

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2018-19
012 - Calgary-Fort - Ceci, Joe
For Expenses Processed Oct 1 - Dec 31 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00	\$52.61	\$108.89
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			\$22.71
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$			
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$4,500.00	\$13,500.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$188.98	\$188.98
Event Tickets Disclosable - \$			
Non-Financial Reporting			

Use of Private Automobile (43.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.0		
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0		
Special Trips (5 trips per year) - NF	5.0		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52.0		
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		

\$ - Reported on CAD dollar amount of actual expense

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

Budget reported is the maximum annual amount that may be claimed

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

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Joe Ceci

Claimant Name: Joe Ceci

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking
$\$2.38 + \text{GST}$

Plate: 

Zone: **3103**

Pay for your parking online: www.park.ca

Valid through:

THURSDAY
23 AUG 18
4:45 PM

START TIME: 8/23/2018 3:30 PM
AMOUNT PAID: \$2.50 (GST incl.)

Trm No: 835e5887e92b065e
Terminal: 1348

Receipt No: 7870

Personal cc

CALGARY PARKING AUTHORITY (403) 537-7000

CALGARY

Pay to

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Joe Ceci

Claimant Name: Joe Ceci

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking

$\$11.90 + \text{GST}$

THIS IS YOUR
RECEIPT



THIS IS YOUR
RECEIPT



THIS IS YOUR
RECEIPT



THIS IS YOUR
RECEIPT



Terminal: 1B_CWT

Plate: [REDACTED]

Valid through:

THURSDAY 20 SEP18

9:24 PM

AMOUNT PAID: \$12.50 RECEIPT NO: 10079

ENTRY TIME: 9/20/2018 6:54 PM

TAN: D37686F7614E6E8A

*Personal
cc*

02101986

GST# CA 108102864

Terminal: 1B_CWT

Plate: [REDACTED]

VALID THROUGH:

20SEP18

9:24 PM

AMOUNT PAID:

\$12.50

ENTRY TIME:

9/20/2018

6:54 PM

RECEIPT NO: 10079

02101987

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Joe Ceci

Claimant Name: Joe Ceci

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)


☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking
$\$2.62 + GST$

for your parking online: www.parkplus.ca

Plate: 
Zone: **1242**

Valid through:

SATURDAY
29 SEP 18
1:08 PM

START TIME: 9/29/2018 11:34 AM
AMOUNT PAID: \$2.75 (GST incl.)

Trn No: 2ed2024396d9adde
Terminal: 1180

Receipt No: 13642

Pay for your parking on

Personal cc

Y PARKING AUTHORITY (403) 537-7000

CALGARY PARKING AUT



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
JOE CECI
LEGIS ASSEMBLY OF AB

Membership Number

Date
October 16, 2018

Page 1 of 2

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

Statement includes payments and charges received by October 16, 2018

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

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

Credit Limit Summary On October 16, 2018

Total Credit Limit \$

Available Credit Limit \$

New Transactions for JOE CECI

Amount \$

October 3	IMPARK00030080U	CALGARY	16.80
	Goods or Services		

Total New Transactions for JOE CECI	16.80
--	--------------

MLA Parking Cap = \$16.00 plus GST

↑ Please detach here ↑

AMERICAN EXPRESS®

Payment Options

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

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

Do Not Enclose Cash

Membership Number

Amount Due \$

Amount Paid \$

000128



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



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Joe Ceci

Claimant Name: Joe Ceci

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking
$\$5.71 + \text{GST}$

your parking online: www.parkplus.ca

Plate: [REDACTED]
Zone: **1363**

Valid through:

TUESDAY
02 OCT 18
12:32 PM

START TIME: 10/2/2018 11:17 AM
AMOUNT PAID: \$6.00 (GST Incl.)

Trm No: 909aab89042482dc
Terminal: 1154
Receipt No: 6770

Pay for your parking online

Personal cc

PARKING AUTHORITY (403) 537-7000

CALGARY PARKING AUTH



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
JOE CECI
LEGIS ASSEMBLY OF AB

Membership Number [REDACTED] Date
November 16, 2018

Page 1 of 2

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

Statement includes payments and charges received by November 16, 2018

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

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

Credit Limit Summary On November 16, 2018

Total Credit Limit \$ [REDACTED]

Available Credit Limit \$ [REDACTED]

Listing of Charges and Credits

Amount \$

November 9 Payment Received Thank You [REDACTED]

New Transactions for JOE CECI

Amount \$

November 15 IMPARK00030176U CALGARY
Goods or Services

14.70

Total New Transactions for JOE CECI

14.70

MLA Parking Cap = \$14 plus GST

[REDACTED] /SEL/

↑ Please detach here ↑

AMERICAN EXPRESS®

Payment Options

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

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- Automatic banking machines

Do Not Enclose Cash



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

000131

Membership Number [REDACTED]

Amount Due \$ [REDACTED]

Amount Paid \$

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

Constituency: Calgary-Fort

Employee #: [REDACTED]

Date: 4/30/2018

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2018-2019

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,500.00

x 12 = \$ 18,000.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 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.

October 2018

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

Updated March 2018



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☒ Yes

☐ No

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November 2018

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Updated March 2018



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Fiscal Year: 2018-2019

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☒ Yes

☐ No

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\$ 1,500.00

x 12 = \$ 18,000.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

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☒ 12 Monthly Payments

I authorize 12 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 2018

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

Updated March 2018

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Joe Ceci

Claimant Name: Lisa Hari

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Anti-Racism Community Conversation

Samosa Factory

135-55 Westwinds Cres NE

1(403)-568-1447

GST #848411617RT0001

Check: 309460

Server: Paven

Customer:

Phone:

10/04/18

03:56pm

—[Seat 1]—

3 FRD SM VEG \$42.00

! [Calgary.For]

! [t@assembly.]

! [ab.ca]

3 FRD SM BEEF \$51.00

! [Calgary.For]

! [t@assembly.]

! [ab.ca]

3 FRD SM CH \$51.00

! [Calgary.For]

! [t@assembly.]

! [ab.ca]

Subtotal: \$144.00

GST: \$7.20

Sub w/Tax: \$151.20

Total: **\$151.20**

Visa \$151.20

Visit Us At:

www.samosafactory.ca

(403)568-1447

BEST SAMOSA'S IN TOWN

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Joe Ceci

Claimant Name: Lisa Hari

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Anti-Racism Community Conversation



Sobeys Forest Lawn
5115-17th Ave SE
403.248.8305
GST# 895588788RT0008

Served by: FASTLANE 21

PRODUCE

Fruit Tray	\$24.99 GC
Tray Veg Lrg	\$19.99 GC

SUBTOTAL \$44.98

5% GST \$2.25

TOTAL \$47.23

Visa TENDER \$47.23

Cash CHANGE \$0.00

NUMBER OF ITEMS 2

AIR MILES

LET US REWARD YOU

Air Miles you could have earned
this visit: 2

Enroll today, visit www.airmiles.ca

CLIENT ID 9803

TERMINAL ID 021

** PURCHASE

CARD NO. [REDACTED]

NO. [REDACTED]

DATE 10/04/2018

AUTH [REDACTED]

APPL. Visa Credit

AID A0000000031010

TVR 0000000000

TAPPED

** \$ 47.23

RCPT 4942000

RESP 000

TIME 16:34:53

REF # 00000070

TSI

APPROVED

NO SIGNATURE REQUIRED

I AGREE TO PAY THE ABOVE TOTAL AMOUNT
ACCORDING TO THE CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

Term	Tran	Store	Oper	10/04/18
21	4942	1713	121	16:34:54