LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2018-19
055 - Cypress-Medicine Hat - Barnes, Drew
For Expenses Processed April 1 - June 30, 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - $ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - $		$2,584.07	$2,584.07
MLA Parking Cap - $	$900.00		
Other Travel - Parking - $			
Member Travel (overnight stay in constituency) - $			
Taxi, Bus Travel - $		$21.59	$21.59
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - $			
Member Travel (Meal Per Diems) - $		$1,096.80	$1,096.80
Accommodation			
Edmonton Accommodation Allowance ($23,160.00/yr max)	$23,160.00	$5,565.00	$5,565.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - $		$2,070.00	$2,070.00
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000.0	3,170.0	3,170.0
Special Trips (5 trips per year) - NF	5.0		
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	7.0	7.0
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

Element Fleet Management

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BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETA LS 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]
NVOICE DATE
DATE DE LA FACTURE 05/01/18
NVOICE NO.
NO DE LA FACTURE 0007089885

UNIT NO / NO. D'UNITE	DRIVER NAME / DRIVER I D. / 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.	SUPPL ER NAME / SUPPL ER LOCATION / NOM DU FOURNISSEUR / POINT DE VENTE	CHARGE DESCRIPTION / DESCR PTION 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]	BARNES		[redacted]		000495573209	SHELL CANADA INC	UNLEADED PREMIUM GASOLINE	43.1	1.48	60.74		
					04/15/18	BROOKS AB	GST-HST / TPS-TVH				3.04	
							REF GST-HST / TPS-TVH REF				3.04	
							** REF NO TOT / TOT NO REF **					63.78
							TOTAL / TOTAL			60.74	3.04	63.78
					000495749066	HUSKY OIL	UNLEADED REGULAR GASOLINE	86.7	1.29	106.53		
					04/13/18	BROOKS AB	GST-HST / TPS-TVH				5.21	
							REF GST-HST / TPS-TVH REF				5.21	
							** REF NO TOT / TOT NO REF **					111.74
							SUBTOTAL / SOUS TOT			106.53	5.21	111.74
							DISCOUNT / RABAIS			.87-		.87-
							TOTAL / TOTAL			105.66		110.87
					000495445824	SHELL CANADA INC	UNLEADED PREMIUM GASOLINE	36.8	1.36	47.62		
					04/12/18	EDMONTON 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
					000495445833	SHELL CANADA INC	UNLEADED PREMIUM GASOLINE	8.5-	1.35	10.96-		
					04/12/18	EDMONTON AB	GST-HST / TPS-TVH				.55-	
							REF GST-HST / TPS-TVH REF				.55-	
							** REF NO TOT / TOT NO REF **					11.51-
							TOTAL / TOTAL			10.96-	.55-	11.51-
					000494741886	SHELL CANADA INC	UNLEADED PREMIUM GASOLINE	51.5	1.48	72.58		
					04/08/18	BROOKS AB	GST-HST / TPS-TVH				3.63	
							REF GST-HST / TPS-TVH REF				3.63	
							** REF NO TOT / TOT NO REF **					76.21
							TOTAL / TOTAL			72.58	3.63	76.21
					000495105189	PETRO CANADA	UNLEADED PREMIUM GASOLINE	56.8	1.42	76.78		
					04/05/18	RED DEER AB	GST-HST / TPS-TVH				3.84	
							REF GST-HST / TPS-TVH REF				3.84	
							** REF NO TOT / TOT NO REF **					80.62
							TOTAL / TOTAL			76.78	3.84	80.62
					000494141110	SHELL CANADA INC	UNLEADED REGULAR GASOLINE	90.6	1.15	99.14		
					04/02/18	MEDICINE HAT AB	GST-HST / TPS-TVH				4.96	
							REF GST-HST / TPS-TVH REF				4.96	
							** REF NO TOT / TOT NO REF **					104.10
							TOTAL / TOTAL			99.14	4.96	104.10
					000494633294	FEDERATED COOPERATIVES LIMITED	UNLEADED PREMIUM GASOLINE	59.6	1.43	81.19		
					04/02/18	BROOKS AB	GST-HST / TPS-TVH				4.06	
							REF GST-HST / TPS-TVH REF				4.06	
							** REF NO TOT / TOT NO REF **					85.25
							TOTAL / TOTAL			81.19	4.06	85.25
					000493990338	SHELL CANADA INC	UNLEADED REGULAR GASOLINE	51.9	1.15	56.82		

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

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[redacted]	BARNES		[redacted]		03/29/18	MEDICINE HAT	AB	GST-HST / TPS-TVH				2.84	
								REF GST-HST / TPS-TVH REF				2.84	
								** REF NO TOT / TOT NO REF **					59.66
								TOTAL / TOTAL			56.82	2.84	59.66
					000494292078	XTR ENERGY LTD		UNLEADED REGULAR GASOLINE	85.8	1.15	93.85		
					03/28/18	BOW ISLAND	AB	GST-HST / TPS-TVH				4.69	
								REF GST-HST / TPS-TVH REF				4.69	
								** REF NO TOT / TOT NO REF **					98.54
								TOTAL / TOTAL			93.85	4.69	98.54
					000495105188	PETRO CANADA		UNLEADED REGULAR GASOLINE	92.7	1.15	101.48		
					03/24/18	MEDICINE HAT	AB	GST-HST / TPS-TVH				5.07	
								REF GST-HST / TPS-TVH REF				5.07	
								** REF NO TOT / TOT NO REF **					106.55
								TOTAL / TOTAL			101.48	5.07	106.55
					000495311472	IMPERIAL OIL		UNLEADED PREMIUM GASOLINE	48.8	1.38	64.15		
					03/22/18	BASSANO	AB	GST-HST / TPS-TVH				3.21	
								REF GST-HST / TPS-TVH REF				3.21	
								** REF NO TOT / TOT NO REF **					67.36
								TOTAL / TOTAL			64.15	3.21	67.36
					000495105187	PETRO CANADA		UNLEADED PREMIUM GASOLINE	55.0	1.32	69.07		
					03/19/18	EDMONTON	AB	GST-HST / TPS-TVH				3.45	
								REF GST-HST / TPS-TVH REF				3.45	
								** REF NO TOT / TOT NO REF **					72.52
								TOTAL / TOTAL			69.07	3.45	72.52
					000494388386	FASGAS		UNLEADED PREMIUM GASOLINE	52.7	1.33	66.68		
					03/08/18	INNISFAIL	AB	GST-HST / TPS-TVH				3.33	
								REF GST-HST / TPS-TVH REF				3.33	
								** REF NO TOT / TOT NO REF **					70.01
								SUBTOTAL / SOUS TOT			66.68	3.33	70.01
								DISCOUNT / RABAIS			.53-		.53-
								TOTAL / TOTAL			66.15		69.48
					000495311471	IMPERIAL OIL		UNLEADED PREMIUM GASOLINE	46.7	1.33	59.13		
					03/06/18	RED DEER	AB	GST-HST / TPS-TVH				2.96	
								REF GST-HST / TPS-TVH REF				2.96	
								** REF NO TOT / TOT NO REF **					62.09
								TOTAL / TOTAL			59.13	2.96	62.09
			UNIT TOTAL / TOT UNITE					FUEL QTY / QTE CARB	850.2				
								TOT CHARGES / TOT FRAIS			1,044.80		
								TOT GST-HST / TOT TPS-TVH				52.12	
								UNIT TOTAL / TOT UNITE					1,096.92
								DISCOUNT / RABAIS					1.40-
								TOTAL / TOTAL					1,095.52

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BKDN TOTALS / TOTAUX CODIFICATION 01-55				HIC	1		FUEL QTY / QTE CARB	850.2				
							TOT CHARGES / TOT FRAIS			1,044.80		
							GST-HST/TPS-TVH				52.12	
							BKDN TOTALS / TOTAUX COD FICATION					1,096.92
							DISCOUNT / RABAIS					1.40-
							TOTAL / TOTAL					1,095.52

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NVOICE NO.
NO DE LA FACTURE 0007112548

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]	BARNES		[redacted]	0301000	000498480608 05/11/18	PETRO CANADA STRATHMORE	AB	UNLEADED PREMIUM GASOLINE	56.8	1.50	80.98		
								GST-HST / TPS-TVH				4.05	
								REF GST-HST / TPS-TVH REF				4.05	
								** REF NO TOT / TOT NO REF **					85.03
								TOTAL / TOTAL			80.98	4.05	85.03
					000498389522 05/06/18	HUSKY OIL LEDUC	AB	ETHANOL BLEND	40.0	1.50	57.19		
								GST-HST / TPS-TVH				2.81	
								REF GST-HST / TPS-TVH REF				2.81	
								** REF NO TOT / TOT NO REF **					60.00
								SUBTOTAL / SOUS TOT			57.19	2.81	60.00
								DISCOUNT / RABAIS			.40-		.40-
								TOTAL / TOTAL			56.79		59.60
					000497345282 05/03/18	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED PREMIUM GASOLINE	58.9	1.54	86.36		
								GST-HST / TPS-TVH				4.32	
								REF GST-HST / TPS-TVH REF				4.32	
								** REF NO TOT / TOT NO REF **					90.68
								TOTAL / TOTAL			86.36	4.32	90.68
					000497357028 04/30/18	FASGAS SHERWOOD PARK	AB	UNLEADED PREMIUM GASOLINE	53.1	1.38	69.70		
								GST-HST / TPS-TVH				3.48	
								REF GST-HST / TPS-TVH REF				3.48	
								** REF NO TOT / TOT NO REF **					73.18
								SUBTOTAL / SOUS TOT			69.70	3.48	73.18
								DISCOUNT / RABAIS			.53-		.53-
								TOTAL / TOTAL			69.17		72.65
					000496827512 04/29/18	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED PREMIUM GASOLINE	31.9	1.48	44.89		
								GST-HST / TPS-TVH				2.25	
								REF GST-HST / TPS-TVH REF				2.25	
								** REF NO TOT / TOT NO REF **					47.14
								TOTAL / TOTAL			44.89	2.25	47.14
					000496825434 04/28/18	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	30.4	1.32	38.13		
								GST-HST / TPS-TVH				1.91	
								REF GST-HST / TPS-TVH REF				1.91	
								** REF NO TOT / TOT NO REF **					40.04
								TOTAL / TOTAL			38.13	1.91	40.04
					000496695455 04/26/18	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	30.2	1.34	38.51		
								GST-HST / TPS-TVH				1.93	
								REF GST-HST / TPS-TVH REF				1.93	
								** REF NO TOT / TOT NO REF **					40.44
								TOTAL / TOTAL			38.51	1.93	40.44
					000496482944 04/25/18	SHELL CANADA INC MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE	64.4	1.26	77.27		
								GST-HST / TPS-TVH				3.86	
								REF GST-HST / TPS-TVH REF				3.86	
								** REF NO TOT / TOT NO REF **					81.13
								TOTAL / TOTAL			77.27	3.86	81.13

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UNIT NO / NO. D'UNITE	DRIVER NAME / DRIVER I D. / 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.	SUPPL ER NAME / SUPPL ER LOCATION / NOM DU FOURNISSEUR / POINT DE VENTE	CHARGE DESCRIPTION / DESCR PTION 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]	BARNES		[redacted]		000496197331	SHELL CANADA INC	UNLEADED REGULAR GASOLINE	64.6	1.26	77.46		
					04/22/18	MEDICINE HAT AB	GST-HST / TPS-TVH				3.87	
							REF GST-HST / TPS-TVH REF				3.87	
							** REF NO TOT / TOT NO REF **					81.33
							TOTAL / TOTAL			77.46	3.87	81.33
				0107985	000498480609	PETRO CANADA	UNLEADED REGULAR GASOLINE	67.6	1.26	81.11		
					04/20/18	MEDICINE HAT AB	GST-HST / TPS-TVH				4.06	
							REF GST-HST / TPS-TVH REF				4.06	
							** REF NO TOT / TOT NO REF **					85.17
							TOTAL / TOTAL			81.11	4.06	85.17
					000497936997	IMPERIAL OIL	UNLEADED PREMIUM GASOLINE	41.6	1.44	57.14		
					04/19/18	LEDUC AB	GST-HST / TPS-TVH				2.86	
							REF GST-HST / TPS-TVH REF				2.86	
							** REF NO TOT / TOT NO REF **					60.00
							TOTAL / TOTAL			57.14	2.86	60.00
				0297000	000498480607	PETRO CANADA	UNLEADED PREMIUM GASOLINE	51.5	1.40	68.65		
					04/12/18	STRATHMORE AB	GST-HST / TPS-TVH				3.43	
							REF GST-HST / TPS-TVH REF				3.43	
							** REF NO TOT / TOT NO REF **					72.08
							TOTAL / TOTAL			68.65	3.43	72.08
			UNIT TOTAL / TOT UNITE				FUEL QTY / QTE CARB	591.0				
							TOT CHARGES / TOT FRAIS			777.39		
							TOT GST-HST / TOT TPS-TVH				38.83	
							UNIT TOTAL / TOT UNITE					816.22
							DISCOUNT / RABAIS					.93-
							TOTAL / TOTAL					815.29
	BKDN TOTALS / TOTAUX CODIFICATION 01-55		UNITS / VEHIC 1				FUEL QTY / QTE CARB	591.0				
							TOT CHARGES / TOT FRAIS			777.39		
							GST-HST/TPS-TVH				38.83	
							BKDN TOTALS / TOTAUX COD FICATION					816.22
							DISCOUNT / RABAIS					.93-
							TOTAL / TOTAL					815.29

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[redacted]	BARNES [redacted]		[redacted]	0113500	000502005739	SHELL CANADA INC	UNLEADED REGULAR GASOLINE	94.6	1.31	117.91		
					06/20/18	MEDICINE HAT AB	GST-HST / TPS-TVH				5.90	
							REF GST-HST / TPS-TVH REF				5.90	
							** REF NO TOT / TOT NO REF **					123.81
							TOTAL / TOTAL			117.91	5.90	123.81
					000501382252	FEDERATED COOPERATIVES LIMITED	UNLEADED REGULAR GASOLINE	68.2	1.32	85.71		
					06/09/18	MEDICINE HATT AB	GST-HST / TPS-TVH				4.29	
							REF GST-HST / TPS-TVH REF				4.29	
							** REF NO TOT / TOT NO REF **					90.00
							TOTAL / TOTAL			85.71	4.29	90.00
				0304500	000501581825	PETRO CANADA	UNLEADED PREMIUM GASOLINE	49.1	1.53	71.50		
					06/04/18	MEDICINE HAT AB	GST-HST / TPS-TVH				3.57	
							REF GST-HST / TPS-TVH REF				3.57	
							** REF NO TOT / TOT NO REF **					75.07
							TOTAL / TOTAL			71.50	3.57	75.07
					000500540883	FEDERATED COOPERATIVES LIMITED	MISCELLANEOUS	2.0	.10	.20		
					06/03/18	DUNMOREONEENT AB	GST-HST / TPS-TVH				.02	
							OIL	2.0	5.99	11.98		
							GST-HST / TPS-TVH				.59	
							REF GST-HST / TPS-TVH REF				.61	
							** REF NO TOT / TOT NO REF **					12.79
							TOTAL / TOTAL			12.18	.61	12.79
					000500542028	FEDERATED COOPERATIVES LIMITED	UNLEADED REGULAR GASOLINE	67.7	1.33	85.71		
					06/03/18	DUNMOREVERLEF AB	GST-HST / TPS-TVH				4.29	
							REF GST-HST / TPS-TVH REF				4.29	
							** REF NO TOT / TOT NO REF **					90.00
							TOTAL / TOTAL			85.71	4.29	90.00
					000501362389	HUSKY OIL	ETHANOL BLEND	55.4	1.41	74.66		
					05/30/18	CAMROSE AB	GST-HST / TPS-TVH				3.66	
							REF GST-HST / TPS-TVH REF				3.66	
							** REF NO TOT / TOT NO REF **					78.32
							SUBTOTAL / SOUS TOT			74.66	3.66	78.32
							DISCOUNT / RABAIS			.55-		.55-
							TOTAL / TOTAL			74.11		77.77
				0303500	000499434121	SHELL CANADA INC	UNLEADED PREMIUM GASOLINE	60.5	1.55	89.29		
					05/24/18	MEDICINE HAT AB	GST-HST / TPS-TVH				4.47	
							REF GST-HST / TPS-TVH REF				4.47	
							** REF NO TOT / TOT NO REF **					93.76
							TOTAL / TOTAL			89.29	4.47	93.76
				0111000	000499213602	SHELL CANADA INC	UNLEADED REGULAR GASOLINE	80.1	1.35	102.86		
					05/22/18	MEDICINE HAT AB	GST-HST / TPS-TVH				5.14	
							REF GST-HST / TPS-TVH REF				5.14	
							** REF NO TOT / TOT NO REF **					108.00
							TOTAL / TOTAL			102.86	5.14	108.00

BLE871

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

Element Fleet Management

element

BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETA LS 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]
NVOICE DATE
DATE DE LA FACTURE 07/01/18
NVOICE NO.
NO DE LA FACTURE 0007137902

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]	BARNES		[redacted]		000501221013	IMPERIAL OIL	UNLEADED PREMIUM GASOLINE	51.6	1.42	69.81		
					05/16/18	SHERWOOD PARK AB	GST-HST / TPS-TVH				3.49	
							REF GST-HST / TPS-TVH REF				3.49	
							** REF NO TOT / TOT NO REF **					73.30
							TOTAL / TOTAL			69.81	3.49	73.30
				0303000	000501581824	PETRO CANADA	UNLEADED PREMIUM GASOLINE	37.3	1.47	52.25		
					05/13/18	MEDICINE HAT AB	GST-HST / TPS-TVH				2.61	
							REF GST-HST / TPS-TVH REF				2.61	
							** REF NO TOT / TOT NO REF **					54.86
							TOTAL / TOTAL			52.25	2.61	54.86
			UNIT TOTAL / TOT UNITE				FUEL QTY / QTE CARB	564.5				
							TOT CHARGES / TOT FRAIS			761.88		
							TOT GST-HST / TOT TPS-TVH				38.03	
							UNIT TOTAL / TOT UNITE					799.91
							DISCOUNT / RABAIS					.55-
							TOTAL / TOTAL					799.36
	BKDN TOTALS / TOTAUX CODIFICATION 01-55		UNITS / VEHIC 1				FUEL QTY / QTE CARB	564.5				
							TOT CHARGES / TOT FRAIS			761.88		
							GST-HST/TPS-TVH				38.03	
							BKDN TOTALS / TOTAUX COD FICATION					799.91
							DISCOUNT / RABAIS					.55-
							TOTAL / TOTAL					799.36

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

The American Express® Corporate Card Statement of Account

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

Prepared For
D BARNES MLA
LEGIS ASSEMBLY OF AB

Membership Number [redacted]

Date
May 17, 2018

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

Statement includes payments and charges received by May 17, 2018

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.

1051

Credit Limit Summary
On May 17, 2018

Total Credit Limit $ [redacted] **Available Credit Limit $**

New Transactions for D BARNES MLA [redacted]

		Amount $
April 17	**CO OP TAXI LINE LTD EDMONTON** TAXICABS AND LIMOUSINES	**22.66**
Total New Transactions for D BARNES MLA	Taxi $21.59	**22.66**

[redacted]

† Please detach here †

AMERICAN EXPRESS®

Payment Options
PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. See the About Your Payment Section.
- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash

Membership Number [redacted]

	Amount Due $	Amount Paid $
	22.66	

000267

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]

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: April **Year:** 2018 **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	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
3	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
4	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
5	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
6			☐	☐	☐			
7			☐	☐	☐			
8	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
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	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
12	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
13			☐	☐	☐			
14			☐	☐	☐			
15	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
16	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
17	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
18	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
19	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
30	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
31			☐	☐	☐			
					Grand Total	$553.90	$27.70	$581.60

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:** 2018 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
2	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
3			☐	☐	☐			
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	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
11	Travel to/from Capital	Calgary	☒	☐	☐	8.76	0.44	9.20
12			☐	☐	☐			
13	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
14	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
15	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
16	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
28	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
29	60 km from Perm. Res.	Edmonton	☒	☒	☒	39.57	1.98	41.55
30	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
31			☐	☐	☐			
					Grand Total	$542.90	$27.15	$570.05

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

Member Signature **Date** May 31, 2018

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Members' Temporary Accommodation Allowance Claim Form

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

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

Employee #: [redacted] **Date:** April 23, 2018

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually
Maximum of $23,160 per fiscal year.

Fiscal Year: 2018-2019

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach. ☑ Yes ☐ No

Monthly Amount (maximum $1,930 or less) $ 1,855.00 x 12 = $ 22,260.00

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

Claim Payment Authorization (please check)

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

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

APRIL 2018

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

Member Signature

55

Members' Temporary Accommodation Allowance Claim Form

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

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

Employee #: [redacted] **Date:** April 23, 2018

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually
Maximum of $23,160 per fiscal year.

Fiscal Year: 2018-2019

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach. ☑ Yes ☐ No

Monthly Amount (maximum $1,930 or less) $ 1,855.00 **x 12 =** $ 22,260.00

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

Claim Payment Authorization (please check)

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

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

MAY 2018

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

Member Signature

Members' Temporary Accommodation Allowance Claim Form

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

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

Employee #: [redacted] **Date:** April 23, 2018

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually
Maximum of $23,160 per fiscal year.

Fiscal Year: 2018-2019

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach. ☑ Yes ☐ No

Monthly Amount (maximum $1,930 or less) $ 1,855.00 **x 12 =** $ 22,260.00

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

Claim Payment Authorization (please check)

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

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

JUNE 2018

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

Member Signature

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:

Hosting BBQ for constituents - June 15 - TLC Farms caterer

$2070.00

RECEIVED

MAY 28 2018

FMAS-

228329

TLC Farms
Box 1159, Bow Island, AB
T0K0G0
403-832-2541

DATE June 15, 2018

N° DE TAXE
TAX REG. NO.

N° DE COMMANDE
ORDER NO.

VENDU À
SOLD TO Cypress - Medicine Hat Constituency

ADRESSE
ADDRESS

EXPÉDIER À
SHIP TO

ADRESSE
ADDRESS

DATE D'EXPÉDITION SHIPPING DATE	VIA	CONDITIONS TERMS	ACHETEUR BUYER	VENDU PAR SOLD BY

	QUANTITÉ QUANTITY	DESCRIPTION	PRIX PRICE	MONTANT AMOUNT	
1	300	guests	~~600~~	2070	00
2					
3					
4		hamburger on a			
5		bun			
6		with all the			
7		trimmings			
8					
9					
10					
11					
12		Thank you			
13					
14			TPS/GST TVH/HST		
15			TVP/PST		
16			TOTAL	2070	00

SIGNATURE Lynn Oh

FORMULAIRE DE VENTE
SALES ORDER

STAPLES 52B

[redacted]