

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2017-18  
017 - Calgary-Klein - Coolahan, Craig  
For Expenses Processed Jul 1 - Sep 30, 2017

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$67.39	\$515.30
MLA Parking Cap - \$	\$900.00	\$19.54	\$92.93
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$721.24	\$2,100.42
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$83.75	\$83.75
Member Travel (Meal Per Diems) - \$		\$1,101.38	\$2,156.76
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$11,580.00
Travel Accommodations Allowance		\$177.52	\$177.52
Travel Accommodations Allowance (days; 10 max) - NF	10.0	1.0	1.0
<b>Other</b>			
Hosting - \$		\$542.75	\$753.39
<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	1.0	1.0
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF		1.5	6.5
Use of a Private Automobile (52 trips per year) - NF	52.0	2.0	5.0
<b>Other Travel</b>			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0	1.0	1.0

\$ - 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



BDF290001

FLEET MANAGEMENT SERVICES DETAIL  
DETAI LS SERVICES DE GESTION DE PARC

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DE

## CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

CLIENT NO. [REDACTED]  
NO DU CLIENT  
NVOICE DATE 08/01/17  
DATE DE LA FACTURE  
NVOICE NO. 0006873046  
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 ----- 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
[REDACTED]	COOLAHAN	[REDACTED]	[REDACTED]	[REDACTED]	000468653537 07/02/17	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	62.7	1.13	67.39	3.37 3.37	70.76 70.76
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	62.7		67.39	3.37	70.76
BKDN TOTALS / TOTAUX CODIFICATION 01-17							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	62.7		67.39	3.37	
BKDN TOTALS / TOTAUX COD FICATION												70.76

# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: July 16, 2017

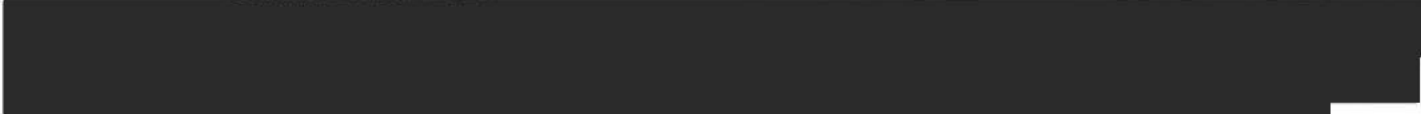
Page 2 of 3

New Transactions for CRAIG COOLAHAN Continued

Amount \$



July 14	CalgParkAuth 2375350 CALGARY GOVERNMENT SERVICES	0.25
July 14	CalgParkAuth 2375353 CALGARY GOVERNMENT SERVICES	5.25



\$5.25 + 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  
**August 16, 2017**

Page 1 of 2

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

Statement includes payments and charges received by August 16, 2017

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 August 16, 2017

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

August 3 Payment Received Thank You

## New Transactions for CRAIG COOLAHAN

Amount \$

July 17 CalgParkAuth 2377071 CALGARY  
GOVERNMENT SERVICES

15.00

Total New Transactions for CRAIG COOLAHAN

\$14.29 + GST

† Please detach here †

## AMERICAN EXPRESS®

### Payment Options

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

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

Do Not Enclose Cash



**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





# The American Express® Corporate Card Statement of Account

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



Prepared For  
**CRAIG COOLAHAN**  
**LEGIS ASSEMBLY OF AB**

Membership Number

Date  
**July 16, 2017**

Page 1 of 3

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

Statement includes payments and charges received by July 16, 2017

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 July 16, 2017

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

**June 27**      **Payment Received Thank You**

## New Transactions for CRAIG COOLAHAN

Amount \$

<b>June 19</b>	<b>CHECKER CABS LTD 432 CALGARY</b> TAXICABS AND LIMOUSINES	<b>36.34</b>
<b>June 19</b>	<b>ATS GROUP EDMONTON</b> TAXICABS AND LIMOUSINES	<b>75.90</b>
<b>June 21</b>	<b>ASSOCIATED CAB/ALLIE CALGARY</b> TAXICABS AND LIMOUSINES	<b>43.59</b>
<b>June 21</b>	<b>ATS GROUP EDMONTON</b> TAXICABS AND LIMOUSINES	<b>75.90</b>
<b>June 23</b>	<b>CALGARY TRANSIT/1179 CALGARY</b> GOVERNMENT SERVICES	<b>3.25</b>

† Please detach here †

## AMERICAN EXPRESS®

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- 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



# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: July 16, 2017

Page 2 of 3

## New Transactions for CRAIG COOLAHAN Continued

Amount \$

June 23	CALGARY TRANSIT/5868 CALGARY GOVERNMENT SERVICES	3.25
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July 4	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	29.90
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July 5	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	37.38
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July 6	CALGARY TRANSIT/1241 CALGARY GOVERNMENT SERVICES	3.25
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July 7	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	13.60
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July 14	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	12.20
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Total New Transactions for CRAIG COOLAHAN		
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\$318.63 + 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 [REDACTED] Date  
September 16, 2017

Page 1 of 3

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

Statement includes payments and charges received by September 16, 2017

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

## Credit Limit Summary On September 16, 2017

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

August 30 Payment Received Thank You

## New Transactions for CRAIG COOLAHAN

Amount \$

August 28	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	141.00
September 3	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	11.40
September 3	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	14.95
September 4	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	12.80
September 5	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	11.60
September 7	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	34.50
September 8	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	36.69
September 10	RED ARROW EXPRESS LT CALGARY TRANSPORTATION SERVICES	70.50
September 11	CHECKER CABS LTD 432 CALGARY TAXICABS AND LIMOUSINES	13.40

† Please detach here †

## AMERICAN EXPRESS®

Payment Options

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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 [REDACTED]

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

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Date: September 16, 2017

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## New Transactions for CRAIG COOLAHAN Continued

Amount \$

September 13    **ATS GROUP**    **EDMONTON**  
TAXICABS AND LIMOUSINES

75.90

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**Total New Transactions for CRAIG COOLAHAN**

\$402.61 + GST



# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: July 16, 2017

Page 2 of 3

## New Transactions for CRAIG COOLAHAN Continued

Amount \$

July 5	ENTERPRISE RENT A CA FORT MCMURRAY		87.93
	Location	Date	
	Rental: Fort McMurray	04/07/17	
	Return: Fort McMurray	05/07/17	
	Agreement 936518210		

Total New Transactions for CRAIG COOLAHAN

\$83.75 + 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: May

Year: 2017

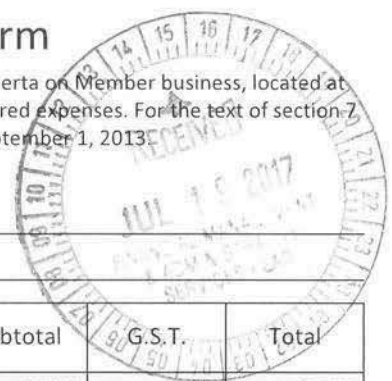
Employee #:

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
2	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
15	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
16	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
18	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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						\$784.86	\$39.24	\$824.10

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

Date



*Coolahan*

June 17/17



# 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:** June

**Year:** 2017

**Employee #:**

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
5	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
6	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7			<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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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			<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						\$257.19	\$12.86	\$270.05

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

June 17/17



# 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: July

Year: 2017

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	60 km from Perm. Res.	fort mcmurray	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
5	60 km from Perm. Res.	fort mcmurray	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<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						\$59.33	\$2.97	\$62.30

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

Member Signature

Date



## 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: 4/1/2017

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: 2017-2018

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)

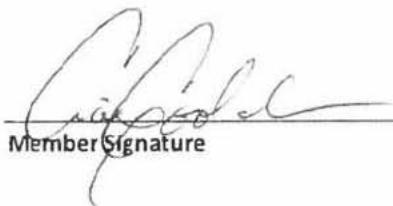
☒ 12 Monthly Payments

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.

July 2017

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

  
Member Signature



## Members' Temporary Accommodation Allowance Claim Form

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

Member Name: Coolahan, Craig

Constituency: Calgary-Klein

Employee #: [REDACTED]

Date: 4/1/2017

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: 2017-2018

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.

August 2017

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

  
Member Signature

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: 4/1/2017

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: 2017-2018

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.

September 2017

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

  
Member Signature

Updated April 2016

# The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: July 16, 2017

Page 2 of 3

## New Transactions for CRAIG COOLAHAN Continued

Amount \$

July 5

THE BEST WESTERN PLU FORT MCMURRAY  
Hotel Services

186.39

Total New Transactions for CRAIG COOLAHAN

\$177.52 + GST



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: \$ 51.51 + GST

Purpose:

lunch meeting with constituent

PAD THAI RESTAURANT  
3106B 4TH ST. NW  
CALGARY, AB T2M 3A4

Merchant ID: 000000005447111  
Term ID: 09460198  
25456810014

Purchase

VISA CREDIT

AID: A0000000031010

Entry Method: Chip

Batch#: 000149

06/22/17

13:46:10

0-CH-000062262129

Amount: \$ 46.73  
Tip: \$ 7.01  
Total: \$ 53.74



Pad Thai

3106B - 4th Street NW  
Calgary AB T2M 3A4  
Tel. (403) 800-0567  
GST 745564690 RT0001

Receipt:

Date: Jun 22, 2017 12:44:38 PM

Terminal: Pad Thai

Table: Table 9

Served by: Admin

Item	Price	Qty	Value
73 Veg. Pad Thai	\$12.60	x1	\$12.60
6 Salad Roll	\$10.50	x1	\$10.50
48 Masaman VEG	\$16.27	x1	\$16.27
99 Coco Rice	\$3.67	x2	\$7.35

Items count: 5

Total \$46.73

Nett of Tax: \$44.50

Taxes: \$2.23

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: \$15.19

Purpose:

Coffee for office



Safeway Beacon Heights  
#20, 1818 Centre Street NE Calgary AB  
Phone: 403.276.3328  
GST# 817093735

Served by: SCO 23

Welcome to Safeway

GROCERY

Whl Bean Cof Haznut \$15.19 D

SUBTOTAL \$15.19  
TOTAL TAX \$0.00

**TOTAL \$15.19**  
Master Card \$15.19  
Cash \$0.00

TENDER CHANGE  
NUMBER OF ITEMS 1

NT 22255810 RF  
AL ID 882225581023  
chase \*\* \$ 15.19  
MasterCard RCPT 6859000  
7/31/2017 RESP 001  
TIME 10:16:55  
REF# 001013003  
MasterCard  
A0000000041010

00 APPROVED - THANK YOU

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

Term Tran Store Oper 07/31/17  
23 6859 8823 123 10:16:32

## LEGISLATIVE ASSEMBLY OF ALBERTA

## Personal Expense Claim Receipt Description

Member Name: Craig CoolahanClaimant Name: Nina KarimiExpense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)☐ Individual Stakeholder(s)☐ Group: \$ 58.73

Purpose:

Food for CA training



Safeway Beacon Heights  
 #20 1818 Centre Street NE Calgary AB  
 Phone: 403.276.3328  
 GST# 817093735

Served by: Kafayat A

Welcome to Safeway

Promo #56	\$0.00 D
<b>GROCERY</b>	
Dressing Italian F/F	\$3.39 D
Dressing Cmy Caesar	\$3.39 D
Rst Grlo&RdPep 650ML	\$2.79 D
Rst Grlo&RdPep 650ML	\$2.79 D
Rst Grlo&RdPep 650ML	\$2.79 D
Rst Grlo&RdPep 650ML	\$2.79 D
Rst Grlo&RdPep 650ML	\$2.79 D
Rst Grlo&RdPep 650ML	\$2.79 D
Comp Spaghetti 900G	\$2.79 D
Comp Spaghetti 900G	\$2.79 D
Comp Spaghetti 900G	\$2.79 D
Cream 10%	\$2.19 D
+Deposit	\$0.10
Silk ESL Cashew	\$3.99 D
+EHC	\$0.08
+Deposit	\$0.25
Creamer Soy Orig	\$2.29 n
+Deposit	\$0.10
<b>PRODUCE</b>	
Tomato Grape	\$3.99 D
Tomato Grape	\$3.99 D
Tomato Grape	\$3.99 D
Tomato Grape	\$3.99 D
Comp Romaine Hrts	\$3.99 D
Comp Romaine Hrts	\$3.99 D
Romaine Hrts	\$3.99 D
per HH Sdls	\$2.97 D
3 @ 1/ \$0.99	
<b>SAVED \$1.50</b>	

MILES Base Offer	4 Miles
Day 15% Off	-\$10.27

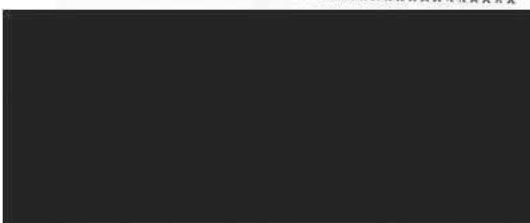
SUBTOTAL	\$58.73
TOTAL TAX	\$0.00
<b>TOTAL</b>	<b>\$58.73</b>
er Card	TENDER \$58.73
	CHANGE \$0.00

NUMBER OF ITEMS 24

\*\*\*\*\*YOUR SAVINGS\*\*\*\*\*

Units & Specials	\$11.77
Total Savings	\$11.77
Percentage Savings	17%

\*\*\*\*\*



MERCHANT 22255810 RF  
 TERMINAL ID SB2225581001  
 \*\* Purchase \*\* \$ 53.73  
 CARD MasterCard RCPT 89000  
 [REDACTED] RESP 001  
 DATE 08/01/2017 TIME 17:58.43  
 [REDACTED] REF# 001014042  
 APPL MasterCard  
 AID A0000000041010

00 APPROVED - THANK YOU

I AGREE TO PAY THE ABOVE TOTAL AMOUNT

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Peter Driftmier

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$39.27 + GST

Purpose:

CA Training coffee

*Tim Hortons*

Restaurant #2832  
1103 - 17th Ave SW, Calgary, AB T2T 0B5  
403-228-9899

Take Out  
224

1 Take 12 Original Blend	\$18.89
1 Take 12 Original Blend	\$18.89
1 SM Original Blend	\$1.49

Subtotal: \$39.27

GST: \$1.96 PST: \$0.00

~~Amount Due:~~ ~~\$41.23~~

Debit: \$41.23

Change Due: \$0.00

Take Out # 224 300 Cashier

Thanks for stopping by!

Tell us how we did at:

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

Thu Aug 3, 2017 09:45:12

Receipt #: 13501162

GST #85470775RT001

Account: CHEQUING  
Card Entry: TAP\_ICC Sequence: 000138  
Trans Type: Purchase \$41.23  
Merchant #: 030000095622  
Term #: 202  
Ref #: 00000138  
Trace #: 00887089  
Application Label: Interac  
AID #: A0000002771010  
TVR #: 8000008000  
TSI #: 2800  
APPROVED

Guest Copy

REPRINT RECEIPT

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: \$14.99

Purpose:

Coffee for office



Lina's Italian Market

Lina's Italian Market  
2202 Centre ST NE  
Calgary, AB  
(403) 277-9166  
G.S.T# R138265970

#001-001 5/19/2017 10:42:44 JUNE  
Inv#:00313264 Trs#:313808

Grocery \$14.99

Net Sales \$14.99

TOTAL SALES \$14.99

SUB TOTAL \$14.99

Visa \$14.99

Item count 1

TYPE : PURCHASE

TENDER : VISA CREDIT

AID : A0000000031010

AMOUNT : 14.99

RESULT : APPROVED

DATE/TIME : MAY 19 2017 10:32:22

TERM.ID : LIMJKC01

SEQUENCE# : 949001001016

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

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: \$ 36.99

Purpose:

Coffee for office



Lina's Italian Market  
2202 Centre ST NE  
Calgary, AB  
(403) 277-9166  
G.S.T# R138265970

#001-001 6/15/2017 10:33:38 JUNE  
Inv#:00322228 Trs#:322774

LINA'S COLOMBIAN SUPREMO ME \$36.99

Net Sales \$36.99  
TOTAL SALES \$36.99

SUB TOTAL \$36.99  
Visa \$36.99

Item count 1

TYPE : PURCHASE  
TENDER : VISA CREDIT

AID : A0000000031010  
AMOUNT : 36.99

RESULT : APPROVED  
DATE/TIME : JUN 15 2017 10:23:08  
TERM.ID : LIMJKC01  
SEQUENCE# : 976001001008

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

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: \$60.85 + GST

Purpose:

Constituent lunch

NAMSKAR FINE  
202 16 AVE NE  
CALGARY  
22855130  
QB2285513004

SALE

06-09-2017 12:51:49  
Exp Date \*\*/\*\* Card Type VI  
Name: KARIMI/NINA  
A0000000031010  
VISA CREDIT

Trace # 000005  
Inv. # 2032

RRN 001102005

Sale \$53.39  
Tip \$10.00  
TOTAL \$63.39

+++++  
00 APPROVED-THANK YOU  
+++++

Retain this copy for your  
records  
Customer copy

NAMSKAR  
CUISINE IN INDIA

NAMSKAR

12:32 L 06/09/17 #13  
TABLE 12 JASWINDE GUESTS 3

3 LUNCH BUFFET 50.85  
FOOD 50.85  
GST 2.54  
SUBTOTAL 53.39

TOTAL 53.39

THANK YOU !  
--SHUKRIA--  
ORDER & RESERVATION  
Ph#403-230-4448  
online: www.namskar.com  
GST # 2285513002  
202-16 AVE NE CALGARY  
ALBERTA E1J8

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: \$ 11.53 + GST

Purpose:

Coffee with Craig refreshments

Thank You for shopping with us!

**Velvet Cafe**

102, 502 25 Ave NW

Calgary, Alberta T2M 2A8

Phone 403-338-2087

velvetcafe.ca

Qty	Description	Exten
1	Muffins	2.49
1	Muffins	2.49
1	Muffins	2.49
1	Muffins	2.49
	Subtotal	9.96
	GST 5.00%	0.50
	Total	\$10.46
	Paid VISA	\$10.46

Receipt# 73088

Order# 88

Date: 6/10/2017 11:16 AM

VELVET CAFE  
502 25 AVE NW  
CALGARY AB

CARD TYPE VISA  
DATE 2017/06/10  
TIME 2742 11:17:09  
RECEIPT NUMBER  
H84076002-001-001-724-0

PURCHASE  
AMOUNT \$10.46  
TIP \$1.57  
TOTAL

**\$12.03**

VISA CREDIT  
0000000031010  
D000A0BAC726876F  
0000000000-

**APPROVED**

FF/DT 20

01-027

THANK YOU

NO SIGNATURE REQUIRED



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: \$5.44 + GST

Purpose:

Coffee with Craig refreshments

Thank You for shopping with us!

Velvet Cafe

102, 502 25th Ave NW

Calgary, Alberta T2M 2A8

Phone 403-338-2087

velvetcafe.ca

Qty	Description	Exten
1	Coffee 16oz	2.35
1	Coffee 16oz	2.35
1	STAY	0.00
	Subtotal	4.70
	GST 5.00%	0.23
	Total	\$4.93
	id VISA	\$4.93

Receipt# 73067

Order# 67

Date: 6/10/2017 11:02 AM

VELVET  
502 25 AVE NW  
CALGARY AB

CARD TYPE VISA  
DATE 2017/06/10  
TIME 0019 10 02:30  
RECEIPT NUMBER  
H84076002-001-001-714-0

PURCHASE  
AMOUNT \$4.93  
TIP \$0.74  
TOTAL

\$5.67

VISA CREDIT  
A0000000031010  
67D49DD1BDAA27FF  
0000000000-

APPROVED

FF/DT 20

THANK YOU

01-027

NO SIGNATURE REQUIRED

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: \_\_\_\_\_

\$ 11.31

Purpose:

Coffee items for office

**SAFEWAY**

Safeway Beacon Heights  
#20, 1818 Centre Street NE Calgary AB  
Phone: 403.276.3328  
GST# 817093735

Served by: SC0 23

**GROCERY**

Sweetener Calorie Fr	\$6.99 D
Original Cashew	\$3.99 D
Gluten Free Item	
+EHC	\$0.08
+Deposit	\$0.25

SUBTOTAL	\$11.31
TOTAL TAX	\$0.00

<b>TOTAL</b>	<b>\$11.31</b>
Master Card	TENDER \$11.31
Cash	CHANGE \$0.00

NUMBER OF ITEMS 2

CLIENT ID 9803  
TERMINAL ID 023  
\*\* PURCHASE  
CARD MasterCard

TAPPED

\*\* \$ 11.31

RCPT 5708000

RESP 000

TIME 11:41:51

REF # 00000018

DATE 06/16/2017  
AUTH

APPROVED

NO SIGNATURE REQUIRED

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

Term	Tran	Store	Oper	
23	5703	8823	123	06/16/17 11:41:51

Thank you for shopping at our Store  
Come back soon

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: \$31.76 + GST

Purpose:

Freezies for park booth and pool party



RCSS 1545 7020 4TH ST NW  
403) 516-8519

Big on Fresh, Low on Price

06433170040		
KISKO CRUS GIANT	GMRJ	5.94
06433170030		
MRFR FREEZIES	GMRJ	9.94
06433170040		
KISKO CRUS GIANT	GMRJ	5.94
06433170030		
MRFR FREEZIES	GMRJ	9.94
G=GST 5%	31.76 @ 5.000%	1.59

TOTAL 33.35

-----TRANSACTION RECORD-----

GLOBAL PAYMENTS MERCHANT # 4151001  
Superstore  
7020-4th Street NW  
Calgary AB  
STORE 01545 TERM Z0154522C  
SLIP # 90200 REG 22  
RETAIN THIS COPY FOR YOUR RECORDS  
\*\*\* Purchase \*\*\*

VISA CREDIT

RESP 001  
ISO 00

A0000000031010  
0000 TVR 0000000000

DATE	TIME	AMOUNT
8/2017	16:38:42	\$ 33.35

APPROVED

No Signature Required

CREDIT TN -33.35

\* You could have earned 330  
PC points with President's Choice  
Financial MasterCard. Apply Today  
Visit [pcfinancial.ca](http://pcfinancial.ca)

\*\*\*\*\*  
GST # 12223-5922 RT0001

YOUR STORE MANAGER  
MATT

Thank You, Come Again !

\*\*USE YOUR PCF CARD\*\*

TO COLLECT POINTS!!

\*\*REDEEM HERE FOR FREE GROCERIES\*\*

2017/08/18

16:38

U-SCAN 2 9992

22 0902

\*\*\*\*\*  
TELL US HOW WE DID TODAY! MONTHLY CHANCES

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Joel Laforest

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)  
☐ Individual Stakeholder(s)  
☒ Group: Constituents in Mount Pleasant area

Purpose:

Food expenses for BBQ held at Mount Pleasant Outdoor Pool on August 27, 2017.

\$205.18 + GST



#56 CALGARY, ALBERTA

2853-32 STREET N E  
CALGARY ALBERTA T1Y 6T7

25407	KS GARDENBGR	15.99
25407	KS GARDENBGR	15.99
5003535	BEEF BURGER	15.99
5003535	BEEF BURGER	15.99
5003535	BEEF BURGER	15.99
5003535	BEEF BURGER	15.99
5003535	BEEF BURGER	15.99
339431	HEINZ PICNIC	8.99
355463	TOMATOES ON	5.99
355463	TOMATOES ON	5.99
128315	BABY ROMAINE	3.99
128315	BABY ROMAINE	3.99
5042	JUMBO HAMS	3.99
5042	JUMBO HAMS	3.99
4906	MED CH SLICE	15.39
333666	EB - LUSH	16.99
5042	JUMBO HAMS	3.99
5042	JUMBO HAMS	3.99

5042	JUMBO HAMS	3.99
5042	JUMBO HAMS	3.99
5042	JUMBO HAMS	3.99
5042	JUMBO HAMS	3.99

COSTCO # 56  
2853-32 STREET N E  
CALGARY ALBERTA T1Y 6T7

PURCHASE - MASTERCARD

MasterCard

A0000000041010

0000008000 E800

01 APPROVE!

AMOUNT:

027

0056 008 0000000035 0080

IMPORTANT - retain this copy for your record.

\*\*\* CARDHOLDER COPY \*\*\*

CHANGE  
TOTAL DISCOUNT(S)