

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2016-17  
017 - Calgary-Klein - Coolahan, Craig  
For Expenses Processed Oct 1 - Dec 31, 2016

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$218.89	\$625.42
MLA Parking Cap - \$	\$900.00	\$91.73	\$139.83
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$2,212.72	\$4,319.09
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$66.72	\$310.74
Member Travel (Meal Per Diems) - \$		\$1,705.96	\$3,354.91
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$17,532.79
Travel Accommodations Allowance			\$125.08
Travel Accommodations Allowance (days; 10 max) - NF	10.0		1.0
<b>Other</b>			
Hosting - \$		\$3,665.06	\$4,280.59
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (43.5 cents per km)</b>			
Constituency Travel (Kilometres) - NF	35,000.0		
Special Trips (5 trips per year) - NF	5.0	2.0	2.0
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF		8.0	15.0
Use of a Private Automobile (52 trips per year) - NF	52.0	2.0	3.0
<b>Other Travel</b>			
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

FLEET MANAGEMENT SERVICES DETAIL  
 DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-17-C COOLAHAN - - - - - - - -

CLIENT NO. NO DU CLIENT	
INVOICE DATE	10/01/16
DATE DE LA FACTURE	
INVOICE NO.	0006467039
NO DE LA FACTURE	

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	COOLAHAN				000442453581 09/06/16	PETRO CANADA CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.6 1.0	1.13 12.99	65.17 12.99	3.26 3.91 .65 3.91	82.07 82.07
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	60.6		78.16	3.91	82.07
BKDN TOTALS / TOTAUX CODIFICATION 01-17							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	60.6		78.16	3.91	
BKDN TOTALS / TOTAUX CODIFICATION												82.07

FLEET MANAGEMENT SERVICES DETAIL  
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY  
DIV-17-C COOLAHAN  
- -  
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- -  
- -

CLIENT NO.  
NO DU CLIENT  
INVOICE DATE 11/01/16  
DATE DE LA FACTURE  
INVOICE NO. 0006478695  
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	COOLAHAN				000444224802 09/29/16	PETRO CANADA CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.2	1.17	64.77	3.24 3.24	68.01 68.01
					000444104640 09/28/16	IMPERIAL OIL EDMONTON AB	ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	26.9	.91	23.31	1.17 1.17	24.48 24.48
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	85.1		88.08	4.41	92.49
	BKDN TOTALS / TOTAUX CODIFICATION 01-17				1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	85.1		88.08	4.41	
							BKDN TOTALS / TOTAUX CODIFICATION					92.49

FLEET MANAGEMENT SERVICES DETAIL  
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY  
DIV-17-C COOLAHAN  
- -  
- -  
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- -

CLIENT NO. [REDACTED]  
NO DU CLIENT  
INVOICE DATE 12/01/16  
DATE DE LA FACTURE  
INVOICE NO. 0006490543  
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	COOLAHAN				000445895572 10/18/16	PETRO CANADA CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	47.7	1.16	52.65 2.63 2.63 55.28 55.28		
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	47.7		52.65 2.63 55.28		
BKDN TOTALS / TOTAUX CODIFICATION 01-17							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	47.7		52.65 2.63		
BKDN TOTALS / TOTAUX CODIFICATION												55.28

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$7.62 + GST

Purpose:

Parking for MLA Presentation Day 1

DISPLAY THIS SIDE UP ON DASHBOARD		DETACH RECEIPT FROM TICKET		
EXPIRATION DATE	EXPIRATION TIME	DATE ISSUED	TIME ISSUED	AMOUNT PAID
08/10/15	09:56	08/10/15	08:56	\$ 8.00
AMOUNT PAID		CREDIT CARD NUMBER		
\$ 8.00 93230002 08:56		LOT 3037 CC		
				
CHARGES ARE FOR THE USE OF THE PARKING SPACE ONLY. WE WILL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE TO CAR OR CONTENTS, HOWEVER CAUSED, INCLUDING BUT NOT LIMITED TO FIRE, THEFT OR COLLISION				
NON TRANSFERABLE		1038374		
		RECEIPT 1038374		

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$10.00 + GST

Purpose:

Parking for Arts Commons Breakfast

ALGARY PARKING AUTHORITY (403) 537-7000

C.

Terminal: 864

Zone: Lot 24 : 9024

Valid through:

FRIDAY 13 NOV 15  
9:51 AM

AMOUNT PAID: \$10.50 (GST incl.)  
START TIME: 11/13/2015 8:06 AM

Auth No: [REDACTED]  
RECEIPT NO: 44427

Battery Boosting & Tire Inflation Services (403) 537-7006 FREI

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: # 5.00 + GST

Purpose:

Parking for Chinese Bazar

DISPLAY TICKET ON DASH

\*Expiration Date/Time\*

06:00 AM  
FEB 01, 2016

Purchase Date/Time: 12:37pm Jan 31, 2016

Total Parking: \$5.00

Total FEDERAL: \$0.25

Total Due: \$5.25

Total Paid: \$5.25

Ticket #: 99056031

S/N #: 520015391601

Setting: Lot 318

Mach Name: Lot 318-1A

Rate: WEEKEND RATE  
Payment Type: Card

Auth #: [REDACTED]

GST REG #102466000

RECEIPT

\*Expiration Date/Time\*: 06:00am Feb 01, 2016

Purchase Date/Time: 12:37pm Jan 31, 2016

Total Parking: \$5.00

Total FEDERAL: \$0.25

Total Due: \$5.25

Total Paid: \$5.25

Ticket #: 99056031

Setting: Lot 318

Mach Name: Lot 318-1A

Rate: WEEKEND RATE  
Payment Type: Card

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$5.00 + GST

Purpose:

Parking for Chinese New Year Carnival

DISPLAY TICKET ON DASH

\*Expiration Date/Time\*

06:00 AM  
FEB 08, 2016

Purchase Date/Time: 10:43am Feb 07, 2016

Total Parking: \$5.00

Total FEDERAL: \$0.25

Total Due: \$5.25

Total Paid: \$5.25

Ticket #: 99021300

S/N #: 520015391601

Setting: Lot 318

Mach Name: Lot 318-1A

Rate: WEEKEND RATE  
Payment Type: Card

GST REG #102466000

RECEIPT

\*Expiration Date/Time\*: 06:00am Feb 08, 2016

Purchase Date/Time: 10:43am Feb 07, 2016

Total Parking: \$5.00

Total FEDERAL: \$0.25

Total Due: \$5.25

Total Paid: \$5.25

Ticket #: 99021300

Setting: Lot 318

Mach Name: Lot 318-1A

Rate: WEEKEND RATE  
Payment Type: Card

Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$3.33 + GST

Purpose:

Parking for Inn from the Cold Meeting

CALGARY PARKING AUTHORITY (403) 537-7000

Terminal: 398

Zone: 3166

Valid through:

**WEDNESDAY 10 FEB 16**  
**11:42 AM**

AMOUNT PAID: \$3.50 (GST incl.)

Auth No: [REDACTED]

Start Time: 2/10/2016 10:24 AM

Receipt No: 10469

6 FREE Battery Boosting & Tire Inflation Services (403) 537-70

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$6.00 + GST

Purpose:

Parking for Calgary Homeless Foundation Meeting

DISPLAY TICKET ON DASH

\*Expiration Date/Time\*

10:44 AM  
FEB 12, 2016

Purchase Date/Time: 09:44am Feb 12, 2016

Total Parking: \$6.00

Total FEDERAL: \$0.30

Total Due: \$6.30

Total Paid: \$6.30

Ticket #: 00014401

S/N #: 300011170046

Setting: Lot 118

Mach Name: Lot 118 -1

Rate: 1 HOUR

Payment Type: Card

GST REG #102466000

RECEIPT

\*Expiration Date/Time\*: 10:44am Feb 12, 2016

Purchase Date/Time: 09:44am Feb 12, 2016

Total Parking: \$6.00

Total FEDERAL: \$0.30

Total Due: \$6.30

Total Paid: \$6.30

Ticket #: 00014401

Setting: Lot 118

Mach Name: Lot 118 -1

Rate: 1 HOUR

Payment Type: Card

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$5.71 + GST

Purpose:

Parking for flood mitigation announcement

AUTHORITY (403) 537-7000

CALGARY PARKING

Terminal: 374

Zone: 1097

Valid through:

FRIDAY 26 FEB 16

11:01 AM

AMOUNT PAID: \$6.00 (GST incl.)

Auth No: [REDACTED]

Start Time: 7/26/2016 9:46 AM

Receipt No: 11747

e Inflation Services (403) 537-7006

FREE Battery Boosting & Ti

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$ 5.48 + GST

Purpose:

Parking for for photoshoot

ING AUTHORITY (403) 537-7000

CALGARY PAF

Terminal: 784

Zone: 3124

Valid through:

FRIDAY 04 MAR 16  
11:53 AM

AMOUNT PAID: \$5.75 (GST incl.)

Auth No:

ig & Tire Inflation Services (403) 537-7006

FREE Battery Boost

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$1.43 + GST

Purpose:

Parking for council on aging

) 537-7000

CALGARY PARKING AUTHORITY (40

Terminal: 191

Zone: 2368

Valid through:

TUESDAY 14 JUN 16  
9:58 AM

AMOUNT PAID: \$1.50 (GST incl.)

Auth No: [REDACTED]

Start Time: 6/14/2016 9:22 AM

Receipt No: 18202

(403) 537-7006 FREE Battery Boosting & Tire Inflation Service

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$ 6.43 + GST

Purpose:

Parking for elder abuse day event

GARY PARKING AUTHORITY (403) 537-7000

CAI

Terminal: 749

Zone: 1631

Valid through:

WEDNESDAY 15 JUN 16  
1:02 PM

AMOUNT PAID: \$6.75 (GST incl.)

Start Time: 6/15/2016 11:32 AM

Auth No: [REDACTED]

Receipt No: 6366

Battery Boosting & Tire Inflation Services (403) 537-7006 FREE I

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$429 + GST

Purpose:

Parking for meeting

7000 CALGARY PARKING AUTHORITY (403) 53

Terminal: 204

Zone: 1305

Valid through:

TUESDAY 27 SEP 16  
2:47PM

AMOUNT PAID: \$4.50 (GST incl.)

Auth No:

Start Time: 9/27/2016 1:17 PM

Receipt No: 15730

537-7006 FREE Battery Boosting & Tire Inflation Services (403)

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☐ Group: \$5.71 + GST

Purpose:

Parking for aging in place laneway pilot

PLACE ON DASH  
FACE UP

P

PLACE ON DASH  
FACE UP

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PLACE ON DASH  
FACE UP

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PLACE ON DASH  
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PLACE ON DASH  
FACE UP

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Terminal: 28

Plate: [REDACTED]

Valid through:  
FRIDAY 30 SEP 16  
11:23 AM

AMOUNT PAID: \$6.00  
ENTRY TIME: 9/30/2016 9:53 AM  
[REDACTED]

70459

GST# CA 108102864

TERMINAL  
28

VALID THROU  
30SEP16  
11:23 AM

AMOUNT PAID  
\$6.00  
ENTRY TIME:  
9/30/2016  
9:53 AM  
RECEIPT NO:2

01870460

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$1.73 + GST

Purpose:

Parking for chinatown brz event

537-7000

CALGARY PARKING AUTHORITY (403)

Terminal: 390

Zone: 1379

Valid through:

THURSDAY 08 SEP 16  
6:01 PM

AMOUNT PAID: \$1.82 (GST incl.)

Auth No: [REDACTED]

Start Time: 9/8/2016 5:35 PM

Receipt No: 23443

03) 537-7006 FREE Battery Boosting & Tire Inflation Services (

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$24.00 + GST

Purpose:

Parking for #Ibelieveyou event

EIPT PARKING RECEIPT

\*Expiration Date/Time\*

**02:56 PM**

**OCT 19, 2016**

Purchase Date/Time: 11:56am Oct 19, 2016

Total Parking: \$24.00

Total FEDERAL: \$1.20

Total Due: \$25.20

Total Paid: \$25.20

Rate: 3 HOURS

Payment Type: Card

Ticket #: 00740751

Lot #: 30001148-237

Setting: Lot 245

Arch Name: Lot 245 -1

GST REG #102466000

RECEIPT

Expiration Date/Time\*: 02:56pm Oct 19, 2016

Purchase Date/Time: 11:56am Oct 19, 2016

Total Parking: \$24.00

Total FEDERAL: \$1.20

Total Due: \$25.20

Total Paid: \$25.20

Rate: 3 HOURS

Payment Type: Card

Ticket #: 00740751

Setting: Lot 245

Arch Name: Lot 245 -1



# 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  
**CRAIG COOLAHAN**  
**LEGIS ASSEMBLY OF AB**

Membership Number

Date  
**October 16, 2016**

Page 1 of 4

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

Statement includes payments and charges received by October 16, 2016

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, 2016

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

October 5 Payment Received Thank You

## New Transactions for CRAIG COOLAHAN

Amount \$

September 15	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	43.59
September 19	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90

September 19	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	29.67
September 22	PRESTIGE TRANSPORTAT EDMONTON TAXICABS AND LIMOUSINES	79.69
September 22	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	36.69

↑ 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 \$



**CRAIG COOLAHAN**  
**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



# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: October 16, 2016

Page 2 of 4

## New Transactions for CRAIG COOLAHAN Continued

Amount \$

September 27 CHECKER CABS LTD 432 CALGARY  
TAXICABS AND LIMOUSINES

30.81

September 28 ASSOCIATED CAB/ALLIE CALGARY  
TAXICABS AND LIMOUSINES

39.68

October 11 RED ARROW EXPRESS LT CALGARY  
TRANSPORTATION SERVICES

70.50

October 13 PRESTIGE TRANSPORTAT EDMONTON  
TAXICABS AND LIMOUSINES

79.70

October 13 ALLIED LIMOUSINE/ASS CALGARY  
TAXICABS AND LIMOUSINES

48.01

Total New Transactions for CRAIG COOLAHAN

\$508.80 + GST



# 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  
**CRAIG COOLAHAN**  
**LEGIS ASSEMBLY OF AB**

Membership Number

Date  
**November 16, 2016**



Page 1 of 4

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

Statement includes payments and charges received by November 16, 2016

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, 2016

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

**November 4**      **Payment Received Thank You**

## New Transactions for CRAIG COOLAHAN

Amount \$

October 18	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	141.00
October 19	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	13.34
October 20	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	11.73

October 24	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50
October 24	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50

↑ 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**



**CRAIG COOLAHAN**  
**LEGIS ASSEMBLY OF AB**  
**4TH FLR 9820 107 ST**  
**EDMONTON AB**  
**T5K 1E9**

Membership Number

Amount Due \$	Amount Paid \$

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



1257

# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: November 16, 2016

Page 2 of 4

## New Transactions for CRAIG COOLAHAN Continued

Amount \$

October 26	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	5.52
October 26	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	12.88
October 27	PRESTIGE TRANSPORTAT EDMONTON TAXICABS AND LIMOUSINES	79.70
October 28	ALLIED LIMOUSINE/ASS CALGARY TAXICABS AND LIMOUSINES	53.76
October 28	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	35.88
October 29	PRESTIGE TRANSPORTAT EDMONTON TAXICABS AND LIMOUSINES	79.70
October 31	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50
November 3	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50 CR
November 3	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	11.27
November 6	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50 CR
November 6	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	60.00

November 6	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	141.00
November 6	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	30.59

Total New Transactions for CRAIG COOLAHAN

\$711.31 + GST



# 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

CRAIG COOLAHAN  
LEGIS ASSEMBLY OF AB

Membership Number

Date

December 16, 2016

Page 1 of 5

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

Statement includes payments and charges received by December 16, 2016

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 December 16, 2016

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

December 7 Payment Received Thank You

## New Transactions for CRAIG COOLAHAN

Amount \$

November 17	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50
November 20	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	12.42
November 24	PRESTIGE TRANSPORTAT EDMONTON TAXICABS AND LIMOUSINES	79.70
November 24	ALLIED LIMOUSINE/ASS CALGARY TAXICABS AND LIMOUSINES	53.76

↑ 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 \$



CRAIG COOLAHAN  
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



1140

# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: December 16, 2016

Page 2 of 5

## New Transactions for CRAIG COOLAHAN Continued

Amount \$

November 27	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
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November 27	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	32.66
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November 29	PRESTIGE TRANSPORTAT EDMONTON TAXICABS AND LIMOUSINES	79.70
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November 29	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	35.54
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November 30	PRESTIGE TRANSPORTAT EDMONTON TAXICABS AND LIMOUSINES	79.70
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November 30	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	14.72
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November 30	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	36.34
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December 2	PRESTIGE TRANSPORTAT EDMONTON TAXICABS AND LIMOUSINES	79.70
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December 2	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	36.69
------------	---	-------

December 5	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	29.67
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December 5	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
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# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: December 16, 2016

Page 3 of 5

## New Transactions for CRAIG COOLAHAN Continued

Amount \$



December 8	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	79.70
December 8	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	43.36
December 9	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50
December 11	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	6.21
December 11	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	13.80

December 14	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	35.77
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## Total New Transactions for CRAIG COOLAHAN

\$992.61 + GST

1140



**The American Express® Corporate Card**  
**Statement of Account**

New Transactions for CRAIG COOLAHAN Continued

Amount \$

September 26	AVIS RENT A CAR	EDMONTON		70.05
		Location	Date	
	Rental:	Edmonton	27/09/16	
	Return:	Edmonton	28/09/16	
	Agreement	951336260		

Total New Transactions for CRAIG COOLAHAN

\$66.72 + GST



## 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: Coolahan, Craig

Constituency: Calgary-Klein

For the Month of: September

Year: 2016

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	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			<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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
12	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
13	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
20	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
21	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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		[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24		[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25		[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26		[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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			<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						\$457.29	\$22.86	\$480.15

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

Date

Dec 7/16



## 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: Coolahan, Craig

Constituency: Calgary-Klein

For the Month of: October

Year: 2016

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			<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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
13	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
20	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
Grand Total						\$406.67	\$20.33	\$427.00

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

Dec 7/16



# 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: Coolahan, Craig

Constituency: Calgary-Klein

For the Month of: November

Year: 2016

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
2	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12		[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13		[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14		[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15		[REDACTED]	<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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
21	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$624.33	\$31.22	\$655.55

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

Date

Dec 7/16



# 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: Coolahan, Craig

Constituency: Calgary-Klein

For the Month of: December

Year: 2016

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
2	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
6	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	Travel to/from Capital		<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			<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						\$217.67	\$10.88	\$228.55

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

Date

Dec 7/16



# 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:** Coolahan, Craig

**Constituency:** Calgary-Klein

**Employee #:** [REDACTED]

**Date:** 6/1/2016

**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:** 2016-2017

**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)**

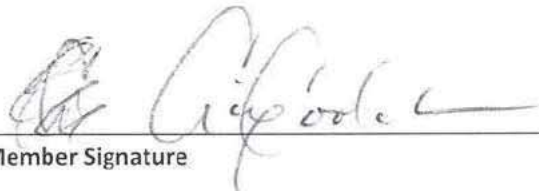
☒ **12 Monthly Payments**

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.

October 2016

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 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:** Coolahan, Craig

**Constituency:** Calgary-Klein

**Employee #:** [REDACTED]

**Date:** 6/1/2016

**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:** 2016-2017

**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)**

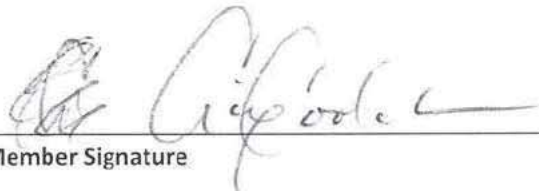
☒ **12 Monthly Payments**

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.

November 2016

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 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:** Coolahan, Craig

**Constituency:** Calgary-Klein

**Employee #:** [REDACTED]

**Date:** 6/1/2016

**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:** 2016-2017

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)**

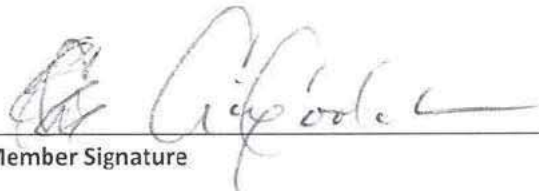
☒ **12 Monthly Payments**

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.

December 2016

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

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Nina Karimi

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$ 7.49 + GST

Purpose:

Meeting refreshments



Lina's Italian Market

n/a

#001-003 16/09/2016 11:13:42 LAPP. BAR  
Inv#:00066293 Trs#:083268

AMERICANO LARGE	\$2.75	T1
AMERICANO LARGE	\$2.75	T1
CHOISSANT ALMOND	\$1.99	T1

Net Sales	\$7.49
[ 7.49]	\$0.37
TOTAL SALES	\$7.86

SUB TOTAL	\$7.86
Visa	\$7.86

Item count 3

TYPE : PURCHASE  
TENDER : VISA CREDIT

AID : A0000000031010  
AMOUNT : \$7.86

RESULT : APPROVED  
DATE/TIME : SEP 16 2016 10:55:18  
TERM ID : LIMJRC03  
SEQUENCE# : 364001001004

Code : 00-001

Customer copy

Ask us about our catering &  
gift basket services!!  
Merchandise may be exchanged within 30 day  
with a store receipt  
ONLY.

Thank you for shopping  
at Lina's Italian Market!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Stampede BBQ

# Paimer Salmon Insurance Ltd.

#12, 2400 Centre St. NE  
Calgary, Alberta T2E 2T9  
Canada

## INVOICE

Invoice No.: 741  
Date: 30 Aug, 2016


Sold to:

### The Legislative Assembly

Craig Coolahan MLA  
#9, 2400 - Centre Street N.E.  
Calgary, Alberta

Ship to:

The Legislative Assembly  
Craig Coolahan MLA  
#9, 2400 - Centre Street N.E.  
Calgary, Alberta

Description	Amount
2016 Stampede BBQ 1/3 of total cost	3,527.78
	

Comment:

Sold By:

Total Amount

3,527.78

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan  
Claimant Name: Nina Karimi  
Expense Category: hosting

For hosting, select one:

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

\$5.24 + GST

Purpose:

food for alberta 55+ games in drumheller

A&W #1351  
400 - 650 South Railway Avenue  
Drumheller, AB  
T0J 0Y0  
403-823-8108

TYPE: PURCHASE

ACCT: VISA \$ 5.50

DATE/TIME: 16/09/29 19:54:31  
REFERENCE #: 66238138 0016400590 H

INVOICE NUMBER: 289

VISA CREDIT  
A0000000031010

01/027 APPROVED - THANK YOU

NO SIGNATURE TRANSACTION

-- IMPORTANT --  
Retain This Copy For Your Records

\*\*\* CUSTOMER COPY \*\*\*

REPRINT RECEIPT

A&W #  
#400 - 650 South Railway Avenue  
Tell us!

1 +Seeded Bun	.75
1 Extra Lettuce	\$0.30
1 Extra Mustard	\$0.00
1 Extra Sliced Onion	\$0.00
1 Extra Tomato	\$0.40
1 Fries	\$2.79
1 No Salt	\$0.00

Subtotal:	\$5.24
GST:	\$0.26
Total:	\$5.50
Grand Total:	\$5.50
Visa:	\$5.50
Change Due:	\$0.00

Take Out

Order #: 289

av.blazeloop.com  
GST # 887778876  
Order Started: 7:53:35 PM  
Thu Sep 29, 2016 19:54:27  
Receipt #: 3024782  
Cashier: Kearra

Guest Copy

REPRINT RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$ 11.19 + GST

Purpose:

Food for meeting with stakeholders

ECLAIR DE LUNE  
BAKERY CAFE CATERING  
403 398 8803

REG 05-27-2016 10:27  
000049  
CT 1

1	T1	\$3.00
1		\$5.50
1	T1	\$1.95
TA1		\$4.95
TX1		\$0.25
TL		\$10.70
CHARGE		\$10.70

ECLAIR DE LUNE INC  
403 398 8803  
T2K 0G2  
41 0733

DEBIT SALE

REF#: 00000022  
Batch #: 270 RRN: 000485450527  
05/27/16 13:29:05

Trace: 22  
DEBIT/CHEQUING Chip

AMOUNT	\$10.70
TIP	\$1.00
TOTAL	\$11.70

APPROVED - 00

Interac  
AID: A0000002771010  
TVR: 00 80 00 80 00  
TSI: F8 00

THANK YOU / MERCI

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Craig Coolahan

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$ 11.94 + GST

Purpose:

Food for Alberta 55+ Games Trip

*Tim Hortons*

Your Friends at Restaurant #4211  
1101 HWY 9 South Drumheller AB T0J 0Y0  
Owners: B Carey/K Lusk

1 Regular Garden Vegetable	\$3.29
1 Not Toasted	
1 Whole Wheat Bun /Sandwich	
1 Lite CrmChs	
1 *Special Order*	
1 Toasted	
1 ADD Mustard	
1 Medium Iced Orig Blend	\$1.99
1 No White Milk	
2 Sweetener	
1 MD Original Blend	\$1.00
1 Sugar	
1 Wrap-Grld Chipotle Chicken	\$4.00
Subtotal:	\$11.94
GST:	\$0.60 PST: \$0.00
GrandTotal:	\$12.54
Visa:	\$12.54
Change Due:	\$0.00

Eat In

# 382

300 Cash

Thanks for stopping by!

Tell us how we did at

[www.telltimhortons.com](http://www.telltimhortons.com) 1-888-601-1616

Thu Sep 29, 2016 16:25:21

Receipt #: 4806793

GST #801131855RT0001

Card Entry:CHIP	Sequence:000086
Trans Type:Purchase	\$12.54
Term #:	203
Ref #:	00000086
Application Label:	VISA CREDIT
AID #:	A0000000031010
TUR #:	8080008000
TSI #:	7800
	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:** Craig Coolahan

**Claimant Name:** Craig Coolahan

**Expense Category:** Hosting

**For hosting, select one:**

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

**Purpose:**

Coffee and Water for office

**GRAND&TOY** ® MDAn **Office DEPOT**, Inc. Company  
une société d'**Office DEPOT**, Inc

## COST CENTRE BILLING REPORT

## REQUISITION REPORT

SOLD TO ACCOUNT NO. [REDACTED]

AB LEGISLATIVE ASSEMBLY (ML  
FINANCIAL MGMT & ADMIN SERV  
9820 107 ST NW  
4TH FLR  
EDMONTON, AB T5K 1E7

G.S.T.

R894032192

Q.S.T.

1001640701TQ0009

PERIOD ENDING

10/31/2016

ACCT MGR NO.

[REDACTED]

INVOICE NO.

K219378

SHIP TO ACCOUNT NO. [REDACTED]

COST CENTRE [REDACTED]

ALTA LEGISLATIVE ASSEMBLY  
CALGARY KLEIN  
9-2400 CENTRE STREET NE  
CALGARY, AB T2E 2T9

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
REQ NO.	G291039	DATE	10/04/2016	ATTENTION	Calgary Klein	P.O.#	200696	G&T ORDER NO	188121-00	
1	1	0	CT	1011128	MP CF ORIGINAL ROAST 925G	73.32	CONTRACT	73.32	73.32	
2	2	0	CT	12269285	NESTLE PURE LIFE WATER 500 ML	5.84	CONTRACT	5.84	11.68	
1	1	0	EA		Dep Fees Cans&Btles	4.80		4.80	4.80	
					Fee applied to product # 12					
					Approved By: Mary Trush					
					* For balance of order see ref					
					188122					

REQ TOTAL  
HST TOTAL  
PST TOTAL  
SUB-TOTAL  
GST TOTAL  
TOTAL THIS ORDER

[REDACTED]

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
REQ NO.	G291039	DATE	10/04/2016	ATTENTION	Calgary Klein	P.O.#	200696	G&T ORDER NO	188122-00	
1	1	0	CT	12076020-0	NESTLE PURE LIFE 330ML	11.62	NET	11.62	11.62	
					Approved By: Mary Trush					
					* For balance of order see ref					
					188121					

REQ TOTAL  
HST TOTAL  
PST TOTAL  
SUB-TOTAL  
GST TOTAL  
TOTAL THIS ORDER

[REDACTED]

COST CENTRE DEPT.

NET TOTAL COST CENTRE  
PST TOTAL  
SUB-TOTAL  
GST TOTAL  
HST TOTAL  
TOTAL  
YEAR-TO-DATE TOTAL

[REDACTED]