

LEGISLATIVE ASSEMBLY OF ALBERTA
 Member EDR 2020-21 30th Leg
 057 - Cypress-Medicine Hat - MLA Drew Barnes
 For Expenses Processed Apr 1 - Jun 30, 2020

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$406.75	\$406.75
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,640.00	\$5,640.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$112.65	\$112.65
Event Tickets Disclosable - \$			
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.0	640.0	640.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	80,000.0	640.0	640.0
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	5.0	5.0
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

MP08070 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP08070
Description	March 2020 - Per-Diems
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	April 29, 2020
Date Received	April 29, 2020
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
10606	Mar 31, 2020	Travel to/from Capital	Edmonton		X	X	30.81	1.54	32.35
							30.81	1.54	32.35

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

MP08069 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP08069
Description	April 2020 - Per-Diems
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	April 29, 2020
Date Received	April 29, 2020
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
10600	Apr 1, 2020	Travel to/from Capital	Edmonton	X	X		19.81	0.99	20.80
10601	Apr 2, 2020	Travel to/from Capital	Edmonton	X			8.76	0.44	9.20
10602	Apr 7, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
10603	Apr 8, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
10604	Apr 27, 2020	Travel to/from Capital	Edmonton		X	X	30.81	1.54	32.35
10605	Apr 28, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
							178.09	8.91	187.00

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

MP08420 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP08420
Description	May 2020 - Per-Diems
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	May 29, 2020
Date Received	June 1, 2020
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
11357	May 6, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
11358	May 7, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
11359	May 26, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
11360	May 27, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
11361	May 28, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
							197.85	9.90	207.75

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

MR07434 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR07434
Description	April Temp Accommodation
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	April 2, 2020
Date Received	April 2, 2020
Mailing Address	

Month	Year	Monthly Claim Amount
April	2020	1880.00
	Grand Total	1880.00

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

MR08067 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR08067
Description	May Temporary Accommodation 2020
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	April 29, 2020
Date Received	April 29, 2020
Mailing Address	

Month	Year	Monthly Claim Amount
May	2020	1880.00
	Grand Total	1880.00

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

MR08414 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR08414
Description	June Temp Accommodation
Claimant	Drew Barnes
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Drew Barnes)
Date Submitted	June 1, 2020
Date Received	June 1, 2020
Mailing Address	

Month	Year	Monthly Claim Amount
June	2020	1880.00
	Grand Total	1880.00

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.



Feedback


 REORDER

Moxie's Grill & Bar (Dunmore Rd. SE)

Delivered • #156310773

1	Cashew Chicken Lettuce Wraps	\$19.00
1	The Burger	\$16.00
1	White Chocolate Brownie	\$11.00
	• Add Extra Ice Cream	
1	Beef Dip	\$19.00
	• Add Garlic Chive Dip	

Subtotal	\$65.00
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Delivery Fee	FREE
GST	\$3.25

Courier Tip	\$9.75
Total(CAD)	\$78.00

\$74.75 + GST

Paid with	Credit Card
Amount	\$78.00
Transaction Type	Purchase





Legislative Assembly of Alberta
VF03892 - Vendor Payment Submission Form

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



Safeway Division Avenue
 615 Division Avenue S., Medicine Hat AB
 Phone: 403.504.2920
 GST# 895588788RT0001

Served by: Carrie H

Welcome to Safeway

OTHER		
WB Verona	\$18.95	C
WB Verona	\$18.95	C
AIR MILES Base Offer	1 Miles	
<hr/>		
SUBTOTAL	\$37.90	
TOTAL TAX	\$0.00	
TOTAL	\$37.90	
MasterCard	TENDER \$37.90	
Cash	CHANGE \$0.00	
NUMBER OF ITEMS	2	

AIR MILES	
Member number:	
Total Miles Earned	1
Your AIR MILES Balances	
Cash Miles	
Dream Miles	

MERCHANT 22265793 C
 TERMINAL ID 582226579396
 ** Purchase ** \$ 37.90
 CARD MasterCard RCPT 3051000
 NO. ***** RESP 001
 DATE 04/17/2020 TIME 15:53:52
 AUTH # REF# 001975048
 APPL Mastercard
 AID A000000041010

00 APPROVED - THANK YOU

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

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