

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2018-19
015 - Calgary-Hawkwood - Connolly, Michael
For Expenses Processed Jan. 1 - Mar 31, 2019

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$1,327.84	\$3,818.98
MLA Parking Cap - \$	\$900.00	\$88.90	\$448.10
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$225.94	\$502.91
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			\$561.73
Member Travel (Meal Per Diems) - \$		\$494.62	\$3,651.43
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,042.90	\$22,412.90
Travel Accommodations Allowance			\$832.66
Travel Accommodations Allowance (days; 10 max) - NF	10.0		5.0
Other			
Hosting - \$		\$15.80	\$1,115.97
Event Tickets Disclosable - \$			\$207.00
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.0	1,434.0	6,437.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0	1,434.0	6,437.0
Special Trips (5 trips per year) - NF	5.0		4.0
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			0.5
Use of a Private Automobile (52 trips per year) - NF	52.0	5.0	20.5
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

Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 135 OF 235
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-15-M CONNOLLY

CLIENT NO.
NO DU CLIENT
NVOICE DATE 01/01/19
DATE DE LA FACTURE
NVOICE NO. 0007336223
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	CONNOLLY			0136552	000518432695 12/01/18	IMPERIAL OIL CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH CAR WASH GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	41.0 .96 1.0 13.99	37.50 13.99	1.88 2.58 2.58 54.07 54.07	
				0136065	000518432694 11/30/18	IMPERIAL OIL EDMONTON	AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	35.1 .94	31.43	1.57 1.57 33.00 33.00	
				0135621	000518593008 11/24/18	PETRO CANADA CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	42.2 1.02	40.95	2.05 2.05 43.00 43.00	
				0135321	000518432693 11/22/18	IMPERIAL OIL EDMONTON	AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	33.6 1.07	34.30	1.71 1.71 36.01 36.01	
				0134755	000518593007 11/18/18	PETRO CANADA CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	35.8 1.09	37.16	1.86 1.86 39.02 39.02	
				0134520	120016188315 11/15/18	MINIT LUBE CALGARY	AB	LUBRICATE-CHANGE OIL & FILTER GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0 109.44	109.44	5.47 5.47 114.91 114.91	
				0134339	000518432692 11/14/18	IMPERIAL OIL CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.3 1.04	38.10	1.90 1.90 40.00 40.00	
				0133894	000518432691 11/11/18	IMPERIAL OIL EDMONTON	AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	36.9 1.03	36.24	1.81 1.81 38.05 38.05	
				UNIT TOTAL / TOT UNITE				FUEL QTY / QTE CARB	262.9			

****Marine fuel is actually vehicle fuel****

BLE871

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

FLEET MANAGEMENT SERVICES DETAIL
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 136 OF 235
 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-15-M CONNOLLY - - - - - - - -

CLIENT NO. NO DU CLIENT	
NVOICE DATE DATE DE LA FACTURE	01/01/19
NVOICE NO. NO DE LA FACTURE	0007336223

UNIT NO ----- NO. D'UNITE	DRIVER NAME DRIVER ID. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. ----- NO. DE SERIE	CARD NO. ----- NO. DE CARTE	KM AUTHORIZE ----- KM AUTORISE	REFERENCE NO ACTIVITY DATE ----- NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION ----- NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION ----- DESCR PTION DES FRAIS	QTY ----- QTE	UNIT COST ----- COUT UNIT	EXTENDED PRICE ----- TOTAL	GST-HST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE ----- MONTANT TOTAL DU
	CONNOLLY						TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE		379.11	18.95		398.06
	BKDN TOTALS / TOTALS CODIFICATION 01-15		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	262.9	379.11	18.95		
							BKDN TOTALS / TOTALS COD FICATION					398.06

Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 123 OF 215
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-15-M CONNOLLY
- -
- -
- -
- -

CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
INVOICE DATE 02/01/19
DATE DE LA FACTURE
INVOICE NO. 0007379415
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	CONNOLLY			0139475	000521133151 01/11/19	PETRO CANADA CALGARY	AB UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	43.2	.95	39.05	1.95 1.95	41.00 41.00
				0138523	000521133150 01/02/19	PETRO CANADA CALGARY	AB UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	29.7	.89	25.30	1.26 1.26	26.56 26.56
				0138237	000520643412 12/27/18	IMPERIAL OIL CALGARY	AB UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	37.8	.90	32.38	1.62 1.62	34.00 34.00
				0137821	000520643411 12/16/18	IMPERIAL OIL CALGARY	AB UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	36.4	.96	33.33	1.67 1.67	35.00 35.00
				0137376	000520643410 12/12/18	IMPERIAL OIL CALGARY	AB UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	42.5	.93	37.62	1.88 1.88	39.50 39.50
	Marine fuel is actually vehicle fuel			0136914	000520643409 12/11/18	IMPERIAL OIL EDMONTON	AB MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	31.2	.93	27.62	1.38 1.38	29.00 29.00
				UNIT TOTAL / TOT UNITE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	220.8		195.30	9.76	205.06
	BKDN TOTALS / TOTAUX CODIFICATION 01-15			UNITS / VEHIC 1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	220.8		195.30	9.76	
							BKDN TOTALS / TOTAUX CODIFICATION					205.06

BLE871

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

Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 126 OF 223
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-15-M CONNOLLY
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
NVOICE DATE 03/01/19
DATE DE LA FACTURE
NVOICE NO. 0007423305
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	CONNOLLY			0143733	000523682544 02/02/19	PETRO CANADA CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	39.5	1.04	39.06	1.95 1.95	41.01 41.01
				000524019857	HUSKY OIL 01/25/19	CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	43.7	.94	39.12	1.90 1.90	41.02 41.02 .44- 40.58
				0143765	000523886733 01/24/19	IMPERIAL OIL EDMONTON AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	34.8	.92	30.50	1.52 1.52	32.02 32.02
				0142385	000523886732 01/23/19	IMPERIAL OIL CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	42.2	1.03	41.44	2.07 2.07	43.51 43.51
				0141927	000523886731 01/21/19	IMPERIAL OIL EDMONTON AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	27.9	.86	22.86	1.14 1.14	24.00 24.00
				000522034490	FEDERATED COOPERATIVES LIMITED 01/20/19	CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	40.2	.87	33.34	1.67 1.67	35.01 35.01
				0141144	000523886730 01/15/19	IMPERIAL OIL CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	40.2	.87	33.33	1.67 1.67	35.00 35.00
				0138597	000523886729 01/07/19	IMPERIAL OIL CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH CAR WASH GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	33.5 1.0	.90 13.99	28.58 13.99	1.43 .70 2.13	44.70 44.70

** Marine fuel is actually vehicle fuel**

BLE871

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

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 127 OF 223
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-15-M CONNOLLY
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
INVOICE DATE 03/01/19
DATE DE LA FACTURE
INVOICE NO. 0007423305
NO DE LA FACTURE

UNIT NO ----- NO. D'UNITE	DRIVER NAME DRIVER ID. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. ----- NO. DE SERIE	CARD NO. ----- NO. DE CARTE	KM AUTHORIZE ----- KM AUTORISE	REFERENCE NO ACTIVITY DATE ----- NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION ----- NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION ----- DESCRPTION DES FRAIS	QTY ----- QTE	UNIT COST ----- COUT UNIT	EXTENDED PRICE ----- TOTAL	GST-HST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE ----- MONTANT TOTAL DU
	CONNOLLY				/ TOT UNITE		FUEL QTY / QTE CARB 302.0 TOT CHARGES / TOT FRAIS 282.22 TOT GST-HST / TOT TPS-TVH 14.05 UNIT TOTAL / TOT UNITE 296.27 DISCOUNT / RABAIS .44- TOTAL / TOTAL 295.83					
BKDN TOTALS / TOTAUX CODIFICATION 01-15 UNITS / VEHIC 1							FUEL QTY / QTE CARB 302.0 TOT CHARGES / TOT FRAIS 282.22 GST-HST/TPS-TVH 14.05					
							BKDN TOTALS / TOTAUX CODIFICATION 296.27 DISCOUNT / RABAIS .44- TOTAL / TOTAL 295.83					

Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 120 OF 209
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-15-M CONNOLLY

CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
INVOICE DATE 04/01/19
DATE DE LA FACTURE
INVOICE NO. 0007468371
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	CONNOLLY			0149317 PT08904	120016545218 03/18/19	JEFFY LUBE #1007 EDMONTON	AB	LABOR - SYNTHETIC OIL CHANGE/ GST-HST / TPS-TVH DISPOSAL FEES/DISPOSAL FEE//D REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0 1.0	149.97 6.99	149.97 6.99	7.85 7.85 156.96 7.85 164.81 164.81
				0148329	000526247313 03/13/19	PETRO CANADA CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	19.8	1.11	20.95	1.05 1.05 22.00 22.00
				0147189	000526247312 03/07/19	PETRO CANADA CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	39.4	1.12	41.98	2.10 2.10 44.08 44.08
				0146727	000526442524 02/23/19	IMPERIAL OIL CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	33.7	1.04	33.39	1.67 1.67 35.06 35.06
				0146326	000526442523 02/20/19	IMPERIAL OIL CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.4	.99	36.19	1.81 1.81 38.00 38.00
				0145889	000526442522 02/19/19	IMPERIAL OIL EDMONTON	AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	27.1	.96	24.80	1.24 1.24 26.04 26.04
				0145556	000526442521 02/18/19	IMPERIAL OIL CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	20.3	.99	19.21	.96 .96 20.17 20.17
				0145324	000526247311 02/16/19	PETRO CANADA CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	44.5	.99	41.91	2.10 2.10 44.01 44.01
** Marine fuel is actually vehicle fuel**												
				0144902	000526442520 02/14/19	IMPERIAL OIL EDMONTON	AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH	29.1	.96	26.67	1.33

BLE871

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

FLEET MANAGEMENT SERVICES DETAIL
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 121 OF 209
 DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-15-M CONNOLLY - - - - - - - -

CLIENT NO.	
NO DU CLIENT	
NVOICE DATE	04/01/19
DATE DE LA FACTURE	
NVOICE NO.	0007468371
NO DE LA FACTURE	

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	CONNOLLY						REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL			1.33 26.67	1.33	28.00 28.00
				0144521	000526442519	IMPERIAL OIL 02/13/19 CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	39.7 .96	36.26	1.81 1.81	38.07 38.07
				0144023	000526442518	IMPERIAL OIL 02/08/19 CALGARY	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	37.6 .93	33.33	1.67 1.67	35.00 35.00
	UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	329.6	471.65	23.59	495.24
BKDN TOTALS / TOTAUX CODIFICATION 01-15				UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	329.6	471.65	23.59	
								BKDN TOTALS / TOTAUX CODIFICATION				495.24

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = \$9.52 plus GST

THIS IS YOUR RECEIPT
P
THIS IS YOUR RECEIPT
P
THIS IS YOUR RECEIPT
P
THIS IS YOUR RECEIPT
P
THIS IS YOUR RECEIPT
P

Parking stall expires when vehicle vacates stall or at 23:59 No Over Night Parking

Terminal: Art-10_CWT
Space: [REDACTED]

Valid through:
THURSDAY 17 JAN19
11:59 PM

AMOUNT PAID: \$10.00 RECEIPT NO: 10355
ENTRY TIME: 1/17/2019 4:55 PM

AUTH: [REDACTED]
TRN: 1AC4DABD86562BE3

VALID THROUGH:
17JAN19
11:59 PM

AMOUNT PAID:
\$10.00
ENTRY TIME:
1/17/2019
4:55 PM
RECEIPT NO:10355

01776695

4

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = \$5.71 plus GST

Pay for your parking online: www.parkplus.ca

Plate: [REDACTED]
Zone: Main Parkade Zone 9036

Valid through:

SATURDAY
19 JAN 19
6:00 PM

START TIME: 1/19/2019 10:59 AM
AMOUNT PAID: \$6.00 (GST incl.)

Auth No: [REDACTED]
Trn No: 44807927f245bc5f
Terminal: 877
Receipt No: 8142

CALGARY PARKING AUTHORITY (403) 537-7000

C/

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = \$27.62 plus GST

Hyatt Regency
Calgary

Hyatt Regency Parking Calgary

DATE :01/22/19

TIME :09:39: AM

Receipt No. 1/2118/184

* Original *

Ticket - 46696

Entry - 01/22/19 08:18 AM

TAX included 29.00

Payment 29.00

Ticket : [REDACTED]

Confirm : [REDACTED]

GST# 859734659 RT000Z

Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = \$22.86 plus GST

Pay for your parking online: www.parkplus.ca

Plate: [REDACTED]
Zone: Lot 28

Valid through:

WEDNESDAY
30 JAN 19
6:00 PM

START TIME: 1/30/2019 9:14 AM
AMOUNT PAID: \$24.00 (GST incl.)

Auth No: [REDACTED]
Trn No: aa986ccbe9f0457b
Terminal: 857
Receipt No: 5032

LGARY PARKING AUTHORITY (403) 537-7000

CALGA

Pa

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = \$1.90 plus GST

37-7000

CALGARY PARKING AUTHORITY (403)

Terminal: 605

Zone: 9055

Plate: [REDACTED]

Valid through:

SATURDAY 26 JAN 19
6:00 AM

AMOUNT PAID: \$2.00 (GST incl.)

Auth No: [REDACTED]

Start Time: 1/25/2019 5:31 PM

Receipt No: 20480

Pay for your parking online: www.parkpl

Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = 22.86 plus GST

Plate: [REDACTED]
Zone: Lot 28

Valid through:

THURSDAY
31 JAN 19
6:00 PM

Pay for your parking online: www.parkplus.ca

START TIME: 1/31/2019 9:39 AM
AMOUNT PAID: \$24.00 (GST incl.)

Auth No: [REDACTED]
Trn No: 102f94a926812e4d
Terminal: 857
Receipt No: 5060

7000

CALGARY PARKING AUTHORITY (403) 537-7000

Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

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

Purpose:

MLA Parking Cap = \$ 3.81 plus GST

parking online: www.parkplus.ca

Plate: [REDACTED]
Zone: **9078**

Valid through:

TUESDAY
05 FEB 19
6:00 AM

START TIME: 2/4/2019 6:52 PM
AMOUNT PAID: \$4.00 (GST Incl.)

Auth No: [REDACTED]
Trn No: 5506779ce07b82dd
Terminal: 1028
Receipt No: 18924

Pay for your parking online: w

PARKING AUTHORITY (403) 537-7000

CALGARY PARKING AUTHOR

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = \$9.52 plus GST

THIS IS YOUR
RECEIPT

THIS IS YOUR
RECEIPT

THIS IS YOUR
RECEIPT

THIS IS YOUR
RECEIPT

Parking stall expires when vehicle vacates
stall or at 23:59 No Over Night Parking

Terminal: Art-11_CWT

Space: 1831

Valid through:

WEDNESDAY 06 FEB19

11:59 PM

AMOUNT PAID: \$10.00 RECEIPT NO: 15061

ENTRY TIME: 2/6/2019 9:50 AM

AUTH: [REDACTED]

TRN: 4ABD964FA1AD1668

GST# CA 108102864

02189562

ART-11_CWT
SPACE: 1831

VALID THROUGH:

06FEB19

11:59 PM

AMOUNT PAID:

\$10.00

ENTRY TIME:

2/6/2019

9:50 AM

RECEIPT NO: 15061

GST# CA 10

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA Parking Cap = \$4.15 plus GST

e: www.parkplus.ca

Plate: 
Zone: **3686**

Valid through:

TUESDAY
05 MAR 19
1:30 PM

Pay for your parking online: www.parkplus.ca

START TIME: 3/5/2019 11:55 AM

AMOUNT PAID: \$4.36 (GST Incl.)

Auth No: 

Trn No: b585139da2cedca4

Terminal: 1401

Receipt No: 1447

ORITY (403) 537-7000

CALGARY PARKING AUTHORITY (403) 537-

Michael Connolly, MLA Calgary-Hawkwood

The category MLA Parking Cap has been reduced by \$19.05 to reflect a repayment of a prior expense from Q3.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Taxi, Bus = \$42.64 plus GST

316 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

TERMINAL ID: 314-661-487
MERCHANT ID: 432765JE
VEHICLE ID: 1138
DRIVER ID: 2857
GST ACCOUNT #: 872011531
TRIP NUMBER: 18957621
PASSENGERS: 1

01/31/2019
START: 01:05
DISTANCE: 196.00
END: 01:22
RATE: 1

FARE AMOUNT: \$ 35.24

TAX AMOUNT: \$ 1.76
TIP AMOUNT: \$ 7.40

TOTAL : \$ 44.40

VISA SALE :

APPROVAL NUMBER :

PASSENGER COPY

THANK YOU
(403)299-9999
WWW.THECHECKERGROUP.COM

CHECKER
YELLOW
CABS

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Taxi, Bus = \$43.10 plus GST

316 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

TERMINAL ID: 314-651-529
MERCHANT ID: 432/65ZX
VEHICLE ID: 1630
DRIVER ID: 7733
GST ACCOUNT #: 824945497
TRIP NUMBER: 18946764
PASSENGERS: 1

01/30/2019
START: 00:20 END: 00:39
DISTANCE: 197.00 RATE: 1

FARE AMOUNT: \$ 35.62

TAX AMOUNT: \$ 1.78
TIP AMOUNT: \$ 7.48

TOTAL : \$ 44.88

VISA SALE : [REDACTED]

APPROVAL NUMBER : [REDACTED]

PASSENGER COPY

THANK YOU
(403)299-9999
WWW.THECHECKERGROUP.COM



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Taxi, Bus = \$49.09 plus GST

316 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

TERMINAL ID: 314-651-471
MERCHANT ID: 432765KF
VEHICLE ID: 0650
DRIVER ID: 8928
GST ACCOUNT #: 816858005
TRIP NUMBER: 18954640
PASSENGERS: 1

01/30/2019
START: 18:39
DISTANCE: 218.00
END: 18:39
RATE: 0

FARE AMOUNT: \$ 40.57

TAX AMOUNT: \$ 2.03
TIP AMOUNT: \$ 8.52

TOTAL : \$ 51.12

VISA SALE :

APPROVAL NUMBER :

PASSENGER COPY

THANK YOU
(403)299-9999
WWW.THECHECKERGROUP.COM

CHECKER
YELLOW
CABS

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Taxi, Bus = \$47.24 plus GST

CHECKER/YELLOW CAB
316 MERIDIAN ROAD SE
CALGARY, AB T2A 1X2

Merchant ID: 432765KF

Driver ID: 8928

Record Num.: 0002

Sale

ATU: [REDACTED]

VISA

Entry Method: Chip

Amount: \$ 41.00

Tip: \$ 8.19

Total: CAD\$ 49.19

2019/01/29

17:13:55

Resp Code: 00

TVR: 8800000000

TSI: 7800

Auth Code: [REDACTED]

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Michael Connolly

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Taxi, Bus = \$43.87 plus GST

316 MERIDIAN ROAD SE
CALGARY, AB T2A 1K2

314-652-080
C0000002

TERMINAL ID: 5476
MERCHANT ID: 896480308
VEHICLE ID: 18491964
DRIVER ID: 1
GST ACCOUNT #: 1
TRIP NUMBER: 1
PASSENGERS: 1

12-17-2018
START: 08:01
END: 08:21
DISTANCE: 249.00
RATE: 1

FARE AMOUNT: \$ 37.90

TAX AMOUNT: \$ 1.90
TIP AMOUNT: \$ 5.97

TOTAL : \$ 45.77

VISA SALE : [REDACTED]

APPROVAL NUMBER : [REDACTED]

PASSENGER COPY

THANK YOU
(403) 299-9999
WWW.THECHECKERGROUP.COM

CHECKER
YELLOW
CABS



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: Connolly, Michael

Constituency: Calgary-Hawkwood

For the Month of: December

Year: 2018

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
3	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
4	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
10	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
11	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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			<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						\$178.05	\$8.90	\$186.95

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

Jan. 15, 2019



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: Connolly, Michael

Constituency: Calgary-Hawkwood

For the Month of: January

Year: 2019

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	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			<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						\$118.71	\$5.94	\$124.65

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

March 20, 2019
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: Connolly, Michael

Constituency: Calgary-Hawkwood

For the Month of: February

Year: 2019

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	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						\$79.14	\$3.96	\$83.10

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

March 20, 2019
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: Connolly, Michael

Constituency: Calgary-Hawkwood

For the Month of: March

Year: 2019

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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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						\$197.86	\$9.89	\$207.75

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

March 20, 2019
Date

Michael Connolly, MLA Calgary-Hawkwood

The category Meal Per Diems has been reduced by \$79.14 to reflect a repayment of a prior expense from Q3.



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: Connolly, Michael

Constituency: Calgary-Hawkwood

Employee #:

Date: 4/16/2018

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)

\$ 1,930.00

x 12 = \$ 23,160.00

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.

January 2019

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



Members' Temporary Accommodation Allowance Claim Form Claimed by Month

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

Member Name: Connolly, Michael

Constituency: Calgary-Hawkwood

Employee #:

Date: February 28, 2019

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month	Year	Monthly Claim Amount
February	2019	1,930.00
	Grand Total	\$1,930.00

Please Note:

- (1) The Member is responsible for retaining all records that support the payment identified above.
- (2) The Member must advise the Clerk in writing of any changes to the Member's permanent or temporary residence at the time it occurs.

- ☒ I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to FMAS or attached them here.
- ☒ Pursuant to section 6.1 of the *Members' Allowance Order* [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.
- ☒ I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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

Member Signature

Updated June 2018





Members' Temporary Accommodation Allowance Claim Form - Claimed by Month

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

Member Name: Connolly, Michael

Constituency: Calgary-Hawkwood

Employee #:

Date: March 20, 2019

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month	Year	Monthly Claim Amount
March	2019	1,182.90
	Grand Total	\$1,182.90

Please Note:

(1) The Member is responsible for retaining all records that support the payment identified above.

(2) The Member must advise the Clerk in writing of any changes to the Member's permanent or temporary residence at the time it occurs.

- ☒ I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to FMAS or attached them here.
- ☒ Pursuant to section 6.1 of the *Members' Allowance Order* [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.
- ☒ I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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

Member Signature

Updated June 2018



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Michael Connolly

Claimant Name: Joseph Heenan

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

To provide constituents water when they have meetings with the MLA or casework appointments that require them to come into the office.

Hosting = \$15.80 plus GST

WING'S
FOOD STORE
1-735 RANCHLANDS BLVD NW
CALGARY, AB T3G3A9
GST# : 748260726RT0001
TEL/FAX : 403-241-1140/403-241-1140
TERMINAL ID : 01
TRANSACTION NO : 201812170009

1 * 3.99 EA UNIT PRICE	
HEINZ KETCHUP 375	3.99T
1 * 3.95 EA UNIT PRICE	
SRIRACHA 266ML	3.95T
6 * 1.20 EA UNIT PRICE	
NESTLE 500ML	7.20
6 X 0.10 UNIT BOTTLE DEPOSIT	0.60
6 X 0.01 UNIT RECYCLE FEE	0.06 T

THANK YOU ! SEE YOU AGAIN.
2018 12 17 Monday at 10:31 AM Tammy (

WING'S FOOD STORE
735 RANCHLANDS BLV T3G3A9
CALGARY AB
23271254
GA2327125401

**** PURCHASE ****

12-17-2018 10:28:59
Acct # [REDACTED] RF
Card Type DP
A0000002771010 INTERAC

Trace # 3823
Inv. # 4110
Auth # [REDACTED] RRN 001402006
TVR 8000008000

Total \$16.20

(001) APPROVED-THANK YOU

Retain this copy for your
records
Merchant copy