

LEGISLATIVE ASSEMBLY OF ALBERTA
Member Expense Disclosure Report
Chestermere-Rocky View - Bruce McAllister
For Expenses Processed Oct 1 - Dec 31, 2014

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$2,161.02	\$6,677.22
Member Parking - \$	\$900.00	\$21.30	\$166.48
Member Travel (overnight stay in constituency) - \$			
Member Travel (Extraordinary Accommodation) - \$		\$198.20	\$198.20
Taxi, Bus Travel - \$		\$52.00	\$87.23
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$1,494.75	\$1,494.75
Other			
Hosting - \$		\$656.13	\$1,258.11
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	30	80
Travel Accommodations Allowance (days; 10 max)	10	1	1
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000	10,206	31,396
Special Trips (5 trips per year) - NF	5	1	1
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52	6	20
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

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

WILLOW ESSO
45 GASOLINE ALLEY EAST
RED DEER COUNTY, AB T4E-1B1

00302524

VRN:R121461107

09/10/2014 9:53:13 PM
Register: 2 Trans #: 2624 Op ID: 1320
Your cashier: JOE

ERCO CO. PUMP# 5
23.410 L @ \$ 1.199/L \$100.01 101
GST Incl In Fuel \$4.76

Subtotal = \$100.01

Total = \$100.01

Change Due = \$0.00

Credit \$100.01

TYPE: PURCHASE
ACCOUNT: MASTERCARD \$100.01

INVOICE: TCK18798

CARD NUMBER: C **** * [REDACTED]

A- MasterCard

B- A0000000041010

01 Approved - Thank You 027

LOYALTY: NO

IMPORTANT - retain this copy for your records

Customer Copy

Thank You

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

PETRO-CANADA
140 CHESTERMERE WY
CHESTERMERE
Alberta T1X 0A9

GST: 805385317 (403) 248-0354
2014-09-12 PC0044110:3893702 11:03
TERMINAL: 023893702 OPER: A
PAYPOINT: 023893702

FUEL	(L)	(\$/L)	(\$)
Pump 7			
Regular	110.260	1.179	130.00*
Total Owed			130.00

TOTAL PAID
CREDIT CARD \$ 130.00

*TAXES INCL. #TAXES EXCL.

GST TOTAL \$ 6.19

MASTERCARD *****
INV. 536563 AUTH.
Purchase
C 0010010010 00 027

MasterCard
A0000000041010
0000008000
E800

VERIFIED BY PIN

OO APPROVED - THANK YOU

--- IMPORTANT ---
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& chance to WIN gas
1-866-826-7779 or
petro-canada.ca/hero

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

SHELL CANADA PRODUCTS
8251 FAIRMONT DRIVE S.E.
Calgary, AB T2H 0Y7
(403) 252-2505

Tax Description	Qty	Amount
F Bronze No3		
112.915 L @ \$1.169/ L		\$132.00
AIR MILES Discount	1	\$0.00
Sub Total		\$132.00
5.0% GST tax on		\$0.00
0.0% PST tax on		\$0.00
TOTAL		\$132.00
MASTERCARD:		\$132.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD XXXXXXXXXXXX [REDACTED]
TERMINAL No. 89001742
C
PURCHASE
INV No. 0017422845
APPROVAL No. [REDACTED]
MasterCard
AID A0000000041010
TVR 000008000
TSI E800

VERIFIED BY PIN

IMPORTANT
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AM 83012XXXXX SCANNED Promo 0

Fuel Includes	GST	5.0%	\$6.29
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel - AB	No.	137400032	RT

***** YOUR OPINION COUNTS *****
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and you could win a \$100 Shell Gift Card
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THANK YOU
Questions? 1-800-661-1600
REG: 2 CSH: 1, Janice TRAN: 2490161
2014/09/18 14:03:59 ST. C00174

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

SHELL CANADA PRODUCTS
37430 HWY 2 SOUTH
RED DEER, AB T4E 1B2
(403) 346-9230

Tax Description	Qty	Amount
F Bronze No12		
114.025 L @ \$1.169/ L		\$134.00
AIR MILES Discount	1	\$0.00
Sub Total		\$134.00
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
TOTAL		\$134.00
MASTERCARD:		\$134.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD XXXXXXXXXX [REDACTED]
TERMINAL No. 89003672 C
PURCHASE
INV No. 0036725742
APPROVAL No. [REDACTED]
MasterCard
AID A0000000041010
TVR 0000008000
TSI E800

VERIFIED BY PIN

IMPORTANT
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AM 83012XXXXX SCANNED Promo 0

Fuel Includes	GST	5.0%	\$6.38
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel - AB	No.	137400032RT	

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THANK YOU
Questions? 1-800-661-1600
REG: 2 CSH: Khan, Aamir TRAN: 4793019
2014/09/24 09:21:03 ST: C00367

Personal Expense Claim Receipt Description

Member Name: Bruce McAllisterClaimant Name: Bruce McAllisterExpense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

SHELL CANADA PRODUCTS
100 8435 BOWFORT RD NW
CALGARY, AB T2M 4N3
(403) 247-0449

Tax Description	Qty	Amount
F Bronze No2		
65.060 L @ \$1.199/ L		\$78.01
AIR MILES Discount	1	\$0.00
Sub Total		\$78.01
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
TOTAL		\$78.01
MASTERCARD:		\$78.01
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD

XXXXXXXXXX

TERMINAL NO. 89202942

C

PURCHASE

INV No. 2029424475

APPROVAL No. [REDACTED]

MasterCard

AID A0000000041010

TVR 0000008000

TSI E800

VERIFIED BY PIN

IMPORTANT

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AM 83012XXXXX

SCANNED Prom 0

Fuel Includes	GST	5.0%	\$3.71
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel	AB No.	137400032	RT

***** YOUR OPINION COUNTS *****

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Questions? 1-800-661-1600

REG: 2 CSH: muhammad

TRAN: 3575902

2014/09/26 11:34:57

ST: C20294

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

PETRO-CANADA
140 CHESTERMERE WY
CHESTERMERE
Alberta T1X 0A9

GST: 805385317 (403) 248-0354
2014-10-01 PC0374636:3893701 09:00
TERMINAL: 023893701 OPER: A
PAYPOINT: 023893701

FUEL	(L)	(\$/L)	(\$)
Pump 7			
Regular	126.329	1.219	154.00*
Total Owed			154.00

TOTAL PAID
CREDIT CARD \$ 154.00

*TAXES INCL. #TAXES EXCL.

GST TOTAL \$ 7.33

MASTERCARD *****
INV 732414 AUTH.
Purchase
C 0010010010 00 027

MasterCard
A0000000041010
0000008000
EB00

VERIFIED BY PIN

00 APPROVED - THANK YOU

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& chance to WIN gas
1-866-826-7779 or
petro-canada.ca/hero

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

SHELL CANADA PRODUCTS
2020 16 AVENUE NE
Calgary, AB T2E 1L3
(403) 250-9507

Tax Description	Qty	Amount
F Bronze No8		
127.377 L @ \$1.209/ L		\$154.00
AIR MILES Discount	1	\$0.00
Sub Total		\$154.00
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
TOTAL		\$154.00
MASTERCARD:		\$154.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD XXXXXXXXXX [REDACTED]
TERMINAL No. 89002082 C
PURCHASE
INV No. 0020829655
APPROVAL No. [REDACTED]
MasterCard
AID A0000000041010
TVR 0000008000
TSI E800

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AM 83012XXXXX SCANNED Promo 0

Fuel Includes	GST	5.0%	\$7.33
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel - AB	No.	137400032	RT

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Questions? 1-800-661-1600
REG: 2 CSH: Imran, Qure TRAN: 3808360
2014/10/05 18:39:07 ST: C00208

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

SHELL CANADA PRODUCTS
37430 HWY 2 SOUTH
RED DEER, AB T4E 1B2
(403) 346-9230

Tax Description	Qty	Amount
F Bronze No16 120.105 L @ \$1.199/ L		\$144.01
AIR MILES Discount	1	\$0.00
Sub Total		\$144.01
5.0% GST tax on		\$0.00
0.0% PST tax on		\$0.00
TOTAL		\$144.01
MASTERCARD:		\$144.01
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD XXXXXXXXXX [REDACTED]
TERMINAL No. 89003672 C
PURCHASE
INV No. 0036721346
APPROVAL No. [REDACTED]
MasterCard
ATD A0000000041010
TVR 0000008000
TSI E800

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IMPORTANT
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AM 83012XXXXX SCANNED Promo 0
Fuel Includes GST 5.0% \$6.86
Fuel Includes PST 0.0% \$0.00
GST - Fuel - AB No. 137400032RT

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THANK YOU
Questions? 1-800-661-1600
REG: 2 CSH: Mehmood, Ya TRAN: 4829654
2014/10/10 09:28:59 ST: C00367

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

SHELL CANADA PRODUCTS

37547 HWY2

RED DEER, AB T4E 1B1

(403) 343-6555

Tax Description	Qty	Amount
F Bronze No4		
111.600 L @ \$1.129/ L		\$126.00
AIR MILES Discount	1	\$0.00
Sub Total		\$126.00
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
TOTAL		\$126.00
MASTERCARD:		\$126.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD

XXXXXXXXXX

TERMINAL No. 89106262

C

PURCHASE

INV No. 1062625088

APPROVAL No.

MasterCard

AID A0000000041010

TVR 0000008000

TSI E800

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IMPORTANT

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AM 83012XXXXX

SCANNED Promo 0

Fuel Includes	GST	5.0%	\$6.00
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel - AB	No.	13740002	RT

***** YOUR OPINION COUNTS *****

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THANK YOU

Questions? 1-800-661-1600

REG: 2 CSH: K, Anees

TRAN: 1340953

2014/10/15 16:00:04

ST: C10623

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

SHELL CANADA PRODUCTS
2020 16 AVENUE NE
Calgary, AB T2E 1L3
(403) 250-9507

Tax Description	Qty	Amount
F Bronze No2		
110.347 L @ \$1.169/ L		\$129.00
AIR MILES Discount	1	\$0.00
Sub Total		\$129.00
5.0% GST tax on		\$0.00
0.0% PST tax on		\$0.00
TOTAL		\$129.00
MASTERCARD:		\$129.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD XXXXXXXXXXXX
TERMINAL No. 89002082
PURCHASE C
INV No. 0020824040
APPROVAL No.
MasterCard
AID A0000000041010
TVR 0000008000
TSI E800

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IMPORTANT
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AM 83012XXXXX SCANNED Promo 0

Fuel Includes	GST	5.0%	\$6.14
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel - AB	No.	137400C32	RT

***** YOUR OPINION COUNTS *****

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THANK YOU
Questions? 1-800-661-1600
REG: 2 CSH: Imran, Qure TRAN: 3831826
2014/10/17 20:57:10 ST: C00208

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

SHELL CANADA PRODUCTS
BOX 310, 604-1 STREET WEST
COCHRANE, AB T4C-1A6
(403) 932-4562

Tax Description	Qty	Amount
F Bronze No1		
80.072 L @ \$1.099/ L		\$88.00
AIR MILES Discount	1	\$0.00
Sub Total		\$88.00
5.0% GST tax on		\$0.00
0.0% PST tax on		\$0.00
TOTAL		\$88.00
MASTERCARD:		\$88.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD

XXXXXXXXXX [REDACTED]
TERMINAL No. 89120591
C

PURCHASE

INV No. 1205916367

APPROVAL No. [REDACTED]

MasterCard

AID A0000000041010

TVR 0000008000

TSI E800

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IMPORTANT

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AM 83012XXXXXX

SCANNED Promo 0

Fuel Includes GST 5.0% \$4.19

Fuel Includes PST 0.0% \$0.00

GST - Fuel - AB No. 137400032 RT

***** YOUR OPINION COUNTS *****

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Questions? 1-800-661-1600

REG: 1 CSH: iffi

TRAN: 2497649

2014/10/23 10:53:43

ST: C12059

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Bruce McAllisterClaimant Name: Bruce McAllisterExpense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

SHELL CANADA PRODUCTS
100 8435 BOWFORT RD NW
CALGARY, AB T2M 4N3
(403) 247-0449

Tax Description	Qty	Amount
F Bronze No1		
128.297 L @ \$1.099/ L		\$141.00
AIR MILES Discount	1	\$0.00
Sub Total		\$141.00
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
TOTAL		\$141.00
MASTERCARD:		\$141.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD

XXXXXXXXXX

TERMINAL No. 89202941

PURCHASE

C

INV No. 2029417829

APPROVAL No.

MasterCard

AID A0000000041010

TVR 0000008000

TSI E800

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IMPORTANT

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AM 83012XXXXXX

SCANNED Promo 237

Fuel Includes GST 5.0% \$6.71

Fuel Includes PST 0.0% \$0.00

GST - Fuel - AB No. 137400032 RT

***** YOUR OPINION COUNTS *****

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*Receipt Required

THANK YOU

Questions? 1-800-661-1600

REG: 1 CSH: muhammad

TRAN: 3637596

2014/10/29 19:48:25

ST: C20294

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

PETRO-CANADA
140 CHESTERMERE WY
CHESTERMERE
Alberta T1X 0A9

GST: 805385317 (403) 248-0354
2014-11-05 PC0065832:3893702 08:59
TERMINAL: 023893702 OPER: A
PAYPOINT: 023893702

FUEL	(L)	(\$/L)	(\$)
Pump 7			
SuperClean94	38.785	1.233	47.80*
Total owed			110.00

TOTAL PAID
CREDIT CARD \$ 110.00

*TAXES INCL. #TAXES EXCL.

GST TOTAL \$ 5.24

MASTERCARD *****
INV. 552221 AUTH.
Purchase
C 0010010010 00 027

MasterCard
A0000000041010
0000008000
E800

VERIFIED BY PIN

00 APPROVED - THANK YOU

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& chance to WIN gas
1-866-826-7779 or
petro-canada.ca/hero

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

SHELL CANADA PRODUCTS

2020 16 AVENUE NE

Calgary, AB T2E 1L3

(403) 250-9507

Tax Description	Qty	Amount
F Bronze No2		
115.350 L @ \$1.049/ L		\$121.00
AIR MILES Discount	1	\$0.00
Sub Total		\$121.00
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
TOTAL		\$121.00
MASTERCARD:		\$121.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD

XXXXXXXXXX

TERMINAL No. 89002082

C

PURCHASE

INV No. 0020822555

APPROVAL No.

MasterCard

AID A0000000041010

TVR 0000008000

TSI E800

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AM 8:012XXXXXX

SCANNED

Promo 0

Fuel Includes	GST	5.0%	\$5.76
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel - AB	No.	137400032	RT

***** YOUR OPINION COUNTS *****

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THANK YOU

Questions? 1-800-661-1600

REG: 2 CSH: Imran, Qure TRAN: 3868893

2014/11/07 14:52:29

ST: C00208

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Bruce McAllisterClaimant Name: Bruce McAllisterExpense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

SHELL CANADA PRODUCTS

37430 HWY 2 SOUTH

RED DEER, AB T4E 1B2

(403) 346-9230

Tax Description	Qty	Amount
F Bronze No14		
121.690 L @ \$1.019/ L		\$124.00
AIR MILES Discount	1	\$0.00
Sub Total		\$124.00
5.0% GST tax on		\$0.00
0.0% PST tax on		\$0.00
TOTAL		\$124.00
MASTERCARD:		\$124.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD

XXXXXXXXXX

TERMINAL No. 89003672

C

PURCHASE

INV No. 0036721370

APPROVAL No.

MasterCard

AID A0000000041010

TVR 0000008000

TSI E800

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IMPORTANT

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AM 83012XXXXXX

SCANNED

Promo 0

Fuel Includes	GST	5.0%	\$5.90
Fuel Includes	PST	0.0%	\$0.00
GST - Fuel - AB	No.	137400032RT	

***** YOUR OPINION COUNTS *****

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and you could win a \$100 Shell Gift Card

*Receipt Required

THANK YOU

Questions? 1-800-661-1600

REG: 2 CSH: Mehmood, Ya TRAN: 4904948

2014/11/12 17:09:28

ST: C00367

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

SHELL CANADA PRODUCTS
2020 16 AVENUE NE
Calgary, AB T2E 1L3
(403) 250-9507

Tax Description	Qty	Amount
F Bronze No4		
130.680 L @ \$1.079/ L		\$141.00
AIR MILES Discount	1	\$0.00
Sub Total		\$141.00
5.0% GST tax on		\$0.00
0.0% PST tax on		\$0.00
TOTAL		\$141.00
MASTERCARD:		\$141.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD

XXXXXXXXXXXX

TERMINAL No. 89002082

C

PURCHASE

INV No. 0020825149

APPROVAL No.

MasterCard

AID A0000000041010

TVR 0000008000

TSI E800

VERIFIED BY PIN

IMPORTANT

retain this copy for your records

AM 83012XXXXX

SCANNED Promo 0

Fuel Includes GST 5.0% \$6.71

Fuel Includes PST 0.0% \$0.00

GST - Fuel - AB No. 137400032 RT

***** 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

REG: 2 CSH: Imran, Qure TRAN: 3883153

2014/11/15 14:35:25

ST: C00208

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

SHELL CANADA PRODUCTS
3130 68 ST NE
CALGARY, AB T1Y 6Y1
(403) 280-2483

Tax Description	Qty	Amount
F Bronze No6 129.090 L @ \$1.069/ L		\$138.00
AIR MILES Discount	1	\$0.00
Sub Total		\$138.00
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
TOTAL		\$138.00
MASTERCARD:		\$138.00
Change		\$0.00

01 APPROVED - THANK YOU 001

MASTERCARD XXXXXXXXXXXX
TERMINAL No. 89103812
C
PURCHASE
INV No. 1038122082
APPROVAL No.
MasterCard
AID A0000000041010
TVR 0000008000
ISI E800

VERIFIED BY PIN

IMPORTANT
retain this copy for your records

AM 83012XXXXX SCANNED Promo 0

Fuel Include 5.0% \$6.57
\$0.00

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

PETRO-CANADA
140 CHESTERMERE WY
CHESTERMERE
Alberta T1X 0A9

GST: 805385317 (403) 248-0354
2014-11-30 PC0437353:3893701 15:41
TERMINAL: 023893701 OPER: A
PAYPOINT: 023893701

FUEL	(L)	(\$/L)	(\$)
Pump 11			
Regular	126.397	0.989	125.01*
Total Owed			125.01

TOTAL PAID
CREDIT CARD \$ 125.01

*TAXES INCL. #TAXES EXCL.

GST TOTAL \$ 5.95

MASTERCARD *****
INV. 781284 AUTH.
Purchase
C 0010010010 00 027

MasterCard
A0000000041010
0000008000
E800

VERIFIED BY PIN

00 APPROVED - THANK YOU

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& chance to WIN gas
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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
B MCALLISTER MLA
LEGIS ASSEMBLY OF AB

Date
October 16, 2014



Page 1 of 2

Statement includes payments and charges received by October 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.

3353

Listing of Charges and Credits

Amount \$

New Transactions for B MCALLISTER MLA

Amount \$

September 18 STAMPEDE PARKING CALGARY
Sporting Events

15.00

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

000285



B MCALLISTER 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





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
B MCALLISTER MLA
LEGIS ASSEMBLY OF AB

Date
November 16, 2014



Page 1 of 2

Statement includes payments and charges received by November 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.

3243

Listing of Charges and Credits

Amount \$

New Transactions for B MCALLISTER MLA

Amount \$

October 16	IMPARK00030082U	CALGARY	7.35
	Goods or Services		
Total New Transactions for B MCALLISTER MLA			7.35

μ Please detach here μ

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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

000284



B MCALLISTER 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





Room
Page #

1 of 2

530 MacKenzie Boulevard
Fort McMurray, AB T9H4C8
T (888) 729-7343 F (780) 743-4654
G.S.T. Registration #804570083RT0001

Mcallister, Bruce

Dear Bruce Mcallister:

Your reservation # [REDACTED] at Sawridge Inn and Conference Centre Fort McMurray begins soon. We're excited you'll be visiting and we are preparing for your arrival.

Arrival Date: September 29, 2014
Departure Date: September 30, 2014
Adults / Children: 1 Adult(s) / 0 Child(ren)
Deposit Received:
Number of Nights 1
Room Type Requested: Business Class Queen Bed
Room Rate: \$189.00
Confirmation Number: [REDACTED]

We are holding the reservation on a guaranteed basis. In case of cancellation please contact the hotel prior to 4:00 pm Mountain Time on the day prior to arrival to avoid any cancellation charges.

Check in time is any time after 4:00 pm on the day of arrival. If you arrive earlier and your room is not available, we will offer baggage storage and the use of hotel facilities. Check out time is prior to 12.00 noon on the day of departure, although a later departure may be available for a fee. Complimentary parking and WiFi is available for all guests.

Mcallister, please feel free to contact us for assistance with any restaurant bookings, transportation information or anything else to make your stay more pleasurable. We look forward to welcoming you to Sawridge Inn and Conference Centre Fort McMurray.

Best Regards,

Reservations Office

Sawridge Inn and Conference Centre
4235 Gateway Blvd. N, NW
Edmonton, AB T6J 5H2
Toll Free: 1.888.729.7343
Direct: 780.438.1222

Sawridge Inn and Conference Centre
PO Box 2080, 76 Connaught Dr
Jasper, AB T0E 1E0
Toll Free: 1.888.729.7343
Direct: 780.852.5111

Sawridge Inn and Conference Centre
9510-100th St
Peace River, AB T8S 1S9
Toll Free: 1.888.729.7343
Direct: 780.624.3621

Thank you for choosing to stay with Sawridge Inn and Conference Centre.

Item #	Trans date	Post date	Description
--------	------------	-----------	-------------

19	30 Sep	02 Oct	SAWRIDGE HTL FRT FORT MCMURRAY AB
----	--------	--------	-----------------------------------

208.11

and Balance transfers from the date they are posted to your Account.

GRACE PERIOD ON PURCHASES: We waive the interest charges on new Purchases and fees which appear on the front of this Account statement for the first time if your New Balance is paid in full by the payment due date shown on this statement. Purchases made by writing Convenience Cheques are treated as Cash Advances and we don't waive the interest charges.

MINIMUM PAYMENT: You may pay your New Balance in full at any time. However, each month you must pay at least the amount shown as the total minimum Payment Due on your Account statement by the payment due date.

HOW WE APPLY PAYMENTS: We apply payments to amounts shown on your Account statement in this order: interest; premiums for optional insurance; service fees and applicable taxes on premiums for optional insurance; annual membership fees; Cash Advances; and Purchases. If you have paid more than your New Balance, we will apply the extra payment to amounts that have not yet appeared on your Account statement but have been posted to your Account. In the order: Cash Advances; Purchases; interest; service fees at applicable rates on premiums for optional insurance; premiums for optional insurance; and annual membership fees.

CREDIT AVAILABLE: This is the amount of credit you had available on your Account at the end of your statement period. Transactions that have not yet appeared on your Account statement are not reflected.

FOREIGN CURRENCY TRANSACTIONS: If you make Transactions in a foreign currency (or return any such Transactions), you will be charged (or receive a credit) in Canadian dollars at the exchange rate in effect at the time we post the Transaction to your Account. This rate may be different from the rate in effect on the date of the Transaction. The exchange rate used reflects the MasterCard conversion rate, plus we charge a foreign exchange administration fee, which fee is disclosed to you in the Card Carrier and any subsequent disclosures. This applies to both debits/purchases and credits/returns to your Account.

LOST/STOLEN CARDS: UNAUTHORIZED USE: You will inform us immediately of any actual or suspected loss, theft or unauthorized use of your Card, PIN, Account Number or Convenience Cheques.

ACCOUNT ENQUIRIES: If you would like information about the Account, the Primary or Secondary Cardholder may contact us during regular business hours at the number listed under Contact Us printed on the front of this Account statement.

BILLING RIGHTS: You must tell us, in writing, no later than 30 days following your statement date, of any error or omission in your Account statement. If you notice any error or omission, contact us at the number or address listed under Contact Us printed on the front of this Account statement or through HSBC MasterCard Online Access at www.hsbc.ca. Even if you dispute a transaction, you must still pay at least the amount shown as the total minimum Payment Due on your Account statement by the payment due date in order to keep your Account in good standing.

Please refer to your Cardholder Agreement and disclosures for additional information regarding rates and fees.

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The American Express® Corporate Card Statement of Account

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

Prepared For
B MCALLISTER MLA
LEGIS ASSEMBLY OF AB

Date
October 16, 2014



Page 1 of 2

Statement includes payments and charges received by October 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.

3353

Listing of Charges and Credits

Amount \$

New Transactions for B MCALLISTER MLA

Amount \$

September 29	SUN TAXI (FT MCMURRA FORT MCMURRAY TAXICABS AND LIMOUSINES	25.60
October 8	YELLOW CAB 450241247 EDMONTON TAXICABS AND LIMOUSINES	15.00
October 15	CAPITAL TAXI LTD 932 EDMONTON TAXICABS AND LIMOUSINES	14.00

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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**

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B MCALLISTER MLA
LEGIS ASSEMBLY OF AB
901 9718 107 STREET
EDMONTON AB
T5K 1E4

000285

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





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: McAllister, Bruce

Constituency: Chestermere-Rocky View

For the Month of: April

Year: 2014

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
7	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
9	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
10	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
15	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
16	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
22	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
23	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
24	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$483.52	\$24.18	\$507.70

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


Member Signature

Oct 16, 2014
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: McAllister, Bruce

Constituency: Chestermere-Rocky View

For the Month of: May

Year: 2014

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
5	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
6	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
22	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
23	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
29	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$336.33	\$16.82	\$353.15

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

Oct 16, 2014
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: McAllister, Bruce

Constituency: Chestermere-Rocky View

For the Month of: June

Year: 2014

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
18	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
19	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$138.48	\$6.92	\$145.40

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

Oct 14, 2014
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: McAllister, Bruce

Constituency: Chestermere-Rocky View

For the Month of: August

Year: 2014

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	60 km from Perm. Res.	Banff	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
12	60 km from Perm. Res.	Banff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$39.57	\$1.98	\$41.55

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

Member Signature

Oct 14, 2014
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: McAllister, Bruce

Constituency: Chestermere-Rocky View

For the Month of: September

Year: 2014

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30	60 km from Perm. Res.	Fort Mac	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$59.33	\$2.97	\$62.30

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

Oct 14, 2014
Date



Members' Travel Expenses Per-Diems Claim Form

22 (54)

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: McAllister, Bruce

Constituency: Chestermere-Rocky View

For the Month of: October

Year: 2014

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
9	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$70.38	\$3.52	\$73.90

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: McAllister, Bruce

Constituency: Chestermere-Rocky View


For the Month of: November

Year: 2014

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
12	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
17	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
18	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
19	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
24	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
25	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
26	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$367.14	\$18.36	\$385.50

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


Member Signature

Date

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Lunch meeting to discuss constituent issues.

ROCKIN' HORSE CAFE
100 MAIN STREET
BALZAC AB T0M 0E0
(403) 275-8777

Term ID: 30104981

GST #:

Purchase

Chequing

DEBIT

Entry Method: Dipped

2014/09/16

13:31:40

Inv #: 1004725 Appr Code:

Seq #: 1005018 Batch#: 000212

Amount: \$ 27.30

Tip: \$ 2.70

Terminal Fee: \$ 0.25

Total: \$ 30.25

Hosttimestamp: 20140916133146

00 Approved 000 Thank You

ROCK IN HORSE
CAFE
100 MAIN STREET BALZAC, ALBERTA

2 X		\$8.95
BURGER FRIES	T1	\$17.90
2 X		\$1.00
LUNCH SIDE	T1	\$2.00
2 X		\$1.50
LUNCH SIDE	T1	\$3.00
2 X		\$1.55
LUNCH BEV	T1	\$3.10
SUBTOTAL		\$27.30

TAXABLE1	\$26.00
TAX1 AMOUNT	\$1.30
CHARGE	\$27.30
14:02	09-16-2014
004710	00

THANK YOU
PH# 403 275 8777

Application Label: Interac
AID: A00000002771010
TVR: 80 00 00 00 00
TSI: 68 00
IC: 60A1A78BF8EBD601

Customer Copy
THANK YOU!
Have a Good Day

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Lunch meeting to discuss constituent issues.

DOCKSIDE BAR AND GRILL
109 EAST CHESTERMERE DR
CHESTERMERE AB

CARD *****
CARD TYPE MASTERCARD
DATE 2014/09/17
TIME 9060 13:58:16
CLERK ID 32
RECEIPT NUMBER
082000417-001-238-006-0

PURCHASE
AMOUNT \$32.45
TIP \$5.55
TOTAL
\$38.00

MasterCard
A00000000041010
C0F31D0D5582AA0F
0000008000-E800
E77E8EEE3438A4DA

APPROVED

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

Chestermere Landing

109 East Chestermere Dr.
Chestermere, Alberta
403-248-4343

09/17/14 1:48 PM
Table 801 Cust 2 Order # 4560
Your Server: Megan

2 Lunch Special	27.90
1 Club Soda	3.00

Taxable: 30.90

Sub-total: 30.90

GST: 1.55

Total Due: 32.45

Try Your Luck At Our New VLTs

GST #802614537RT0001

Please Pay Your Server

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Breakfast meeting to discuss constituent issues.

Tim Hortons

Always Fresh. Always There. Since 1964

300 - 120 CHESTERMERE STN. WAY
CHESTERMERE, AB

1 Brek Wrap Combo Hashbrown	(\$0.79)
1 Medium Original Lemonade	\$2.00
1 Hashbrown	\$1.29
1 Sge Grilled Brek Wrap	\$2.29
1 Blueberry - Muffin	\$1.29
1 Pumpkin Spc - Muffin	\$1.29
Subtotal:	\$7.37
GST:	\$0.37 PST:
GrandTotal:	\$7.74
Debit:	\$7.74
Change Due:	\$0.00

Drive Thru # 106 300 Cashier

It was great seeing you today! Thanks for your visit!

How did we do?

Visit www.telltimhortons.com

Sep 25, 2014 10:27:25

Receipt #: 7351262

GST #R827702945

DEBIT

XXXXXXXXXX

Account: CHEQUING

Card Entry:CHIP Sequence:000371

Trans Type:Purchase \$7.74

Merchant #: 030000022716

Term #: 102

Ref #: 00000371

Trace #: 00897233

Application Label: Interac

AID #: A0000002771010

TVR #: 8000008000

TSI #: 6800

APPROVED

By entering a verified PIN, cardholder agrees
to pay issuer such total in accordance with issuers
agreement with CardHolder.

Guest Copy

REPRINT RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Lunch meeting to discuss constituent issues.

Rice For King
#307, 100 Marina Drive
Chestermere AB, T1X0A9
403-248-8311 | www.rice4king.com

TABLE # 15
CHECK# 24363
Closed to Debit Card

DATE/TIME: 10/7/2014 12:40:49 PM
CASHIER: 100101
STATION: 01

1 2 SPRING ROLLS (4 ROLLS)*	\$6.95
1 9 HOUSE SPECIAL BEEF NOO*	\$10.95
1 46 STIR FRIED LEMON GRAS*	\$12.95
1 ROUNDING	\$0.01

Subtotal	\$30.86
Tax	\$1.54

GRAND TOTAL \$32.40

Debit Card \$32.40

Opened: 10/7/2014 12:03:54 PM

THANK YOU
PLEASE COME AGAIN !

RICE FOR KING RESTAURA
100 MARINA DR UNIT T1X0R9
CHESTERMERE AB
22635177

|||| PURCHASE ||||

10-07-2014 12:41:13

Acct # [REDACTED]

Exp Date ' / ' Card Type MC

Name: BRUCE MCALLISTER

A0000000041010 MasterCard

Trace # 300005

FS2263517701

Inv # 26155

RRN 001001089

Purchase \$32.40

Tip \$5.60

Total \$38.00

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Food purchased for community event.



#56 CALGARY ALBERTA

2853-32 STREET N E
CALGARY ALBERTA

T1Y 6T7

MEMBER

12 @ 15.99

350505 CHSCKE ASST 191.88

TOTAL

VF American Express 191.88

REFERENCE#: 66231143-0010019340

10/22/14 10:33:33

Invoice#: 23591

COSTCO # 56

2853-32 STREET N E
CALGARY ALBERTA T1Y 6T7

PURCHASE - AMEX
SCOTIABANK AMEX
A000000025010402
0000008000 F800

00 APPROVED - THANK YOU 025
AMOUNT: \$191.88

0056 007 0000000075 0032

IMPORTANT - retain this copy for your
record.

*** CARDHOLDER COPY ***

CHANGE .00

TOTAL NUMBER OF ITEMS SOLD = 12
CASHIER: MARILYN B REG# 7
10/22/14 10:33 0056 07 0032 75

GST/HST #121476329

THANK YOU!
GST# 121476329RT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Food purchased for community event.

2014/10/31 10:54 0056 10 0005 85



#56 CALGARY, ALBERTA

2853-32 STREET N E

CALGARY ALBERTA

T1Y 6T7

MEMBER

350505 CHSECKE ASST 15.99

83337 RED GRAPES 8.99

884 COFFEE CREAM 4.99

688813 KS RICE CRKR 9.99 G

484 SGR ENVELOPE 14.69

16 @ 4.99

27003 STRAWBERRIES 79.84

SUBTOTAL 134.49

**** GST 5% .50

TOTAL 134.99

VF American Express 134.99

REFERENCE#: 66231146-0010013220 C

10/31/14 10:54:36

Invoice#: 07954

COSTCO # 56

2853-32 STREET N E

CALGARY ALBERTA T1Y 6T7

PURCHASE - AMEX

SCOTIABANK AMEX

A000000025010402

0000008000 F800

00 APPROVED - THANK YOU 025

AMOUNT: \$134.99

0056 010 0000000085 0005

IMPORTANT - retain this copy for your record.

*** CARDHOLDER COPY ***

CHANGE .00

TOTAL NUMBER OF ITEMS SOLD = 21

CASHIER: MYRNALYNN A REG# 10

2014/10/31 10:55 0056 10 0005 85

GST/HST #121476329

THANK YOU!

GST# 121476329RT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Food purchased for community event.

SAFEWAY

STORE MGR JON VASTAG 403-410-9700
GST HST #817093735

WELCOME AIR MILES COLLECTOR 9521

GROCERY

3 QTY	EDWARDS COFFEE	23.91
ResPrice		44.37
Savings		20.46-
**** TAX	00 BAL	23.91
VF	AMEX	23.91

ACCOUNT NUMBER *****
AUTHOR #
CHANGE .00
TOTAL NUMBER OF ITEMS SOLD = 3
10/31/14 14:49 2731 01 0223 3558

YOUR CASHIER TODAY WAS PETE

Your Savings

Savings	20.46
Total	20.46
Total Savings Value	46%

HOW WAS YOUR SHOPPING EXPERIENCE?
PLEASE SHARE YOUR THOUGHTS ONLINE:
safewaycanada.survey.marketforce.com

You've earned 2 Zwilling
Knife Program stamps

AIR MILES Reward Miles earned today:

Grocery Base Offer 1

TOTAL 1

LET US HEAR FROM YOU!
(800-723-3929 OR VISIT SAFEWAY.CA)

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Food purchased for community event.



***** DUPLICATE RECEIPT *****

Sobeys Forest Lawn

5115-17th Ave SE

403.248.8305

GST# 895588788RT0008

Served by: Steven

10% DISCOUNT

-\$4.61

Member card number: 840*****374

1.065 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$4.68 C
1.095 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$4.81 C
1.145 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$5.03 C
1.280 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$5.62 C
1.050 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$4.61 C
1.000 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$4.39 C
0.910 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$3.99 C
1.030 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$4.52 C
0.955 kg @ \$4.39 / kg	
Grapes Red Sdls 4023	\$4.19 C
0.980 kg @ \$4.39 / kg	
Grapes Red Sdls 4499	\$4.30 C

1 Reward for Every \$20

=> 2 AIR MILES

2 @ 1 each

SUBTOTAL \$41.53

TOTAL TAX \$0.00

TOTAL \$41.53

Master Card TENDER \$41.53

Cash CHANGE \$0.00

NUMBER OF ITEMS 10

Member card number: [REDACTED]

AIR MILES earned this visit [REDACTED]

AIR MILES Cash balance [REDACTED]

AIR MILES Dream balance [REDACTED]

You could have earned an additional

4 AIR MILES

with a BMO Sobeys AIR MILES MasterCard

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Bruce McAllister

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Lunch meeting to discuss constituent concerns.

#9

Thai Raman Restaurant
Bay 2 - 720 Centre Street, NE
Langdon, AB T0J 1X1
Phone (403)936-8424
Business # 820357978RT0001

Date: Dec 05, 2014 Time: 02:06PM
Server: Admin
Bill: 3486 Table : 9

2	2.SPRING ROLLS (4)	10.00
1	COFFEE	2.00
1	GREEN TEA	2.00
1	1.SATAY BEEF	8.00
1	27.DRUNKEN NOODLES	12.00
1	19.CASHEW CHICKEN MEDIUM	11.50
	SPICE	
	19.CASHEW CHICKEN	
1	STEAM RICE	2.00

Subtotal 47.50
GST 2.38

Total 49.88

Open Time : Dec 05, 2014 01:06PM

THANK YOU!!
YOUR COMMENTS APPRECIATED.

THAI RAMAN CUISINE
702 CENTRE ST NE
LANGDON, AB

Term ID: 05130427

Purchase

MASTERCARD

Entry Method: C

Amount:\$ 49.88

Tip: \$ 7.12

Total: \$ 57.00

2014/12/05

14:08:11

Seq #: 0011730090

Appr Code:

Resp Code: 01/027

MasterCard
A0000000041010
58 82 6F 8B 79 16 F6 E4
00 00 00 00 00
E8 00
D2 74 BE 1A 36 6C 16 86

APPROVED
Thank You

Verified By Pin

Merchant Copy

- IMPORTANT -
retain this copy for your records

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Melanie Scott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Lunch meeting with constituent to discuss concerns.

TRANSACTION RECORD

BOSTON PIZZA # 257
520-261055 CROSSLR T4A0G3
ROCKY VIEW AB
20120485
BH2012048515

**** PURCHASE ****

10-15-2014 12:56:51

Acct # *****

Account Chequing Card type DP

A0000002771010 Interac

Check # 26

Trace # 9

Inv. # 9

Operator 317

RRN 001119009

Purchase \$35.18

Tip \$5.28

Total \$40.46

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy



Boston Pizza # 257
CrossIron Mills
0026a Table 51 #Party 2
SAMANTHA H SvrCk: 6 12:12 10/15/14

N.S. POP 3.00
CHKN PECAN SALAD 15.25

Sub Total: 18.25

GST : 0.91

Guest 1 TOTAL: 19.16

WATER 0.00
CHKN PECAN SALAD 15.25

Sub Total: 15.25

GST : 0.77

Guest 2 TOTAL: 16.02

Sub Total: 33.50

GST : 1.68

10/15 12:53 TOTAL : 35.18

THANK YOU

GST # 805305851

PLEASE PAY SERVER

JOIN US FOR PASTA TUESDAY !

ALL MIX & MATCH \$6.95

TELL US HOW WE DID!

We value your feedback.

Complete a 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 and eligibility
please visit www.tellbostonpizza.com.

62722-00001-55111

Thank You!

Sam

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Melanie Scott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Office Refreshments

\$ 26.25 = hosting

ENTER FOR A CHANCE TO WIN 1 OF 3
\$1000 CDN WAL-MART GIFT CARDS

To enter, please complete a survey
about today's store visit at:

<http://survey.walmart.ca>

WE WANT TO KNOW HOW
WE'RE DOING!

No purchase necessary. Math skill
testing question required. Open to
Canadian residents of the age of
majority. Survey must be taken
within 2 weeks of today. Odds of
winning depend on the number of
eligible entries received. Full
rules available in store at
the customer service desk
and online at

<http://survey.walmart.ca>

Please retain this receipt for the
purposes of completing
the online survey

Your STORE CODE is: 1136

Your opinion counts
(Le sondage est également offert
en français).

Walmart 
Supercentre

SUPERCENTER
WE SELL
FOR LESS
255 E. HILLS BLVD SE
CALGARY, T2G 4V7

MASSIMO CHAI 006618898774 \$12.97 D

NESTLE 24	006827400014L	\$4.97 D
MULTI 33		
AB BEV CRF	000030635235	\$0.24 H
AB DEPOSIT	068113171083	\$2.40 H
NESTLE 24	006827400014L	\$4.97 D
MULTI 33		
AB BEV CRF	000030635235	\$0.24 H
AB DEPOSIT	068113171083	\$2.40 H

MULTI DISCOUNT

Nestle 24pk 2 for \$8 033L \$1.94-D

CHANGE DUE \$0.00
GST/HST 137466199 RT 0001 26.25
QST 1016551356 TQ 0001
GST 1.31
TRANSACTION RECORD PURCHASE 27.56

CHEQUING
RRN # 001001013

TERMINAL ID WMTAU201051
00 APPROVED-THANK YOU

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Melanie Scott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Office Refreshments

\$19.50 = hosting



ROCKY VIEW AB T4A0J6

COSTCO WHOLESALE #1076
300-293020 Crossiron Common
Rocky View, AB T4A0J6
MEMBER [REDACTED]

35500	KS WATR500**	2.19
	DEPOSIT	3.50
	ENVIRO FEE N	.35
35500	KS WATR500**	2.19
	DEPOSIT	3.50
	ENVIRO FEE N	.35
124298	ARROWHED 15L	3.39
	DEPOSIT	.25
	ENVIRO FEE N	.07
124298	ARROWHED 15L	3.39
	DEPOSIT	.25
	ENVIRO FEE N	.07

ACCT: CHEQUING

REFERENCE #: 66231218-0010010310 C

11/01/14 12:00:59

11/01/14 44023

COSTCO WHOLESALE #1076
300-293020 Crossiron Common
Rocky View, AB T4A0J6

PURCHASE - INTERAC

Interac

A0000002771010

0080008000 F800

00 APPROVED - THANK YOU 001

19.50

GST

0.98

20.48

1076 012 0000000104 0101

*** CARDHOLDER COPY ***

CHANGE

.00

TOTAL NUMBER OF ITEMS SOLD = 28

CASHIER: ROBBY K

REG# 12

11/01/14 12:01 1076 12 0101 104

GST# 121476329RT

** THANK YOU - PLEASE COME AGAIN **

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Bruce McAllister

Claimant Name: Melanie Scott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Office Refreshments

*15.94 = hosting

ENTER FOR A CHANCE TO WIN 1 OF 3
\$1000 CDN WAL-MART GIFT CARDS

To enter, please complete a survey
about today's store visit at:

<http://survey.walmart.ca>

WE WANT TO KNOW HOW
WE'RE DOING!

No purchase necessary. Math skill
testing question required. Open to
Canadian residents of the age of
majority. Survey must be taken
within 2 weeks of today. Odds of
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(Le sondage est également offert
en français).

Walmart 
Supercentre

SUPERCENTER
WE SELL
FOR LESS
255 E. HILLS BLVD SE
CALGARY, T2A 4X7

COFFEE- TAS 006020000102 \$7.97 H
COFFEE- TAS 006020000102 \$7.97 H

GST/HST 137466199 RT 0001
QST 1016551356 TQ 0001

TRANSACTION RECORD PURCHASE

TERMINAL ID WMTAU200891
00 APPROVED-THANK YOU

Interac
AID A00000002771010
TC B949A2F323C1381E
*PIN VERIFIED

11/02/14 14:30:58

ITEMS SOLD 24
TC# 2192 1284 8152 9301 9724 2



Getting ready to welcome a baby?
Create your registry at www.walmart.ca
11/02/14 14:31:03