#### LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2017-18

012 - Calgary-Fort - Ceci, Joe For Expenses Processed Oct 1 - Dec 31, 2017

	Budget	Used this Quarter	Used To-Date
Financial Reporting -\$ (Receipts attached)		10000000000	
Transportation Fuel and Minor Maintenance - \$ MLA Parking Cap - \$ Other Travel - Parking - \$ Member Travel (overnight stay in constituency) - \$ Taxi, Bus Travel - \$ Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ Member Travel (Meal Per Diems) - \$	\$900.00	\$23.81	\$65.53 \$23.81
Accommodation Edmonton Accommodation Allowance (\$23,160.00/yr max) Travel Accommodations Allowance Travel Accommodations Allowance (days; 10 max) - NF	\$23,160.00 10.0	\$4,300.00	\$12,100.00
Other Hosting - \$		\$75.56	\$514.50
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km) Constituency Travel (Kilometres) - NF Special Trips (5 trips per year) - NF	35,000.0 5.0		
Travel To and From the Capital Travel by Air, Bus or Train (Unlimited Trips) - NF Use of a Private Automobile (52 trips per year) - NF	52.0	1.0	1.0
Other Travel Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		

\$ - Reported on CAD dollar amount of actual expense NF - Reported based on number of trips, number of kilometres, or number of days Budget reported is the maximum annual amount that may be claimed

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

## The American Express® Corporate Card Statement of Account

www.americanexpress.ca Amex Bank of Canada

Prepared For JOE CECI November 16, 2017

Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6



LEGIS ASSEMBLY OF AB				
Previous Balance Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$	1784	Page 1 of 2
		Transport		
Statement includes payments and charges received by	November 16, 2017			
Please see "About Your Statement" section	on for important information.			
Please pay your balance in ful	ll upon receipt of stat	ement. Thank	you for your ongoing membership.	
Credit Limit Summary On November 16, 2017	Total Cred	dit Limit \$	Available Credit Limit \$	
New Transactions for JOE CE	ECI		<u>.</u>	Amount \$
November 7 3CPAYMENT*EDM	MONTON R EDMONTON			25.00

Other Travel - Parking: \$23.81

† Please detach here †

## AMERICAN EXPRESS®

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

Goods or Services Total New Transactions for JOE CECI

· Phone and Internet banking arranged through your financial institution

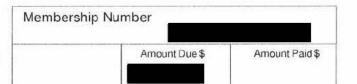
Your local bank branch

Automatic banking machines
 Do Not Enclose Cash

000144



JOE CECI LEGIS ASSEMBLY OF AB 4TH FLR 9820 107 ST **EDMONTON AB** T5K 1E9



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





## Members' Temporary Accommodation Allowance Claim Form



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

Member Name: Ceci, Joe	Constituenc	cy: Calgary-Fort
Employee #:	Date: 4/	1/2017
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claime	ed Annually
Temporary Residence Accommodation Allowance in Maximum of \$23,160 per fiscal year.  Fiscal Year: 2017-2018	Edmonton - Claimed Annually	
Have you provided documents evidencing your Temp Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please atta		No
Monthly Amount (maximum \$1,930 or less)	<b>\$</b> 1,300.00	x 12 = \$ 15,600.00
Please Note: The Member is responsible for retaining	all records which support the a	nnual amount identified above.
Claim Payment Authorization (please check)	✓ 12 Monthly Paymen	ts
\		nly payments in the amount specified above for the nis monthly amount is static for the entire fiscal year.

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

#### October 2017

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

Member Signature



## Members' Temporary Accommodation Allowance Claim Form

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

Member Name: Ceci, Joe	Constituency: Calgary-Fort
Employee #:	Date: 4/1/2017
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in Maximum of \$23,160 per fiscal year.  Fiscal Year: 2017-2018	n Edmonton - Claimed Annually
Have you provided documents evidencing your Tem Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please at	
Monthly Amount (maximum \$1,930 or less)	\$ 1,300.00
Please Note: The Member is responsible for retaining	g all records which support the annual amount identified above.
Claim Payment Authorization (please check)	✓ 12 Monthly Payments

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

#### **NOVEMBER 2017**

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

Member Signature



CALGARY FORT

## Members' Temporary Accommodation Allowance Claim Form

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

Member Name: Ceci, Joe	Constituency: Calgary-Fort
Employee #:	Date: 12/14/2017
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in Maximum of \$23,160 per fiscal year.	t Edmonton - Claimed Annually
Fiscal Year: 2017-2018	
Have you provided documents evidencing your Tem Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please att	
Monthly Amount (maximum \$1,930 or less)	\$ 1,500.00
	all records which support the annual amount identified above.
Claim Payment Authorization (please check)	Effective November 1, 2017  (5) Lauthorize monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

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

#### November 2017

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

Dec 15 2017

Member Signature

Updated April 2016



## Members' Temporary Accommodation Allowance Claim Form

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

Member Name: Ceci, Joe	Constituency: Calgary-Fort
Employee #:	Date: 12/14/2017
Claim Type: Temporary Residence Accommodation Allo	owance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in Education and Section 23, 160 per fiscal year.	Imonton - Claimed Annually
Fiscal Year: 2017-2018	The state of the s
Have you provided documents evidencing your Tempor. Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.	n. 🗸 Yes 🗌 No
Monthly Amount (maximum \$1,930 or less)	\$ 1,500.00 x 5 = \$7500.00
Please Note: The Member is responsible for retaining all	records which support the annual amount identified above.
Claim Payment Authorization (please check)	Effective November 1, 2017
	(5) I authorize monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

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

#### December 2017

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

Member Signature

Dec 15 2017



Updated April 2016

## LEGISLATIVE ASSEMBLY OF ALBERTA Personal Expense Claim Receipt Description

Member Name: Joe Ceci, Calgary-Fort	
Claimant Name: Laura Conrad	
Expense Category: Hosting	
For hosting, select one:	
Individual Stakeholder(s)	
☐ Group:	.56+GST
Purpose:	
Purchased coffee to hand out to constituents at loo for outreach and engagement purposes.	cal train station

# Tim Hortons.

TH # 107286 4710 - 17th Ave. SE, Calgary AB, T2A 0V1 (403)-207-0164

Take Out	
4 Take 12 Original Blend	\$75.56
2 Hilk	
Subtotal:	
GST:	-
Total Tax:	
Grand Total:	Vones de la composition della
Visa:	tion for the
Change Due :	
Order #:324	185
Cachier: SUIET 2	

GST/HST #: 782794523 RT0001 10-23-2017 06:21:34 AM Receipt #:31435373 Order ID:315098703

Card Entry: CHIP Sequence: 000051 Trans Type:Purchase Tern #: 203 REF #: 00000051 Application Label: Visa Credit AID #: A0000000031010 TUR #: 0080008000 TSI #: F800 Approved

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

Guest Copy