

Take-out
Order #
023351

6 Single Serve - Dark Roast 59.94
Subtotal 59.94
Total 59.94
Debit Auth # 59.94

Thursday December 17, 2015 12:57:27
Shift # 3 Reg. # 2 Trans # 943351

Thanks for stopping by!
Tell us how we did at
www.telltimhortons.com
1-888-501-1616

Thank You for your patronage.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes, MLA

Claimant Name: Shelley Beck

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

coffee and coffee supplies for constituent meetings in office

\$72.42



Safeway Division Avenue
615 Division Avenue S. Medicine Hat AB
Phone: 403.504.2920
GST# 817093735

Served by: Madison V

Welcome to Safeway

GROCERY

TimHortn Single Serv	\$9.49	C
YOU SAVED \$0.50		
TimHortn Single Serv	\$9.49	C
BONUS EARNED	20 Miles	
YOU SAVED \$0.50		
TimHortn Single Serv	\$9.49	C
YOU SAVED \$0.50		
TimHortn Single Serv	\$9.49	C
BONUS EARNED	20 Miles	
YOU SAVED \$0.50		
TimHortn Single Serv	\$9.49	C
YOU SAVED \$0.50		
TimHortn Single Serv	\$9.49	C
YOU SAVED \$0.50		
Coffee Mate Orig	\$5.99	C

NUMBER OF ITEMS

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew Barnes, MLA

Claimant Name: Drew Barnes

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

economy and jobs

\$19.17

HUMPTY'S
1011 TRANSCANADA WAY SE
MEDICINE HAT, AB
(403) 529-5535
GST#R21305504
S E R V I C E

Table #31

Guests: 2

1: COFFEE	2.00
1: BREAK SPEC 5.50	5.50
2: COFFEE	2.00
2: BREAK SPEC 5.50	11.00

GST (xbl Total)	16.00
GST	0.93
Total	17.43

3:35 AM 2/16/2016 2: LAURIE

2.57 1/2

THANK YOU!
PLEASE PAY SERVER
omit: 17 jobs 20.00

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes, MLA

Claimant Name: Drew Barnes

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

economy and constituent issues

\$41.08

PAPA JOHN'S PIZZA
750 KINGSWAY SE
MEDICINE HAT, AB, T1A2X4
403-527-6000

SALE

MID: 87337330013
TID: 016 REF#: 00000002
Batch #: 335
02/19/16 12:47:20
APPR CODE: XXXXXXXXXX
VISA Chip
***** XXXXXXXXXX **/*

AMOUNT \$37.26
TIP \$5.59
TOTAL \$42.85

APPROVED

SCOTIABANK VISA
AID: A0000000031010
TVR: 00 00 00 80 00
TSt: F8 00

THANK YOU
PLEASE COME AGAIN

CUSTOMER COPY

THANK YOU FOR CHOOSING
PAPA JOHN'S PIZZA

Driver: ADAM FISK

Order # : 0004

Order Time : 11:50 AM

Out: 12:16 PM OTD: 00:26

Phone # : (403) 528-2191

Customer : Kendra Bolloch

CSC : 31

Address : Drew Barnes Con. Office
1299 Trans Canada Way Se 5
Medicine Hat AB t1b 1h9

Sector : SW10

Delivery Remarks: big green sign

1 <14> 14" Original	17.99
+Hawaiian	
+1 Garlic Sauce Cup	
+1 Pepperoncini Pepper	
1 <14> 14" Original	17.99
+1 Pepperoncini Pepper	
+Bacon	
+1 Garlic Sauce Cup	
+Pepperoni	
Delivery Fee	3.50

Subtotal:	39.48
Discount:	3.99
Total Tax:	1.77

Total: 37.26

Balance Due: 0.00

Run Summary

Driver: ADAM FISK
Total Order: 37.26
Total Sales: 37.26

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes

Claimant Name: Shelley Beck

Expense Category: Hosting

For hosting, select one:

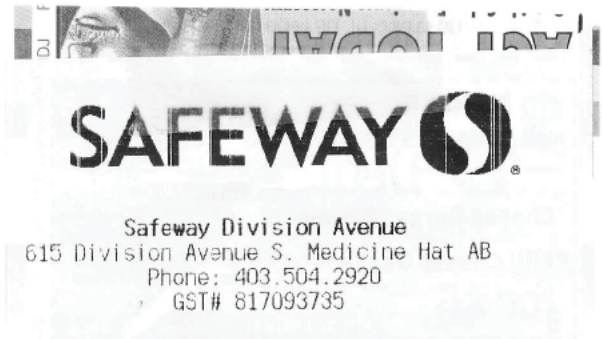
☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

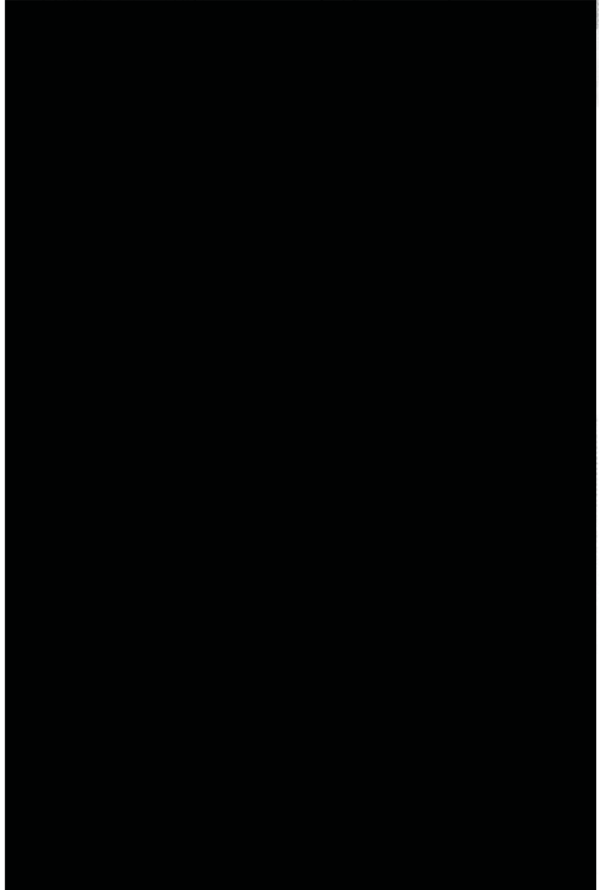
coffee for
constituent office
appointments
\$69.93



Served by: Peggy M

Welcome to Safeway

Loyalty Offer	\$0.00	C
GROCERY		
TimHortn Single Serv	\$9.99	C
TimHortn Single Serv	\$9.99	C
TimHortn Single Serv	\$9.99	C
TimHortn Single Serv	\$9.99	C
TimHortn Single Serv	\$9.99	C
TimHortn Single Serv	\$9.99	C
TimHortn Single Serv	\$9.99	C



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Drew Barnes

Claimant Name: Shelley Beck

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

sugar for office meetings

You're at home here.



South Country Co-op

13th Ave Food Centre
3030 - 13th Ave SE, Medicine Hat T1B 1E3

J LEPL

MEMBER#: [REDACTED]

TIM HORT DRK SS

8 @ \$9.99 EA \$79.92 N

8 BALANCE DUE \$79.92

TYPE: Purchase

ACCT: MASTERCARD \$ 79.92

CARD NUMBER: ***** [REDACTED]

DATE/TIME: 03/25/2016 16:45:06

REFERENCE #: 0010010910

TERM: 66209740

AID: A0000000041010

TVR: 0000008000

TSI: E800

MasterCard

01 APPROVED - THANK YOU 027

IMPORTANT:
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MASTERCARD \$79.92

Auth Code = [REDACTED]

CHANGE \$0.00

TOTAL TAX \$0.00

Member Number [REDACTED]

C0210 #2499 16:45:34 25MAR2016
S01691 R005

Thank-You
For Shopping Co-op!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Drew BarnesClaimant Name: Shelley BeckExpense Category: Hosting

For hosting, select one:

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

Purpose:

sugar for office meetings

\$2.50

WELCOME TO
MEDICINE HAT CO-OP
G.S.T.# R103619193
J LEPLÉ

ROGERS SUGAR	\$2.49 N
1 BALANCE DUE	\$2.49
Penny Rounding	-\$0.01
CASH	\$20.00
CHANGE	\$17.50
TOTAL TAX	\$0.00

Member Number

C0225 #7214 13:48:23 6OCT2015
S01691 R001Thank-You
For Shopping Co-op!