

LEGISLATIVE ASSEMBLY OF ALBERTA
Member Expense Disclosure Report
Cardston-Taber-Warner - Gary Bikman
For Expenses Processed July 1 - September 30, 2014

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$1,508.85	\$3,525.71
Member Parking - \$	\$900.00	\$69.00	\$178.09
Member Travel (overnight stay in constituency) - \$			
Member Travel (Extraordinary Accommodation) - \$		\$573.07	\$573.07
Taxi, Bus Travel - \$			\$433.23
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$			
Other			
Hosting - \$		\$223.86	\$275.67
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	30	70
Travel Accommodations Allowance (days; 10 max)	10	4	4
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000	10,041	16,416
Special Trips (5 trips per year) - NF	5		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		2	4
Use of a Private Automobile (52 trips per year) - NF	52		5
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		

\$ - Reported on CAD dollar amount of actual expense

NF - Reported based on number of trips, number of kilometres, or number of days

Budget reported is the maximum annual amount that may be claimed

GST is not included in the \$ amounts as the Legislative Assembly is GST/HST - exempt

PHH Arval

PHH

BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 231 OF 305
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-53-G. BIKMAN
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
INVOICE DATE 08/01/14
DATE DE LA FACTURE
INVOICE NO. 0006136377
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
	G BIKMAN				000396667804 06/24/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	32.9	1.23	40.49		40.49 40.49
					000396667803 06/20/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	54.5	1.23	67.00		67.00 67.00
					000396667793 06/12/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.8	1.23	65.00		65.00 65.00
					000396667791 06/09/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.5	1.23	72.00		72.00 72.00
					000396667788 06/04/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	42.4	1.25	53.00		53.00 53.00
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS UNIT TOTAL / TOT UNITE	241.3		297.49		297.49
	BKDN TOTALS / TOTAUX CODIFICATION 01-53				1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS	241.3		297.49		
							BKDN TOTALS / TOTAUX CODIFICATION					297.49

BLG871

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

PHH Arval

PHH

BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 212 OF 274
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION											
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY											
DIV-53-G. BIKMAN											
-											
-											
-											
-											

CLIENT NO.	
NO DU CLIENT	
INVOICE DATE	09/01/14
DATE DE LA FACTURE	
INVOICE NO.	0006147534
NO DE LA FACTURE	

UNIT NO	DRIVER NAME DRIVER ID.	V.I.N.	CARD NO.	KM AUTHORIZE	REFERENCE NO ACTIVITY DATE	SUPPLIER NAME SUPPLIER LOCATION	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY	UNIT COST	EXTENDED PRICE	GST-HST PST/QST	TOTAL DUE
NO. D'UNITE	NOM DU CONDUCTEUR	NO. DE SERIE	NO. DE CARTE	KM AUTORISE	NO. DE REFERENCE DATE DE LA TRANS.	NOM DU FOURNISSEUR POINT DE VENTE		QTE	COUT UNIT	TOTAL	TPS-TVH TVP/TVQ	MONTANT TOTAL DU
	G BIKMAN				000399350311 07/21/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	36.0	1.23	44.31 44.31		44.31
					000399350304 06/27/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	35.8	1.23	44.00 44.00		44.00
					000399350303 06/25/14	R.E.M. VENTURES INC. STIRLING AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	62.7	1.23	77.13 77.13		77.13
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS UNIT TOTAL / TOT UNITE	134.6		165.44 165.44		165.44
	BKDN TOTALS / TOTAUX CODIFICATION 01-53		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS	134.6		165.44		
							BKDN TOTALS / TOTAUX CODIFICATION					165.44

PHH Arval



BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 220 OF 285
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION									
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-53-G. BIKMAN - - - - - - - -									

CLIENT NO.
NO DU CLIENT
INVOICE DATE 10/01/14
DATE DE LA FACTURE
INVOICE NO. 0006156364
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		
G	BIKMAN				000400907453	R.E.M. VENTURES INC.	UNLEADED REGULAR GASOLINE	50.0	1.20	60.00				
					08/20/14	STIRLING	AB	** REF NO TOT / TOT NO REF **						
					TOTAL / TOTAL								60.00	60.00
					000400907459	R.E.M. VENTURES INC.	UNLEADED REGULAR GASOLINE	57.5	1.20	69.00				
					08/15/14	STIRLING	AB	** REF NO TOT / TOT NO REF **						
					TOTAL / TOTAL								69.00	69.00
					000400907463	R.E.M. VENTURES INC.	UNLEADED REGULAR GASOLINE	43.3	1.20	52.00				
07/30/14	STIRLING	AB	** REF NO TOT / TOT NO REF **											
TOTAL / TOTAL								52.00	52.00					
					000400907464	R.E.M. VENTURES INC.	UNLEADED REGULAR GASOLINE	48.5	1.23	59.60				
					07/22/14	STIRLING	AB	** REF NO TOT / TOT NO REF **						
TOTAL / TOTAL								59.60	59.60					
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB	199.4						
							TOT CHARGES / TOT FRAIS			240.60				
							UNIT TOTAL / TOT UNITE					240.60		
BKDN TOTALS / TOTAUX CODIFICATION							FUEL QTY / QTE CARB	199.4						
01-53							TOT CHARGES / TOT FRAIS			240.60				
BKDN TOTALS / TOTAUX CODIFICATION												240.60		

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Fuel + Car Wash.

Superbucks
MERCHANT # 40868545704
Superstore GasBar#1741
2818 Mayor Magrath Dr S
Lethbridge AB

Pump 8
PREMIUM \$79.70
59.967L x 1.329\$/L
DLX WASH W/F038344 \$9.49
1 x \$9.49
GST# 122235922 \$0.47
TOTAL \$89.66

Taxes included in fuel:

GST# 122235922 \$3.80

Approved

Pre Auth Completion

MasterCard

AID: A00000000041010

Host Date: 06/02/2014

Host Time: 10:25:26

U0174108C

S728001001006 00 000

TUR: 0000001000 TSI: E800

1741-8

Rct#61885 Rcpt

Batch# 889-44

TELL US HOW WE DID TODAY
MONTHLY CHANCES TO WIN \$5000
VISIT WWW.STOREOPINION.CA
OR CALL 1-877-234-2322
FULL CONTEST RULES AT
WWW.STOREOPINION.CA

STORE: 01741

CODE: 060214 102508 1885 01741

Sales Receipt ID:

4F0100F0100

1-800-999-7890

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman
Claimant Name: _____
Expense Category: _____

For hosting, select one:

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

Purpose:

Car wash

You're at home here.



South Country Co-op

6400 46th Ave
Taber, AB
T1G 2B1

GST# R105499651
*** Car Wash Slip *** 71266861

1 EXTREME WASH \$ 10.99
WASH CODE [REDACTED]

Valid to Sep/17/2014 This Location Only

*** If not used by valid to date,
exchange for a new code ***

ORIGINAL

6/19/14 4:59:10 PM Receipt# 71266861
Pos:71 Cashier:11

You're



South Country Co-op

6400 46th Ave
Taber, AB
T1G 2B1

GST# R105499651

Type: SALE

Qty Name Price Total

1 EXTREME WASH \$ 10.99 G
CODE [REDACTED]

ORIGINAL

TYPE: Purchase

ACCT: MASTERCARD

DATE/TIME: 06/19/2014 16:48:09
REFERENCE #: 0015071240 C
TERM: 66209589

AID: A0000000041010
TVR: 0000008000
TSI: E800

MasterCard

01 APPROVED - THANK YOU 027

IMPORTANT:
retain this copy for your records

CUSTOMER COPY

6/19/14 4:59:08 PM Receipt# 71266861
Pos:71 Cashier:11 Store:278808

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Birkman

Claimant Name: _____

Expense Category: Fuel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Fuel

292298 Costco #160
3200 Mayor Magrath Drive
Lethbridge, AB

TYPE: PURCHASE

ACCT: ^{my} American Express

PUMP:	8
GRADE:	Premium
L:	65.441
PRICE/L:	\$ 1.299
FUEL SALE:	\$ 85.01

CARD NUMBER:

DATE: 07/02/2014
TIME: 19:53
REFERENCE:
36626527 0010011750 S
AUTH#:
TRANSACTION#: 1741

GST INCLUDED = \$ 4.04
GST #121476329

00 APPROVED-THANK YOU 025

- IMPORTANT -
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FOR YOUR RECORDS

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: Fuel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Fuel

292298 Costco #160
3200 Mayor Magrath Drive
Lethbridge, AB

TYPE: PURCHASE

ACCT: American Express

PUMP: _____
GRADE: _____ 4
L: Premium
PRICE/L: 60.677
FUEL SALE: \$ 1.299
\$ 78.82

CARD NUMBER: _____

DATE: _____ 15:04

REFERENCE: 36626460 0010018130 S

AUTH#: _____
TRANSACTION#: 10480

GST INCLUDED = \$ 3.75
GST #121476329

00 APPROVED-THANK YOU 025

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LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Eary Bikman

Claimant Name: _____

Expense Category: Fuel

For hosting, select one:

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

Purpose:

Fuel

WELCOME
Shell Canada
2351 7 Avenue
TOL 020
Fort Macleod AB
403-553-2660
MASTERCARD
PURCHASE S
INV No. 2260893168
2014/07/12 09:42
V-Power
PUMP No. 04
LITRES 40.317
PRICE/L \$1.389
TOTAL FUEL \$56.00
01 APPROVED - THANK
YOU 001
TERMINAL No.
89226080
NO SIGNATURE
TRANSACTION
IMPORTANT
retain this copy for
your records
FUEL INCLUDES
GST - Fuel \$2.67
No. 137400032RT
TOTAL SALE \$56.00
STORE: C22608
TRAN: 465228
2014/07/12 09:43:57
YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
\$100 Shell Gift Card
*Receipt Required

THANK YOU

QUESTIONS?

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: Fuel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Fuel

TOWN PUMP BOX 298
RAYMOND, AB<403>752-3137
G. S. T. #855417598

07/16/14 WED 12:03:28 PM No. 131655
Pump No. 02 PREMIUM \$1.349/LIT

LIT 51.887 \$ 70.00

Cash Sale

THANK YOU

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: Car Wash

For hosting, select one:

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

Purpose:

Car Wash

You're at home here.

South Country Co-op

6400 46th Ave
Taber, AB
T1G 2B1

GST# R105499651

Type: SALE

Qty	Name	Price	Total
1	EXTREME WASH		\$ 10.99 G
	CODE		

You're at home here.

South Country Co-op

6400 46th Ave
Taber, AB
T1G 2B1

GST# R105499651

*** Car Wash Slip *** 72232415

1 EXTREME WASH \$ 10.99

WASH CODE

Valid to Oct/16/2014 This Location Only

*** if not used by valid to date,
exchange for a new code ***

ORIGINAL

7/18/14 5:15:35 PM Receipt# 72232415
***** PROMO*COMBO SAVINGS: 0.53***

ORIGINAL

7/18/14 5:15:33 PM Receipt# 72232415
***** PROMO*COMBO SAVINGS: 0.53*****
Pos:72 Cashier:24 Store:278808

We do Propane

F

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: Car Wash

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Car Wash

You're at home here.



South Country Co-op

6400 46th Ave
Taber, AB
T1G 2B1

GST# R105499651

*** Car Wash Slip *** 71279623

1 EXTREME WASH \$ 10.99
WASH CODE [REDACTED]

Valid to Oct/17/2014 This Location Only

*** If not used by valid to date,
exchange for a new code ***

ORIGINAL

7/19/14 8:11:28 AM Receipt# 71279623
Pos:71 Cashier:27 Store:278808

You're at home here.



South Country Co-op

6400 46th Ave
Taber, AB
T1G 2B1

GST# R105499651

Type: SALE

Qty	Name	Price	Total
1	EXTREME WASH CODE [REDACTED]		\$ 10.99 G
Subtotal			\$ 10.99
GST			\$ 0.55
Total			\$ 11.54
Cash			\$ 20.00
Change Cash			-\$ 8.45
Rounding			-\$ 0.01

ORIGINAL

7/19/14 8:11:26 AM Receipt# 71279623
Pos:71 Cashier:27 Store:278808

We do Propane

F

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Birkman

Claimant Name: _____

Expense Category: Oil Change

For hosting, select one:

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

Purpose:

Oil Change

SUBARU OF LETHBRIDGE
3316 1st AVE S
LETHBRIDGE, AB

Term ID: 28217614

Purchase

MASTERCARD

Entry Method: C

Invoice #: 380250

Total: \$ 106.62

2014/07/22

15:01:26

Seq #: 0011329020

Resp Code: 01/027

MasterCard

0000000000000000

C4 A0 A0 62 99 C5 A4 A5

00 00 00 00 00 00

E8 00

30 1E 71 15 ED E4 40 FD

APPROVED
Thank You

Customer Copy

- IMPORTANT -
retain this copy for your records



SUBARU

OF

LETHBRIDGE

3316 1st AVE South | Lethbridge, AB - T1J 4H3
Phone: (403) 380-6860 Fax: (403) 388-1022

www.subaruoflethbridge.com



INVOICE ORIGINAL
Work Order
#380250
July 22, 2014
Svc. Adv Passey, Carrie

Tag#

Page 1 of 1
07/22/2014 14:59:20

To Gary Bikman

Case: 1 Synthetic Oil Change (Lube,Oil,Filter (Synthetic)) - Tech Cause: Cause not defined. - Tech Comments: performed oil change, 6.7L of synthetic 5w30, topped up fluids, tires @32psi. No leaks found.

Quantity	Description/Correction	Retail	Price	Total
1.00	15208AA15A - OIL FILTER	\$7.30	\$7.30	\$7.30
6.70	5W30S - 5W30 Synthetic	\$7.97	\$7.97	\$53.40
			\$35.70	\$35.70

Synthetic Oil Change (Lube,Oil,Filter (Synthetic)) *** - Tech Cause: Cause not defined. *** - Tech Comments: performed oil change, 6.7L of synthetic 5w30, topped up fluids, tires @32psi. No leaks found.

Completed by Technician number: 0529

Environmental Levy	\$0.50	\$0.50
Miscellaneous (Extra Item)	\$4.64	\$4.64

Misc	\$5.14	Labour	\$35.70	Parts	\$60.70	Prepaid Parts Amt:	\$0.00	Case Total:	\$101.54
									\$0.00

Indebtedness is hereby acknowledged for the "Total Charges" being all or the balance owing to repairs, parts & accessories described in this work order.

Currency:

Labour: \$35.70

Parts: \$61.20

Misc: \$4.64

Sub Total: \$101.54

G/HST: \$5.08

PST: \$0.00

Payment Ref:

Expiry Date:

P/O#:

G/HST Reg # 121413785 RT0001

07/22/2014

Date

Signature

Payment Type

Total: \$106.62

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: Fuel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Fuel

292298 Costco #160
3200 Mayor Magrath Drive
Lethbridge, AB

TYPE: PURCHASE

ACCT: American Express

PUMP:	8
GRADE:	Premium
L:	46.440
PRICE/L:	\$ 1.249
FUEL SALE:	\$ 58.00

CARD NUMBER:

DATE: 07/23/2014
TIME: 17:36
REFERENCE:
36626527 0010016200 S
AUTH#:
TRANSACTION#: 38235

GST INCLUDED = \$ 2.76
GST #121476329

00 APPROVED-THANK YOU 025

- IMPORTANT -
RETAIN THIS COPY
FOR YOUR RECORDS

WE APPRECIATE YOUR COSTCO
MEMBERSHIP.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

CANADIAN TIRE
100 3803 CALGARY TR
EDMONTON, ALBERTA
T6J 5M8

PAYPOINT : 05P
GST #: R100773019
TRANS #: 323981
HOST TIME :
2014-07-30 16:25:34
LOCAL TIME:
2014-07-30 18:23:59

PUMP 05
REGULAR
29.804L AT \$1.124

FUEL SALES \$ 33.50

GST INCLUDED \$ 1.60

TOTAL \$ 33.50

PURCHASE
MASTERCARD

REFERENCE #:
66227541 0010010011S
INVOICE # 160121
SEQUENCE #: 5338
AUTH#

01/027 APPROVED

THANK YOU

-- IMPORTANT --
RETAIN THIS COPY FOR
YOUR RECORDS

- CUSTOMER'S COPY -
STORE #: 1867
ENTER SURVEY & WIN!!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Birkman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

292298 Costco #160
3200 Mayor Magrath Drive
Lethbridge, AB

MEMBER# 111678861270

TYPE: PURCHASE

ACCT: American Express

PUMP: 4
GRADE: Unleaded
L: 31.608
PRICE/L: \$ 1.139
FUEL SALE: \$ 36.00

CARD NUMBER:

***** [REDACTED]

DATE: 08/08/2014

TIME: 13:58

REFERENCE:

36626460 0010011650 S

AUTH#: [REDACTED]

TRANSACTION#: 64354

GST INCLUDED = \$ 1.71
GST #121476329

00 APPROVED-THANK YOU 025

- IMPORTANT -
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WE APPRECIATE YOUR COSTCO
MEMBERSHIP.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

WELCOME
Shell Canada
4312 - 1st Street
TOL 0T0
Claresholm AB
(403) 625-4179
XXXXXXXXXXXX
MASTERCARD
PURCHASE

INV No. 0583892022
2014/08/14 08:04
MasterCard
AID A00000000041010
TVR 0000008000
TSI E800

Bronze
PUMP No. 06
LITRES 53.702
PRICE/L \$1.229
TOTAL FUEL \$66.00
01 APPROVED - THANK
YOU 001

APPROVAL No. [REDACTED]
TERMINAL No. [REDACTED]
89058380

VERIFIED BY PIN

IMPORTANT
retain this copy for
your records

FUEL INCLUDES
GST - Fuel \$3.14
No. 137400032RT

TOTAL SALE \$66.00

STORE: C05838
TRAN: 1706247
2014/08/14 08:07:17

YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
\$100 Shell Gift Card
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bickman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

292298 Costco #160
3200 Mayor Magrath Drive
Lethbridge, AB

MEMBER# 111678861270

TYPE: PURCHASE

ACCT: American Express

PUMP: 12
GRADE: Premium
L: 42.780
PRICE/L: \$ 1.239
FUEL SALE: \$ 53.00

CARD NUMBER:

DATE: 08/25/2014
TIME: 17:00

REFERENCE:
36626519 0010016050 S

AUTH#:
TRANSACTION#: 90136

GST INCLUDED = \$ 2.52
GST #121476329

00 APPROVED-THANK YOU 025

- IMPORTANT -
RETAIN THIS COPY
FOR YOUR RECORDS

WE APPRECIATE YOUR COSTCO
MEMBERSHIP.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bickman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

Print Header

Transaction #: 0037986

Pump: 1 REGULAR
Hose: 1

Credit

Volume U 60.508

@ Price 1.179

Total \$ 71.34

Time: 07:54

Date: 06/26/2014

**** Thank You ****

R.E.M. VENTURES INC
218 4TH AVE
STIRLING AB

CARD *****
CARD TYPE MASTERCARD
DATE 2014/08/26
TIME 5488 07:37:00
RECEIPT NUMBER
C84041549-001-001-278-0

PURCHASE
TOTAL

\$71.34

MasterCard
A0000000041010
E8BC841BDBBDFBF1
0000008000-E800
5910EF53E0446B04

APPROVED

01-027

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Gas

PETRO-CANADA
3003 CALGARY TR. S
EDMONTON
ALBERTA T6J 5X8
7804342180

GST 888837506
PC0112958:3674401
TERMINAL: 023674457
PAYPOINT: 023674401

2014-08-27 17:01

PUMP 07
REGULAR
LITRES L 6.067
PRICE/L \$ 1.154
FUEL SALES \$ 7.00*

TOTAL OWED \$ 7.00

TOTAL PAID
CREDIT CARD \$ 7.00

* GST INCL. \$ 0.33

MASTERCARD

INVOICE 551087
AUTH
PURCHASE
S 0010010010 00 027
APPROVED
THANK YOU

-- IMPORTANT --
RETAIN THIS COPY
FOR YOUR RECORDS

SURVEY! EARN POINTS
& CHANCE TO WIN GAS
1-866-826-7779 OR
PETRO-CANADA.CA/HERO



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
G BIKMAN MLA
LEGIS ASSEMBLY OF AB

Date
July 16, 2014

Page 1 of 2

Statement includes payments and charges received by July 16, 2014

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

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

3292

Listing of Charges and Credits

Amount \$

New Transactions for G BIKMAN MLA

Amount \$

July 2 VINCI PARK - ALBERTA CALGARY
Goods or Services

21.00

μ Please detach here μ

AMERICAN EXPRESS®

Payment Options

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

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

Do Not Enclose Cash

000291

G BIKMAN MLA
LEGIS ASSEMBLY OF AB
901 9717 107 STREET
EDMONTON AB
T5K 1E4

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



Prepared For
G BIKMAN MLA
LEGIS ASSEMBLY OF AB

Membership Number
XXXX-XXXX-XXXX-XXXX
Date
September 16, 2014

Page 1 of 2

Statement includes payments and charges received by September 16, 2014

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

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

3336

Listing of Charges and Credits

Amount \$

New Transactions for G BIKMAN MLA

Amount \$

September 9	VINCI PARK - ALBERTA CALGARY Goods or Services	21.00
Total New Transactions for G BIKMAN MLA		21.00

μ Please detach here μ

AMERICAN EXPRESS®

Payment Options

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

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

Do Not Enclose Cash



G BIKMAN MLA
LEGIS ASSEMBLY OF AB
901 9717 107 STREET
EDMONTON AB
T5K 1E4

000280

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



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: GARY BIKMAN

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

parking

RECEIPT

License Plate Number



Expiration Date/Time

06:00 PM
JUN 25, 2014

Purchase Date/Time: 08:29am Jun 25, 2014

Total Parking: \$29.00

Total FEDERAL: \$1.45

Total Due: \$30.45

Total Paid: \$30.45

Ticket #: 00014463

S/N #: 500012260474

Setting: Lot 384

Mach Name: Lot 384-1

Rate: DAILY MAX
Payment Type: Card

GST REG #R102466000

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PA

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: Gary Bikman

Expense Category: Member Travel

For hosting, select one:

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

Purpose:

From: Gary Bikman <gbikman@telusplanet.net>
Subject:
Date: May 19, 2014 9:39:00 AM MDT

[Hotels](#) [Deals](#) [Customer Service](#)

Hotels.com

Your Hotels.com Confirmation Number is



Comfort Inn And Suites South

Hotel contact details

4611 Macleod Trail SW
Calgary
T2G 0A6
Alberta
Canada
+14032877070



Check-in time
3 PM

Check-out time
11 AM

Hotel GPS coordinates
51.013, -114.066

Room: Standard Room, 1 King Bed, Non Smoking

Occupancy: Gary Bikman, 1 adult

Check in date: Tuesday, May 20, 2014

Check out date: Wednesday, May 21, 2014

Preferences: Non Smoking, King Bed

Please note: Preferences and requests cannot be guaranteed. Special requests are subject to availability upon check-in and may incur additional charges.

Includes:

- Free breakfast
- Free WiFi

Room details

- One King Bed

Complimentary wired and wireless Internet access keeps you connected, and the 32-inch LCD TV is offered for your entertainment. A coffee/tea maker, a microwave, and a refrigerator are provided. The private bathroom has a shower/tub combination, as well as a hair dryer. Air conditioning, a laptop-compatible safe, and a separate sitting area are among the conveniences offered. This room is Non-Smoking.

Room charges	Tuesday, May 20, 2014	C\$129.99
	Taxes & fees	C\$12.00
	Total	C\$141.99

For residents of Quebec, prices include a contribution to the Indemnity Fund of C\$2.00 per \$1000 of travel services purchased.

Your contact details



Thank you for paying using your AmericanExpress ending in [REDACTED] guaranteed.

You'll need to pay any additional charges and fees incurred during your stay at the hotel in their local currency.

Cancellation policy **Free cancellation until 05/19/2014**

- If you change or cancel your booking after 4:00 PM, 05/19/2014 ((GMT-07:00) Mountain Time (US & Canada)) you will be charged for 1 night (including tax)

We will not be able to refund any payment for no-shows or early check-out.



You could be on your way to getting 1 night free*

Collect 10 nights, get 1 free. Just sign up and we'll add 1 night after your stay

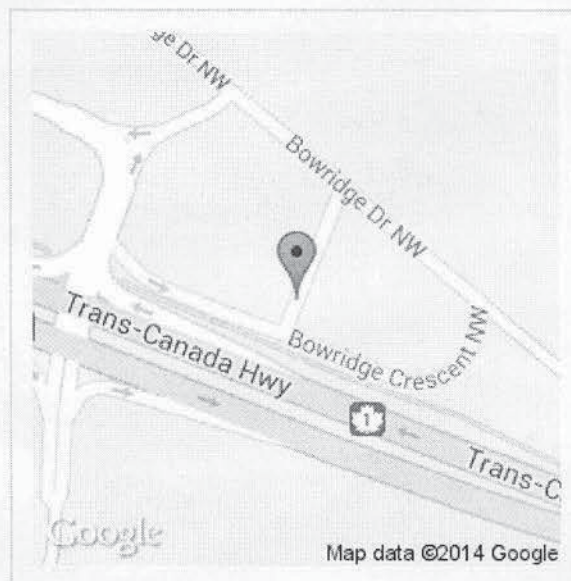
[Sign Up](#)



Four Points By Sheraton Calgary West

Hotel contact details

8220 Bowridge Crescent NW
Calgary
T3B 2V1
Alberta
Canada
+14032884441



Check-in time
3 PM

Check-out time
noon

Hotel GPS coordinates
51.084, -114.207

Room: Traditional Room, 2 Queen Beds

Occupancy: JARY BIKMAN, 2 adults

Check in date: Tuesday, June 24, 2014

Check out date: Wednesday, June 25, 2014

Preferences: Non Smoking, 2 Queen Beds

Please note: Preferences and requests cannot be guaranteed. Special requests are subject to availability upon check-in and may incur additional charges.

Includes: Free WiFi

Room details• **Two Queen Beds**

Complimentary wireless Internet access keeps you connected, and the 42-inch LCD TV offers cable channels. A coffee/tea maker, a microwave, and a refrigerator are supplied. Bathroom amenities include a hair dryer. Complimentary bottled water, a desk, and complimentary newspapers are among the conveniences offered. This room is Non-Smoking.

Room charges	Tuesday, June 24, 2014	CAD\$ 126.65
	Taxes & fees	CAD\$ 20.56
	Total	CAD\$ 147.21

For residents of Quebec, prices include a contribution to the Indemnity Fund of C\$2.00 per \$1000 of travel services purchased.

Your contact details

Thank you for paying using your AmericanExpress ending in [REDACTED] guaranteed.

You'll need to pay any additional charges and fees incurred during your stay at the hotel in their local currency.

Cancellation policy**Special non-refundable rate**

This special discounted rate is non-refundable. If you choose to change or cancel this booking you will not be refunded any of the payment.

**Got a question?**

If you've already checked in or have questions related to the property, contact Four Points by Sheraton Calgary West at +14032884441

For other questions, check out our FAQs, or call our Customer Service team:

Canada:

24 hours a day; 7 days a week.

800 224 6835

This call is free.

You'll need your Hotels.com Confirmation Number 117360267386.



If you've got time we'd like to ask you 2 questions about your booking.



Sign up to our newsletter for the latest deals, coupons and special offers

View our [Terms & Conditions](#) and [Privacy Policy](#) related to your booking. Please print a copy to keep for future reference.

**DAYS INN ATHABASCA**

2805-48TH AVENUE
ATHABASCA AB T9S 0A4 CA
Phone: 780-675-7020
Fax: 780-675-7783
Email: daysinnatha@gmail.com
Printed: 7/30/2014 9:10:52 AM

Folio (Detailed)

Name: BIKMAN, GARY

Confirmation Number:

Account Number:

Room: 407 Room Type: NQQ1, 2 QUEENS NSMK Nights: 2 Guests: 2/0
Rate Plan: RACK Daily Rate: \$143.10 + \$12.88 Tax GTD: AX - AMERICAN EXPRESS
Arrival: 7/28/2014 (Mon) Departure: 7/30/2014 (Wed) XXXX XXXX [REDACTED] [REDACTED] CC
Auto L.Au

Room Rate:

7/28/2014 (Mon) - 7/29/2014 (Tue) \$143.10 + \$12.88 Tax per night.

Date	Code	Description	Amount	Balance
7/28/2014	RM	ROOM CHARGE	\$143.10	\$143.10
7/28/2014	TAX1	GST	\$7.16	\$150.26
7/28/2014	TAX2	TOURISM LEVY	\$5.72	\$155.98
7/29/2014	RM	ROOM CHARGE	\$143.10	\$299.08
7/29/2014	TAX1	GST	\$7.16	\$306.24
7/29/2014	TAX2	TOURISM LEVY	\$5.72	\$311.96
7/30/2014	AX	AMERICAN EXPRESS XXXX XXXX XXXX [REDACTED]	(\$311.96)	\$0.00

Summary

Room	Tax	F&B	Other	CC	Cash	DB
\$286.20	\$25.76	\$0.00	\$0.00	(\$311.96)	\$0.00	\$0.00

By signing below, I agree to t

DAYS INN ATHABASCA
2805 48TH AVE
ATHABASCA AB T9S0A4
7806757020

Guest Signature:

(1) Regardless of charge instruc
management reserves the right
any personal valuables of any ki
"We or our affiliates may contac
22 Sylvan Way, Parsippany, NJ (

Merchant ID: 87438300015
Term ID: 001

Ref #: 022

Pre-Auth Compl

XXXXXXXX [REDACTED]

AMEX

Entry Method: Manual

07/30/14

09:10:40

Inv #: 0000004

Apex Code: [REDACTED]

Apprvd

Batch#: 000622

Original Pre-Auth Amount: \$ 350.00

Total: \$ 311.96

ove as personal indebtedness. (2) This property is privately owned and
a responsible for injury or accidents to guests or loss of money, jewelry or

all 888-946-4283 or write to Opt Out/Privacy, Wyndham Hotel Group, LLC,
ivacy."

GST# 83485 8763 RT0001

Customer Copy

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

hosted meal with constituent
Stakeholder

Thank!
Candace
Rickan's

-All Day Grill & RG Lounge-
2420 Fairway Plaza South
Lethbridge, AB T1K 6Z3
PHONE # 403-327-3088
GST# 898881958

2 Candace

Tbl 19/1 Chk 2697 Gst 2
Jun17'14 11:41AM

2 Water	0.00
2 Ginger Chicken	29.98
Subtotal	29.98
GST Tax	1.50
12:43PM Total	31.48

Thank you for your patronage!

** P*

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: GARY BIKMAN

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosted Meal - FCSS
Stakeholder

BD TE FCSS

Ricky's

-All Day Grill & RG Lounge-
2420 Fairway Plaza South
Lethbridge, AB T1K 6Z3
PHONE # 403-327-3088
GST# 898881958

61 Jess

Tbl 30/1 Chk 4407 Gst 2
Jun26'14 11:49AM

2 Ginger Chicken 29.98

Subtotal 29.98

GST Tax 1.50

12:38PM Total 31.48

Thank you for your patronage!

44 01 01 01 01 01

RICKY'S ALL DAY GRILL
2420 FAIRWAY PLAZA T1K6Z3
LETHBRIDGE AB
20126805

|||| PURCHASE ||||

06-26-2014 12:45:06

Name: GARY BIKMAN
A0000000041010 MasterCard

Trace # 240010 Operator 061
FB2012680504

Inv # 699
RRN 001024009

Purchase \$31.48

Tip \$4.72

Total \$36.20

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosted lunch.

re Affix Covenant

Rickay's

-All Day Grill & RG Lounge-
2420 Fairway Plaza South
Lethbridge, AB T1K 6Z3
PHONE # 403-327-3088
GST# 898881958

1 Kelley G

Tbl 52/1 Chk 4605 Gst 2
Jun27'14 11:48AM

1 California Salad	16.99
1 Mighty Mushroom	13.49
Subtotal	30.48
GST Tax	1.52
12:37PM Total	32.00

Thank you for your patronage!

** Please Pay Server **

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: Constituent Lunch

For hosting, select one:

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

Purpose:

Constituent Lunch

Lunch w. ² Taber Constits
D.L. & M.J.

Luigi's Pizza & Steakhouse
5036 46AVE
Taber, Alberta
(403) 223-8887

Served: Nicki Station: _____

Order Number: 23541
38

1 Fountain Pop	\$1.99
1 Pizza: Special	
1 Clubhouse Bun Bread	\$1.72
1 Large Caesar	\$9.50

SUB TOTAL: \$11.21

Gst 639435443 5% \$1.72

TOTAL PRICE: \$12.92

CASH PAID: \$12.92

PAID IN FULL

7/10/2014 12:02 PM

LUIGI'S PIZZA AND TAKEOUT
5036 46 AVE
TABER, AB
T1G 2A6
403-223-8887

SALE

Server #: 000011
MID: 8023255485
TID: 0039250008023255485006

Batch #: 277 REF#: 00000000
07/10/14 11:58:47

Trace 4
MASTERCARD

AMOUNT	
TIP	\$35.92
TOTAL	\$10.00
	\$45.92

APPROVED

MasterCard
AID: A0000000041010
TVR: 00 00 00 80 00
TSI: E8 00

THANK YOU - MERC

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Constituent hosted-breakfast

Merci
Thank You *Aug 16/14*

Date	Montant Amount	Personnes Guests	Serveur(euse) Server	GST/TPS#
<i>Northwest</i>			<i>Alpe</i>	<i>5421574</i>
APPT-SOUP/SAL-ENTREE-VEG/POT-DESSERT-BEV				
<i>4 break Maffin</i>	<i>17.00</i>			
<i>4 Coffee</i>	<i>1.90</i>			
<i>Milk River Golf Course</i>				
<i>+2</i>				
REPAS FOOD TOTAL				<i>24.60</i>
GST/TPS SOMME PARTIELLE SUBTOTAL				<i>1.23</i>
PST/TVP				<i>25.83</i>
TOTAL				<i>25.85</i>

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Lunch - constituent


RICARDO S
403-223-3366
Supper-Thur/Fri 5-8:30
Lunch: Mon-Fri 11-2:30
GST-867184376
R16 00 26/2014 13:01
0002
San/Wrap \$12.40
Sal/Soup \$13.90
Beverage \$2.75
TOTAL \$29.05
CASH \$50.00
CHANGE \$20.95

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Gary Bikman

Claimant Name: _____

Expense Category: _____

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Lunch - hosted.

PC

BOSTON PIZZA # 179
10620 JASPER AVENUE T5J2A3
EDMONTON AB
20153908
BH2015390811

**** PURCHASE ****

08-27-2014 12:50:32
Acct # *****
Exp Date **/** Card Type MC
Name: GARY BIKMAN
A0000000041010 MasterCard

Check # 68
Trace # 1760 Operator 39
Inv. # 1800
RRN 001062006

Purchase \$26.75
Tip \$5.35
Total \$32.10

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy



BOSTON PIZZA #179
JASPER AVENUE
0068 Table 66 #Party 2
ALYSSA 0 SvrCk: 9 12:09 08/27/14

1 CHKN PECAN SALAD 14.99
1 MEDI SALAD 10.49

Sub Total: 25.48
GST : 1.27
08/27 12:48 TOTAL: 26.75

THANK YOU!

GST#893018549

PLEASE PAY SERVER
JOIN US FOR \$7.99 PASTA TUESDAY

PLEASE NOTE THAT BOSTON PIZZAS' PARKING
IS ON THE EAST AND WEST SIDE
OF THE BUILDING ONLY!!
TELL US HOW WE DID!

We value your feedback.
Complete short survey and receive a
weekly chance to WIN an awesome
\$50 Boston Pizza Gift Card
keep this receipt and go to
www.tellbostonpizza.com
OR call 1.888.205.5778

For complete rules, eligibility
please visit www.tellbostonpizza.com

82961-80000-77211

Full Rules & Regulations can be found at
www.bostonpizzasurvey.com
