

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2019-20 29th and 30th Leg
057 - Cypress-Medicine Hat - MLA Drew Barnes
For Expenses Processed Jul 1 - Sep 30, 2019

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$2,762.00	\$3,288.95
MLA Parking Cap - \$	\$900.00	\$23.48	\$23.48
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$279.67	\$279.67
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$881.49	\$1,380.62
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,565.00	\$10,240.00
Travel Accommodations Allowance		\$213.17	\$213.17
Travel Accommodations Allowance (days; 10 max) - NF	10.0	1.0	1.0
Other			
Hosting - \$		\$238.42	\$402.87
Event Tickets Disclosable - \$			
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.0	5,990.0	6,577.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	80,000.0	5,990.0	6,577.0
Special Trips (5 trips per year) - NF	5.0	1.0	1.0
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		3.0	3.0
Use of a Private Automobile (52 trips per year) - NF	52.0	5.0	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



Legislative Assembly of Alberta

ME01944 - Members' Other Expenses Claim Form

Receipt Description	oil change
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Fuel and Minor Maintenance

Edmonton BMW MINI

7450 ROPER RD NW
EDMONTON, AB T6B3L9
(780) 480-5269

SALE

REF#: 00000015
SEQ: 0000000015
175411

Batch #: 050
06/05/19
Invoice #: 167137
APPR CODE
VISA

AMOUNT

00 - APPROVED - 001

TABANK VISA
4000000000000000
00 00 00 00
00 00

Thank You
Please Come Again

CUSTOMER COPY 3464)
J-5269

by acknowledged in the sum of \$_____ being all of the balance owing
I accessories described in this work order. Payment is due in full upon receipt of statement.

Invoice Date 06/05/19	Invoice No. BMCS167137
Colour:	Stock No.
Delivery Date	Delivery Km.
Selling Retailer No.	Production Date
R. O. Date 06/05/19	In Service Date

MO: 336750

Parts & Service Department Hours

Monday – Friday
7:30 AM – 6:00 PM
Saturday
9:00 AM – 3:00 PM

All customer pay repairs performed using BMW original parts are warranted against defects in material and workmanship for a period of 24 months.

Thank You
For Choosing
Edmonton BMW MINI

J# 4 09BMZB-00248 ENGINE OIL SERVICE TECH(S):774 99.11
COMPLAINT: COMPLETE OIL SERVICE AS PER CBS KEY READ, PLEASE RESET
CBS LIGHT AFTER SERVICE - \$219.95 PLUS TAXES
CORRECTION: performed and completed oil lube and filter service
reset cbs and topped up fluids

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT	PRICE
JOB # 4	1	11-42-7-953-129	SET OIL-FILTER ELEM		29.84
JOB # 4	1	PK7	7L SYN	****	91.00
JOB # 4	7	83-21-2-449-994	FULL SYNTHETIC OIL		120.84
JOB # 4 TOTAL PARTS					219.95

JOB # 4 TOTAL LABOR & PARTS 219.95

\$219.95 + GST *Oil change*

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

Element Fleet Management



BDFD290001

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	08/01/19
DATE DE LA FACTURE	
INVOICE NO.	0007654751
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 DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	BARNES			0069085	000537051162 07/09/19	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	30.5 1.18	34.29	1.71 1.71 36.00 36.00	
				0137500	000537579554 07/08/19	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	64.9 1.20	74.03	3.70 3.70 77.73 77.73	
				0025643	000536649796 07/03/19	SHELL CANADA INC HANNA	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	68.6 1.12	73.09	3.66 3.66 76.75 76.75	
				0161002	000537579556 07/02/19	PETRO CANADA RED DEER	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	71.2 1.14	77.19	3.86 3.86 81.05 81.05	
				0169800	000537579553 07/01/19	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	37.6 1.18	42.18	2.11 2.11 44.29 44.29	
				0156800	000537579549 06/27/19	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	80.3 1.18	90.12	4.51 4.51 94.63 94.63	
				0160852	000537579550 06/27/19	PETRO CANADA EDMONTON	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	76.7 1.94	68.61	3.43 3.43 72.04 72.04	
				0159500	000537579548 06/23/19	PETRO CANADA RED DEER	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH OIL GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.7 1.14 1.0 7.79	57.14 7.79	2.86 3.9 3.25 3.25 68.18 68.18	
				0760285	000537579552	PETRO CANADA		UNLEADED REGULAR GASOLINE	81.2 1.18	91.15		

BLE871

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

Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS 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
NVOICE DATE 08/01/19
DATE DE LA FACTURE
NVOICE NO. 0007654751
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 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
	BARNES				06/22/19	MEDICINE HAT AB	GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL				4.56 4.56 95.71 95.71	
				0159200	000537579551	PETRO CANADA 06/20/19 MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	86.2	1.18	96.66	4.83 4.83 101.49 101.49	
				0157900	000537579555	PETRO CANADA 06/19/19 EDMONTON AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	77.4	.91	67.37	3.37 3.37 70.74 70.74	
				0157235	000537579547	PETRO CANADA 06/18/19 MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	50.9	1.18	57.14	2.86 1.18 4.04 84.76 84.76	
						UNIT TOTAL / TOT UNITE	FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	778.2		860.34	43.03	903.37
	BKDN TOTALS / TOTAUX CODIFICATION 01-55				UNITS / VEHIC 1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	778.2		860.34	43.03	
							BKDN TOTALS / TOTAUX CODIFICATION					903.37

BLE871

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

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
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CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
INVOICE DATE 07/01/19
DATE DE LA FACTURE
INVOICE NO. 0007607257
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
[REDACTED]	BARNES [REDACTED]		[REDACTED]	0157100	000534701071 06/13/19	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	82.8	1.18	92.88	4.64 4.64 97.52 97.52	
				0156055	000534701070 06/12/19	PETRO CANADA EDMONTON AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	78.3	.95	70.76	3.54 3.54 74.30 74.30	
				000535313804	06/09/19	FEDERATED COOPERATIVES LIMITED BROOKS AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	75.0 1.0	1.20 9.99	85.71 9.99	4.29 .50 4.79 100.49 100.49	
				000535314659	06/07/19	FEDERATED COOPERATIVES LIMITED MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	45.4 1.0	1.32 7.99	57.14 7.99	2.86 .40 3.26 68.39 68.39	
				0336500	000534701072 06/05/19	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	58.6	1.19	66.35	3.32 3.32 69.67 69.67	
				000534031356	06/01/19	FEDERATED COOPERATIVES LIMITED MEDICINE HAT AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	30.3 1.0	1.32 7.99	38.10 7.99	1.91 .40 2.31 48.40 48.40	
				0335000	000534701074 05/30/19	PETRO CANADA RED DEER AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.9	1.38	76.06	3.80 3.80 79.86 79.86	
				000533405217	05/26/19	FEDERATED COOPERATIVES LIMITED BROOKS AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS	56.3 1.0	1.42 7.99	76.19 7.99	3.81	

BLE871

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

Element Fleet Management



BDF290001

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	07/01/19
DATE DE LA FACTURE	
INVOICE NO.	0007607257
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
	BARNES						GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL			.40 4.21 88.39 84.18 4.21 88.39		
					0335000 000534701073 05/23/19	PETRO CANADA RED DEER	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	53.5 1.44	73.38 3.67 3.67 77.05 73.38 3.67 77.05		
					UNIT TOTAL / TOT UNITE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	538.1	670.53 33.54 704.07		
	BKDN TOTALS / TOTAUX CODIFICATION 01-55				UNITS / VEHIC 1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	538.1	670.53 33.54		
								BKDN TOTALS / TOTAUX CODIFICATION				704.07

Element Fleet Management



BDF290001

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	09/01/19
DATE DE LA FACTURE	
INVOICE NO.	0007704388
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
BARNES					0177500 000541201682 08/21/19	SHELL CANADA INC COALDALE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	37.4	1.07	38.09	1.91 1.91 40.00 40.00	
					0178500 000541202845 08/21/19	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	30.9	1.10	32.29	1.61 1.61 33.90 33.90	
					0169850 000540236780 08/13/19	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	75.0	1.15	82.05	4.10 4.10 86.15 86.15	
					0168325 000540541388 08/09/19	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	60.8	1.18	68.18	3.41 3.41 71.59 71.59	
					0168485 000540541387 08/04/19	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	44.3	1.18	49.70	2.49 2.49 52.19 52.19	
					0167852 000540541386 08/02/19	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	54.8	1.18	61.47	3.07 3.07 64.54 64.54	
					0167500 000539160072 07/31/19	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	67.3	1.18	75.58	3.78 3.78 79.36 79.36	
					0165585 000540541385 07/29/19	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	83.8	1.18	94.06	4.70 4.70 98.76 98.76	
					0165858 000538556260 07/24/19	SHELL CANADA INC BROOKS AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF	81.6	1.20	93.13	4.66 4.66	

BLE871

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

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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.
NO DU CLIENT
INVOICE DATE 09/01/19
DATE DE LA FACTURE
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BARNES							** REF NO TOT / TOT NO REF ** TOTAL / TOTAL			93.13	4.66	97.79 97.79
					0138565 000538363972 SHELL CANADA INC 07/22/19 MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	91.5 1.18	102.69		5.14 5.14	107.83 107.83
					000538082328 FEDERATED COOPERATIVES LIMITED 07/12/19 MEDICINE HAT	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH OIL GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	76.3 1.18 3.0 2.71 1.0 5.99	85.71 8.13 5.99	4.29 .41 5.00		104.83 104.83
					0164800 000540423703 IMPERIAL OIL 07/08/19 BASSANO	AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	78.2 1.17	87.15		4.36 4.36	91.51 91.51
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	781.9		884.22	44.23	928.45
BKDN TOTALS / TOTAUX CODIFICATION 01-55							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	781.9		884.22	44.23	
							BKDN TOTALS / TOTAUX CODIFICATION					928.45

BLE871

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



Legislative Assembly of Alberta

ME02270 - Members' Other Expenses Claim Form

Receipt Description	TNT Detailing
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Fuel and Minor Maintenance



TNT Detailing
Our Details are Dynamite

Bay 4 – 749 14th Street S.W.
Medicine Hat, AB T1A 4V8
403-458-2594

DETAIL SERVICES – WORK ORDER

Client Information

Customer Name: Drew Barnes	Cell Phone: [REDACTED]
City: Medicine Hat	Province: AB
Postal Code:	Email:
Customer Notes:	

Vehicle Information

Year: -	Make: [REDACTED]	Model: [REDACTED]
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Appointment Information

Booked 1: Basic Clean with Shampoo
Booked 2:
Booked 3:
Booked 4:
Price For Services: 114.90 \$114.90 + GST

Additional Services

Service Added & Agreed Upon Price	Authori

Agreement:

I authorize immediate commencement of the work listed above to commence immediately. I agree that any agreements, along with the expected price of the service performed, are listed on this work order. All services must be paid for before vehicle is picked up. By signing below, you also agree that your vehicle is insured and can legally be driven and worked on.

TNT Automotive Detailing

749 14 ST SW #4
MEDICINE HAT, AB T1A 4V8
4034582594
<https://www.tntdetailing.ca>

TNT Automotive Detailing
Cashier: Nancy Walker
Transaction 000119

Total CA\$120.64
Tip CA\$12.06

CREDIT CARD SALE CA\$132.70
VISA 4031

02-Aug-2019 1:38:08PM
CA\$132.70 | Method: EMV
SCOTIABANK VISA
XXXXXXXXXXXX [REDACTED]
DREW.MR BARNES
Ref #: 921400500511
Auth # [REDACTED]
MID: [REDACTED]
AID: A000000031010
AthNtwkNm: VISA
PIN VERIFIED

Thank You For Your Business

Online: <https://clover.com/p/EQ5BXZNXXAR26>

Date: Aug 2/2019

Signature

\$126.96 + GST

Privacy Statement & Further Disclaimer

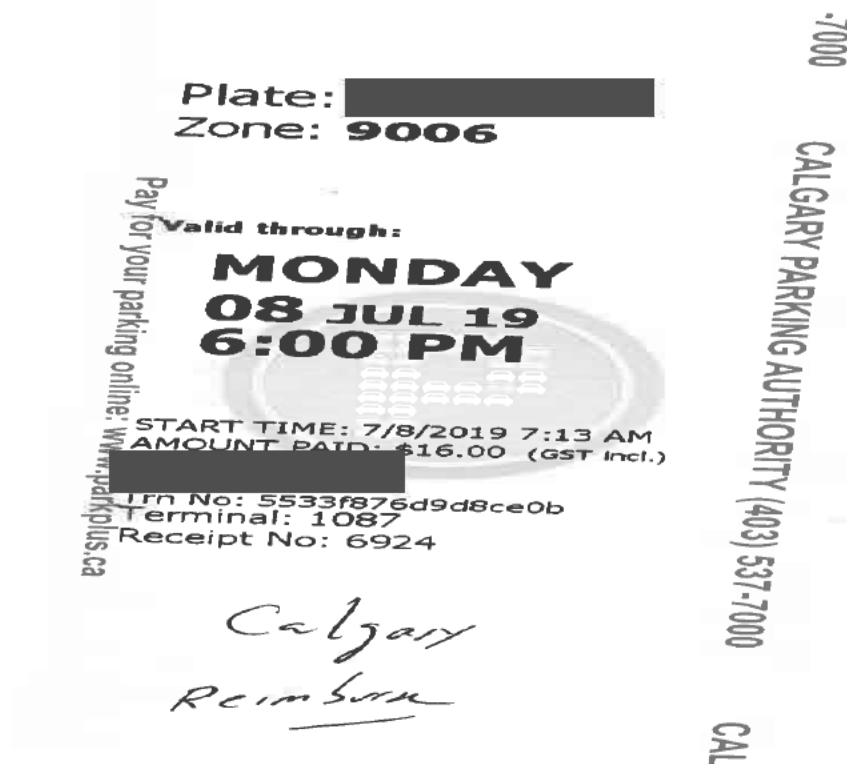
TNT Detailing we value your privacy. We agree to not share your information with anyone. We may, from time-to-time use the information provided to contact you for promotions or for completion of this work order, but your information is safe with us. By signing above, you agree that TNT Detailing is not responsible for damage that occurs while your vehicle is parked or driven on the roads as part of any service.

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



Legislative Assembly of Alberta
ME01944 - Members' Other Expenses Claim Form

Receipt Description	Calgary Parking Authority
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Member Parking



\$15.23 + GST

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



Legislative Assembly of Alberta

ME02110 - Members' Other Expenses Claim Form

Receipt Description	Precise Parking
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Member Parking



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



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
XXXX-XXXX-XXXX-XXXX

Date
July 16, 2019



Page 1 of 2

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

Statement includes payments and charges received by July 16, 2019

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

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

Credit Limit Summary
On July 16, 2019

Total Credit Limit \$

Available Credit Limit \$

New Transactions for D BARNES MLA

Amount \$

July 5 AIRPORT TAXI SERVICE EDMONTON
TAXICABS AND LIMOUSINES

61.00

Total New Transactions for D BARNES MLA

/SEL/

† Please detach here †

\$58.10 + GST

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



0002 50
D BARNES MLA
LEGIS ASSEMBLY OF AB
901 9718 107 STREET
EDMONTON AB
T5K 1E4

Membership Number

	Amount Due \$	Amount Paid \$

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





Legislative Assembly of Alberta

ME01944 - Members' Other Expenses Claim Form

Receipt Description	Taxi Delux Central
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Taxi, Bus Travel

DELUXE CENTRAL TAXI
656 1/2 3 ST SE
MEDICINE HAT, AB
T1A 0H5
(403)-928-1616

SALE

TID: 9923442A
Batch #: 0564
07/05/19
APPR CODE: [REDACTED]
VISA
***** [REDACTED] *****

REF#: 000008
06:00:51

AMOUNT \$23.50
TIP \$3.53
TOTAL CAD\$27.03

APPROVED - 000

SCOTIABANK VISA
AID: A0000000031010
RESP CD: 00
TVR: 00 80 00 80 00
TSE F8 00

\$25.91 + GST

THANK YOU!
CUSTOMER COPY

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



Legislative Assembly of Alberta

ME01944 - Members' Other Expenses Claim Form

Receipt Description	taxi services
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Taxi, Bus Travel

DELUXE CENTRAL TAXI #
2302 HIGDON AVE SE T1B1C3
MEDICINE HAT AB
23028944
GR2302894401

PURCHASE

07-05-2019 18:48:20
Acct # ***** RF
Exp Date **/** Card Type VI
Name: /
A0000000031010 SCOTIABANK VISA

Trace # 030431
Auth # RRN 001012133

TOTAL \$18.70

++++
00 APPROVED-THANK YOU
++++

Retain this copy for your
records
Customer copy

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



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
XXXX-XXXX-XXXX-XXXX

Date
August 16, 2019

Page 1 of 2

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

Statement includes payments and charges received by August 16, 2019

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

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

Credit Limit Summary On August 16, 2019

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

August 6 Payment Received Thank You

Amount \$

New Transactions for D BARNES MLA

July 17 CO OP TAXI LINE LTD EDMONTON
TAXICABS AND LIMOUSINES

64.00

Total New Transactions for D BARNES MLA

\$60.96 + GST

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Payment Options

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

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

Do Not Enclose Cash

000255



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

Membership Number

Amount Due \$

Amount Paid \$

↑ Please detach here ↑

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



0677



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
XXXX-XXXX

Date
September 16, 2019

Page 1 of 2

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

Statement includes payments and charges received by September 16, 2019

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

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

Credit Limit Summary On September 16, 2019

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

September 3 Payment Received Thank You

New Transactions for D BARNES MLA

Card XXXX-XXXX

Amount \$

August 27	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	61.00
August 27	CO OP TAXI LINE LTD EDMONTON TAXICABS AND LIMOUSINES	60.80
Total New Transactions for D BARNES MLA		

\$116.00 + GST

/SEL/

† 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

000254



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

Membership Number

	Amount Due \$	Amount Paid \$

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



0654



Legislative Assembly of Alberta

MP01335 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP01335
Description	June 2019 - Per-Diems
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	June 28, 2019
Date Received	July 2, 2019
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
2480	Jun 2, 2019	Travel to/from Capital	Edmonton		X	X	30.81	1.54	32.35
2481	Jun 3, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2482	Jun 4, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2483	Jun 5, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2484	Jun 6, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2485	Jun 9, 2019	Travel to/from Capital	Edmonton			X	19.76	0.99	20.75
2486	Jun 10, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2487	Jun 11, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2488	Jun 12, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2489	Jun 18, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2490	Jun 19, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2491	Jun 23, 2019	Travel to/from Capital	Edmonton		X	X	30.81	1.54	32.35
2492	Jun 24, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2493	Jun 25, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2494	Jun 26, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
2495	Jun 27, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
							595.79	29.81	625.60

This Claim Form has been certified by the Member to have met the requirements of section 7 of the Members' Allowances Order, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.



Legislative Assembly of Alberta

MP01942 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP01942
Description	July 2019 - Per-Diems
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	July 31, 2019
Date Received	July 31, 2019
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
3254	Jul 2, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
3255	Jul 3, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
3256	Jul 4, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
3257	Jul 5, 2019	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
3258	Jul 8, 2019	60 km from Perm. Res.	Calgary, Stampede	X	X	X	39.57	1.98	41.55
3259	Jul 11, 2019	60 km from Perm. Res.	calgary, stampede,open house	X	X	X	39.57	1.98	41.55
3260	Jul 23, 2019	60 km from Perm. Res.	Calgary, Caucus			X	19.76	0.99	20.75
3261	Jul 24, 2019	60 km from Perm. Res.	Calgary, Caucus	X		X	28.52	1.43	29.95
							285.70	14.30	300.00

This Claim Form has been certified by the Member to have met the requirements of section 7 of the Members' Allowances Order, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.



Legislative Assembly of Alberta

MR02729 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR02729
Description	Sept 2019 Temp Accomodations
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	August 30, 2019
Date Received	September 3, 2019
Mailing Address	

Month	Year	Monthly Claim Amount
September	2019	1855.00
	Grand Total	1855.00

Office Use Only

I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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



Legislative Assembly of Alberta

MR00872 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR00872
Description	July 2019 Temp Accomodation
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	June 28, 2019
Date Received	July 2, 2019
Mailing Address	

Month	Year	Monthly Claim Amount
July	2019	1855.00
	Grand Total	1855.00

Office Use Only	
-----------------	--

I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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



Legislative Assembly of Alberta

MR01660 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR01660
Description	August Temp Accomodations
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	July 31, 2019
Date Received	July 31, 2019
Mailing Address	

Month	Year	Monthly Claim Amount
August	2019	1855.00
	Grand Total	1855.00

Office Use Only	
-----------------	--

I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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



Legislative Assembly of Alberta

MR02039 - Members' Temporary Accommodation Allowance Claim Form

Receipt Description	
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Member Travel

The Westin Calgary
320 Fourth Ave SW
Calgary, AB T2P 2S6
Canada
Tel: 403-266-1611 Fax: 403-233-7471



Drew Barnes
GO2573 - Government of Alberta Caucus R

Page Number : 1 Invoice Nbr : 417030
Guest Number :
Folio ID : A
Arrive Date : 23-JUL-19 21:11
Depart Date : 24-JUL-19 13:22
No. Of Guest : 1
Room Number : 727
Marriott Bonvoy Number :

Tax Invoice

Tax ID : 815462536RT0001
The Westin Cal YYCWI JUL-24-2019 13:30 SSURI697

Date	Reference	Description	Charges (CAD)	Credits (CAD)
23-JUL-19	RT727	Room Chrg - Grp - Government	199 00	
23-JUL-19	RT727	Destination Marketing Fee	5 97	
23-JUL-19	RT727	Tourism Levy	8 20	
24-JUL-19	VI	Visa		-213.17

Approve EMV Receipt for VI : PIN Verified
TC:E400ACDE0BA5FAD4 TVR 0080008000
Application Label:SCOTIABANK VISA

** Total 213.17 -213.17

Continued on the next page

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



Legislative Assembly of Alberta

ME01337 - Members' Other Expenses Claim Form

Receipt Description	Lunch - Minister Luan
Member Name	Drew Barnes
Claimant	Drew Barnes
Expense Category	Hosting - Group (Safe Injection Site Inquiry) Hosting Purpose - Lunch during Minister Luan's Visit

Heartwood Cafe

Order: Table 12
Cashier: Jenni
POS: Galaxy 2

Dine in

Italian soda	15.00
3 x 4.50	
1 Feature Syrup (1.50)	
Tea (large mug)	3.50
1 x 3.50	
Coffee (large)	3.50
1 x 3.50	
Salad (Side)	12.50
1 x 7.00	
1 Ham (4.50)	
1 Beet (1.00)	
Bowl of Soup (feature)	10.00
1 x 10.00	
Classic Burger	15.00
1 x 14.00	
1 Fries	
1 Cheese (1.00)	
Loaded Burger	18.00
1 x 18.00	
1 garden salad	
Chicken Guacamole	32.00
2 x 16.00	
1 Cup feature soup	
Salad (Side)	16.00
2 x 7.00	
1 Wedge (2.00)	
Tea (8")	15.00
1 x 15.00	
1 BBQ Chicken (15.00)	
Subtotal	140.50
GST, 5%	7.03
Total	147.53

ass minister tour
addiction injection site
mental health

plus tip 22.12

THE HEARTWOOD CAFE
4000 Highway 11A 223
MEDICINE HAT AB T1A 2Z3
507-2892896
THU 06/12/2019 1:27 PM

Sub Total: \$147.53
Tip: \$22.12
Total: \$169.65

PURCHASE
OFFLINE APPROVED

TX ID: #5247747
CARD TYPE: STANBANK VISA
ENTRY MODE: CHIP
PIN VERIFIED
AUTH: 0000031513
TAD: 05020A03640002
ATC: 0193

Type: 001011
Number: [REDACTED]
Card: [REDACTED]
TVR: 0080008000
TSI: PSEP
IC: 0080008000

THANK YOU

\$162.62 + GST

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



Receipt Description	coffee office
Member Name	Drew Barnes
Claimant	Teri-Anne Bowyer
Expense Category	Hosting - Individual Constituent(s)

Starbucks Coffee Canada #4677
1296 Trans Canada Hwy SE
Medicine Hat, AB T1B1J5

CHK 733950
07/09/2019 12:25 PM
2189744 Drawer: 1 Reg: 2

Pike Place 1Lb Wb 18.95
Pike Place 1Lb Wb 18.95
Visa
XXXXXXXXXX

\$37.90 + GST

Subtotal
GST 5%
Total

Change Due \$0.00

----- Check Closed -----
07/09/2019 12:25 PM

Coffee - Teri's Card

Merchandise, Packaged Coffee and
Packaged Tea on this receipt may be
returned or exchanged within 60 days
of the transaction date printed
above. All returns or exchanges must
be accompanied with this original
receipt. Refund method depends on
form of payment. For questions call
1-800-STARBUC (1-800-782-7282)

GST: 86585 3535

Join our loyalty program
Starbucks Rewards®
Sign up for promotional emails
Visit Starbucks.ca/rewards
Or download our app
At participating stores
Some restrictions apply

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



Legislative Assembly of Alberta

SE02786 - Staff Other Expenses Claim Form

Receipt Description	Coffee for Office
Member Name	Drew Barnes
Claimant	Teri-Anne Bowyer
Expense Category	Other

Starbucks Coffee Canada #4677
1296 Trans Canada Hwy SE
Medicine Hat, AB T1B1J5

CHK 655481
08/23/2019 07:47 AM
92204677 Drawer: 1 Reg: 2

Pike Place 1Lb Wb (18.95)
Pike Place 1Lb Wb (18.95)

Mastercard \$37.90 + GST
XXXXXXXXXX

Subtotal
GST 5%
Total

Change Due \$0.00

----- Check Closed -----
08/23/2019 07:47 AM

Teri-Anne Bowyer

Merchandise, Packaged Coffee and
Packaged Tea on this receipt may be
returned or exchanged within 60 days
of the transaction date printed
above. All returns or exchanges must
be accompanied with this original
receipt. Refund method depends on
form of payment. For questions call
1-800-STARBUCKS (1-800-782-7282)

*Coffee for
Office*
GST: 86585 3535

Join our loyalty program
Starbucks Rewards®
Sign up for promotional emails
Visit Starbucks.ca/rewards
Or download our app
At participating stores
Some restrictions apply

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