

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2018-19
017 - Calgary-Klein - Coolahan, Craig
For Expenses Processed Jan. 1 - Mar 31, 2019

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$185.07	\$977.95
MLA Parking Cap - \$	\$900.00		\$99.48
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$851.89	\$3,966.00
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$380.40	\$380.40
Member Travel (Meal Per Diems) - \$		\$1,739.20	\$3,199.10
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,042.90	\$22,412.90
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$382.91	\$3,723.85
Event Tickets Disclosable - \$			
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.0	9,500.0	9,500.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0	9,500.0	9,500.0
Special Trips (5 trips per year) - NF	5.0		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		4.0	16.0
Use of a Private Automobile (52 trips per year) - NF	52.0	3.0	4.0
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		

\$ - Reported on CAD dollar amount of actual expense

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

Budget reported is the maximum annual amount that may be claimed

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

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

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	COOLAHAN			0013000	000521131629 01/12/19	PETRO CANADA CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.0 1.0	.87 13.99	49.67 13.99	2.48 3.18 .70 3.18	66.84 66.84
				0012500	000521131628 12/17/18	PETRO CANADA CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.2	.93	49.69	2.48 2.48	52.17 52.17
				UNIT TOTAL / TOT UNITE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	116.2		113.35	5.66	119.01
BKDN TOTALS / TOTAUX CODIFICATION 01-17				UNITS / VEHIC	1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	116.2		113.35	5.66	
BKDN TOTALS / TOTAUX COD FICATION												119.01

Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 124 OF 209
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 [REDACTED]
NVOICE DATE 04/01/19
DATE DE LA FACTURE
NVOICE NO. 0007468371
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER I.D. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	COOLAHAN			0014500	000526245630 03/05/19	PETRO CANADA LEDUC AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	16.7	1.04	16.48	.82 .82	17.30 17.30
				0014300	000526245631 02/13/19	PETRO CANADA CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.6	.99	55.24	2.76 2.76	58.00 58.00
				UNIT TOTAL / TOT UNITE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	75.3		71.72	3.58	75.30
	BKDN TOTALS / TOTAUX CODIFICATION 01-17			UNITS / VEHIC	1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	75.3		71.72	3.58	
	BKDN TOTALS / TOTAUX COD FICATION											75.30

BLE871

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



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
January 16, 2019

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 January 16, 2019

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 January 16, 2019

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

December 28 Payment Received Thank You

New Transactions for CRAIG COOLAHAN

Amount \$

December 18 CHECKER CABS LTD CALGARY
TAXICABS AND LIMOUSINES

17.47

January 14 CHECKER CABS LTD CALGARY
TAXICABS AND LIMOUSINES

35.42

Total New Transactions for CRAIG COOLAHAN

Taxi, Bus = \$50.38 plus GST

↑ Please detach here ↑

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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

000133



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



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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
February 16, 2019

ATTACH ALL RECEIPTS &
APPROVE FOR PAYMENT

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 February 16, 2019.

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.

SIGNATURE

RETURN TO 4th Floor, 9820 - 107 street

Credit Limit Summary On February 16, 2019

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

January 31 Payment Received Thank You

New Transactions for CRAIG COOLAHAN

Amount \$

January 14	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
January 16	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	40.37
January 16	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
January 23	CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES	35.65

January 23	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
January 24	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	8.74
January 24	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	10.35

† Please detach here †

Taxi, Bus = \$307.44 plus GST

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PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO U.S. 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

000141



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

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Date: February 16, 2019

Page 2 of 4

New Transactions for CRAIG COOLAHAN Continued

Amount \$

January 24	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	44.05
January 24	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
January 30	CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES	16.79
January 30	CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES	20.70
February 2	CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES	18.17
February 2	CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES	18.17
February 6	CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES	36.56

February 6	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
February 8	ATS GROUP EDMONTON TAXICABS AND LIMOUSINES	75.90
February 8	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	41.29

Total New Transactions for CRAIG COOLAHAN

Taxi, Bus = \$403.27 plus GST



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PO Box 7000 Station B
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Prepared For
CRAIG COOLAHAN
LEGIS ASSEMBLY OF AB

Membership Number

Date
March 18, 2019

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 March 18, 2019

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 March 18, 2019

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

March 11 Payment Received Thank You

New Transactions for CRAIG COOLAHAN

Amount \$

March 3 CHECKER CABS LTD CALGARY
TAXICABS AND LIMOUSINES

35.19

Taxi, Bus Travel = \$33.51 plus GST

↑ Please detach here ↑

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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

000144

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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Date: March 18, 2019

Page 2 of 3

New Transactions for CRAIG COOLAHAN Continued

Card XXXX-XXXXX3-51009

Amount \$



March 5	ASSOCIATED CAB/ALLIE CALGARY TAXICABS AND LIMOUSINES	43.13
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March 8	CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES	17.02
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Total New Transactions for CRAIG COOLAHAN		
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Taxi, Bus = \$57.29 plus GST

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Date: March 18, 2019

Page 2 of 3

New Transactions for CRAIG COOLAHAN Continued

Amount \$

March 5	BUDGET RENT A CAR	EDMONTON		399.42
	Rental:	Location	Date	
	Return:	Edmonton	03/03/19	
	Agreement	Edmonton	05/03/19	

Total New Transactions for CRAIG COOLAHAN

Car Rental =\$380.40 plus 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, 2018.

B = Breakfast (\$9.20) | L = Lunch (\$11.60) | D = Dinner (\$20.75)

Member Name: Coolahan, Craig

Constituency: Calgary-Klein

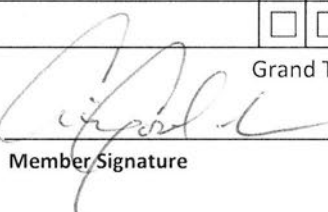
For the Month of: September

Year: 2018

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	Travel to/from Capital		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23	Travel to/from Capital		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
24	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
25	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
26	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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						\$259.48	\$12.97	\$272.45

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

Jan 16/19
Date



Members' Travel Expenses Per-Diems Claim Form

Note to MLAs: Meal allowances may be claimed only for days when you were travelling in Alberta on Member business, located at least 60 kms by primary highway from your declared permanent residence, and you had incurred expenses. For the text of section 7 of the *Members' Allowances Order* and details on form completion, see reverse. Effective September 1, 2013.

B = Breakfast (\$9.20) | L = Lunch (\$11.60) | D = Dinner (\$20.75)

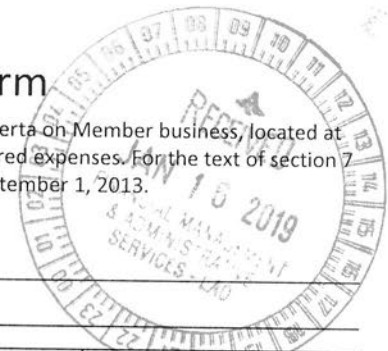
Member Name: Coolahan, Craig

Constituency: Calgary-Klein

For the Month of: October

Year: 2018

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	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			<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	60 km from Perm. Res.	Ottawa	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
11	60 km from Perm. Res.	Ottawa/Iqaluit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12	60 km from Perm. Res.	Iqaluit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
13	60 km from Perm. Res.	Iqaluit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
14	60 km from Perm. Res.	Iqaluit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	Travel to/from Capital		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
25	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
26	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30	Travel to/from Capital		<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						\$378.29	\$18.91	\$397.20

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

Member Signature

Date

Jan 16/19



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: 2018

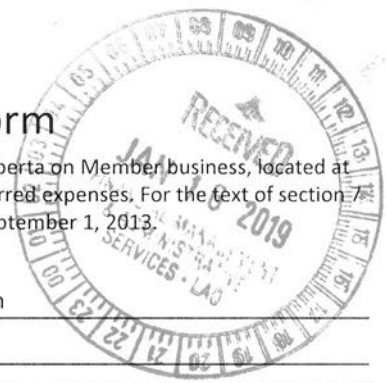
Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	Travel to/from Capital		<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			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18	Travel to/from Capital		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
19	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
21	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
22	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25	Travel to/from Capital		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
26	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
28	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
29	Travel to/from Capital		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$525.43	\$26.27	\$551.70

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' 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: 2018

Employee #:



Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
3	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
4	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
5	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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$178.05	\$8.90	\$186.95

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

Member Signature

Date

Jan 16 / 19



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: January

Year: 2019

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15	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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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			<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						\$138.48	\$6.92	\$145.40

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

March 5/19



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: February

Year: 2019

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	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 type="checkbox"/>	19.81	0.99	20.80
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"/>			
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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"/>			
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21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$79.14	\$3.96	\$83.10

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

Member Signature

Date

March 5/19



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: March

Year: 2019

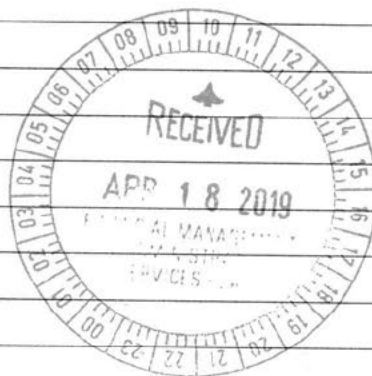
Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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	Travel to/from Capital	Edmonton	<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"/>			
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13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17	Travel to/from Capital	Edmonton	<input 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			<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						\$180.33	\$9.02	\$189.35

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 #:

Date: 4/24/2018

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually
Maximum of \$23,160 per fiscal year.

Fiscal Year: 2018-2019

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



Yes



No

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

\$ 1,930.00

x 12 = \$ 23,160.00

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

Claim Payment Authorization (please check)



12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

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

January 2019

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

Member Signature

Updated March 2018



Members' Temporary Accommodation Allowance Claim Form - Claimed by Month

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

Effective date: June 21, 2018

Member Name: Coolahan, Craig

Constituency: Calgary-Klein

Employee #:

Date: Feb 7, 2019

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

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

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

Please Note:

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

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

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

Member Signature



Updated June 2018



Members' Temporary Accommodation Allowance Claim Form - Claimed by Month

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

Effective date: June 21, 2018

Member Name: Coolahan, Craig

Constituency: Calgary-Klein

Employee #:

Date:

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

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


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

Please Note:

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

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

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


Member Signature

Updated June 2018

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Craig Coolahan

Claimant Name: Joel Laforest

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Discussion of a constituent concern.

Hosting = \$74.20 plus GST

**Your order has been placed!**

1 message

Skip Team <support@skipthedishes.com>

To:



Fri, Dec 7, 2018 at 5:43 PM



Order Placed

Your order has been placed with Rajdoot Restaurant for pickup.

2424 4 St SW

[TRACK ORDER](#)**ORDER #67399607**

Rajdoot Restaurant (4th St. SW)

Placed for Pickup

x1	12. Masala Chicken Tikka	\$15.95
x2	49. Coconut Basmati Rice	\$6.95
x2	56. Naan with Butter (One Per Order)	\$2.50
x1	38. Allu Gobi "Vegan - no dairy or eggs please."	\$14.95
x1	2. Vegetable Samosas (2 pcs)	\$4.95
x1	54. Punjabi Roti (Whole Wheat) or Chapati • Roti	\$2.50

x1	13. Butter Chicken	\$16.95
	Food/Beverage Total	\$74.20
	GST	\$3.71
	Total (CAD)	\$77.91

Paid with Credit Card.



Get \$7 Off Your Next Order

Refer a friend to try Skip and you'll
both get \$7 off your next order

SHARE WITH FRIENDS



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You are receiving this email because
you're a current account holder with
SkipTheDishes.

Our mailing address is:
SkipTheDishes
6th Floor - 136 Market Ave
Winnipeg, MB R3B 3N2
Canada

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: _____

Purpose:

cookie decorating supplies

Hosting = \$42.00

AMANDINE BAKERY
#3, 2610 CENTRE STREET NORTH
CALGARY AB T2H 2V4
GST# 100179076
DATE 12/15/2018 SAT TIME 11:43

4X	@10.50	
BAKERY NOTAX		\$42.00
TOTAL		\$42.00
CASH		\$42.00

THANKYOU!
No.000034
** REPRINT **

AMANDINE BAKERY
2610 CENTRE ST NE UNIT 3
CALGARY AB

CARD [REDACTED]
CARD TYPE VISA
DATE 2018/12/15
TIME 5989 11:43:47
RECEIPT NUMBER
C84033289-001-001-218-0

PURCHASE
TOTAL
\$42.00

VISA CREDIT
A0000000031010
1860541DF4980614
8080008000-6800
A6D2E2EBC81745D3
8080008000-7800

APPROVED
AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

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: _____

Purpose:

cookie decorating supplies

Hosting = \$23.85

SAFEWAY 

Safeway Kensington
410 - 10 Street NW Calgary AB
Phone: 403.270.3054
GST# 895588788RT0001

Served by: Michael P

Welcome to Safeway

BAKERY

Royal Icing 1KG	\$6.41	C
Royal Icing 1KG	\$6.35	C
Royal Icing 1KG	\$6.25	C
Royal Icing 1KG	\$4.84	C

SUBTOTAL
5% GST

TOTAL

MasterCard
Cash

TENDER
CHANGE

NUMBER OF ITE

*****YOUR SAVINGS*****

Discounts & Specials \$2.00
Your Total Savings \$2.00

AIR MILES

Member number: [REDACTED]
Total Miles Earned [REDACTED]

Your AIR MILES Balances

Cash Miles [REDACTED]
Dream Miles [REDACTED]

MERCHANT 22255554 RF
TERMINAL ID SB2225555405

** Purchase ** \$ [REDACTED]
CARD MasterCard RCPT 2165000
RESP 001

DATE 12/14/2018 TIME 17:00:39
REF# 001511136

APPL. MasterCard
AID A0000000041010

00 APPROVED - THANK YOU

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

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: _____

Purpose:

food for meeting

Hosting = \$44.25 plus GST

Printed: Dec 05, 2018 Time: 04:43 PM

Panago

ORDER # 164513 Virtual C.

Date: Wed Dec 05, 2018

Due: 05:15 PM

Quote: 15 Minutes

Customer Web

Pickup

DO NOT MAKE

Deferred Order

Order for Dec 05, 2018 @ 05:15 PM

NINA KARIMI

Qty		Price
1	LARGE Cheese Original Hand-tossed Crust	15.00
1	LARGE Pepperoni Original Hand-tossed Crust	16.00
1	SMALL Create Yr Own Original Hand-tossed Crust	13.25
	KEN Mozzarella*	
	ADD GREEN Peppers	
	ADD Pineapple	
	ADD BLACK Olives	
	ADD GREEN Olives	
	ADD Mushrooms	
	ADD Daiya Cheeze*	

Subtotal 44.25

GST 2.21

Total 46.46

Visa 46.46

GST # 985195404

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: _____

Purpose:

food for meeting

Hosting = \$29.95 plus GST

Phil & Sebastian II Hoopla Donuts

414 3rd Street SW
Calgary, Alberta
Canada, T2P 1R2
Tel: (403)-453-2162

Printed December 7, 2018 at 12:16 PM

December 7, 2018 at 12:16 PM
GST #: 857064992RT0001

Preorder - Dozen	\$31.45
Food Total	\$31.45
Sub Total	\$31.45
Total	\$31.45
	\$31.45
GST Included in Total	\$1.50

Thank You
Please Come Again!

TRANSACTION RECORD
RELEVÉ DE TRANSACTION

Phil & Sebastian II Hoopla Donuts

414 3rd Street SW
Calgary, Alberta
Canada, T2P 1R2
Tel: (403)-453-2162

Printed December 7, 2018 at 12:16 PM

Order ID: 117440

Type: Purchase
Date/Time: 2018-12-07 12:16:29
Server: Cash

Card Number [REDACTED]
Account Type: VISA
Auth [REDACTED]
Ref #: 662962600010014600 H

VISA CREDIT
A0000000031010

01 APPROVED - THANK YOU 027

Total: \$31.45

Important - retain this copy for your records

*** CUSTOMER COPY ***

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: _____

Purpose:

coffee and hot chocolate for event

Hosting = \$27.88 plus GST



Safeway Kensington
410 - 10 Street NW Calgary AB
Phone: 403.270.3054
GST# 895588788RT0001

Served by: John L

Welcome to Safeway

GROCERY

Folgers Classic 920G	\$10.99	C
Kraft Marshmallows	\$4.19	GC
Comp Hot Choc 500G	\$2.99	C
YOU SAVED \$0.80		
Comp Hot Choc 500G	\$2.99	C
BONUS EARNED 5 Miles		
YOU SAVED \$0.80		
Coffee Creamer 18%	\$3.49	C
YOU SAVED \$0.50		
+EHC	\$0.02	R
+Deposit	\$0.10	R
Creamer Soy Orig	\$2.99	C
+EHC	\$0.02	R
+Deposit	\$0.10	R

AIR MILES Base Offer 1 Miles

SUBTOTAL \$27.88
5% GST \$0.21

TOTAL \$28.09
MasterCard TENDER \$28.09
Cash CHANGE \$0.00

NUMBER OF ITEMS 6

*****YOUR SAVINGS*****
Discounts & Specials \$2.10
Your Total Savings \$2.10
Percentage Savings 7%

AIR MILES

Member number: [REDACTED]
Total Miles Earned [REDACTED]

Your AIR MILES Balances

Cash Miles [REDACTED]
Dream Miles [REDACTED]

MERCHANT 22255554 RF
TERMINAL ID SB222555403
** Purchase ** \$ 28.09
CARD MasterCard RCPT 3281000
NO [REDACTED] RESP 001
DATE 11/23/2018 TIME 21:35:03
AUTH # [REDACTED] REF# 001494198
APPL. MasterCard
AID A0000000041010

FOR ADV

DATE MAY 8824 NDJ

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	11/23/18
3	3281	8824	133	21:34:59

Thank you for shopping at Our Store
Come Again 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: _____

Purpose:

lunch for meeting

Hosting = \$13.47 plus GST



concerns : email at aw1473@telus.net

1 Teen	\$6.39
1 Rings	\$3.89
1 +Seeded Bun	\$1.60
1 Extra Mustard	\$0.00
1 Extra Lettuce	\$0.00
1 Extra Tonato	\$0.00
1 Hash Brown	\$1.69
1 Hash Brown	\$1.69
1 Open Coupon:	(\$1.79)

Subtotal:	\$13.47
GST:	\$0.67
Total:	\$14.14
Grand Total:	\$14.14
Visa:	\$14.14
Change Due:	\$0.00

Drive Thru

Order #: 495

Proud Partner of the
Calgary Flames & Stampeders

GST # 809511678

Thank You! Please Come Again!!!

Order Started: 12:32:15 PM

Fri Dec 14, 2018 12:34:49

Receipt # : 8687213

Cashier: Abigail

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: _____

Purpose:

lunch for meeting

Hosting = \$24.40 plus GST

LATTE SMALL	\$4.00 T1
CAPPUCCINO LARGE	\$4.50 T1
ITALIAN PANINI	\$7.95 T1
PORCHETTA PANINI	\$7.95 T1

Net Sales	\$24.40
GST [\$24.40]	\$1.22
TOTAL SALES	\$25.62

SUB TOTAL	\$25.62
Visa	\$25.62

[REDACTED]

Item count	4
------------	---

TYPE : PURCHASE
TENDER : VISA CREDIT
CARD : [REDACTED]
AID : A0000000031010
AMOUNT : CAD\$25.62

RESULT : APPROVED
DATE/TIME : NOV 02 2018 13:04:01
TERM.ID : LIMJKC03
SEQUENCE# : 128001001033
AUTHOR.# : [REDACTED]
FVR : 8080008000
TSI : 7800
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 [REDACTED]

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:

office xmas lunch

Hosting = \$73.97 plus GST

SUSHI BISTRO ANZU
1721 CENTRE ST NW T2E2S3
CALGARY AB
22919274
GW2291927401

**** PURCHASE ****

12-20-2018 12:33:44
Acct # [REDACTED] C
Exp Date [REDACTED] Card Type VI
Name: [REDACTED]
A0000000031010 VISA CREDIT

Trace # 12737
Inv. # 14058
Auth # [REDACTED] RRN 001001098

Purchase \$67.10
Tip \$10.07
Total \$77.17

(001) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

Sushi Bistro Anzu

1721 Centre St. NW
Calgary, AB Canada T2E 2S3
Tel: 403-277-2077
GST#829900638RT0001

Guest Check #00001

Table : 3

Cover : 3 Date : 20/12/18
Time : 12:33:12 Open By : Lunch Serve

1	Asrt Tempura	12.00
1	Hell Ramen	15.00
1	Ramen	14.00
2	Inari	3.60
1	Shiitake	1.80
2	Avocado R	8.50
1	California R	4.75
1	Kappa R	4.25

Item Total(\$): 63.90
Tax(\$): 3.20

Total(\$): 67.10

No. of Print : 1
Print Time : 12:33:12 server

Thank You! Please leave a review.
www.sushibistro.com

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:

Dinner with constituent

Hosting = \$28.94 plus GST

Pho Li
#1, 2400 Centre St NE
Calgary, AB T2E 2T9
Tel: 403 276 3686
Tax ID: 731943080

TABLE # 3
TABLE # 3
CHECK# 236.1
Closed to Debit Card

DATE/TIME: 17/01/2019 6:07:52 PM
CASHIER: 100101
STATION: 01

1 19-SATAY CHICKEN NOODLE S	\$9.95
-Reg Size	
1 27-SHRIMP,BEEF OR CHIC **	\$12.95
1 #1-F SPRING ROLLS*	\$6.50
INDISCOUNTED TOTAL	\$29.40
- 15.00% Discount	-\$4.41
Subtotal	\$24.99
Tax	\$1.25
GRAND TOTAL	\$26.24

Debit Card \$26.24

DEBIT CARD PURCHASE \$26.24

Transaction Type: PURCHASE

Opened: 17/01/2019 6:07 PM

PHO LI VIETNAMESE CUIS-
2400 CENTRE ST NE T2E2T9
CALGARY AB
23654343
QC2365434301

SALE

01-17-2019 18:08:23
Acct # [REDACTED] C
Exp Date [REDACTED] Card Type VI
Name: [REDACTED]
A0000000031010
VISA CREDIT

Trace # 100014
Inv. # 92
Auth # [REDACTED] RRN 001011014

Sale \$26.25
Tip \$3.94

TOTAL \$30.19

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

Retain this receipt for your

Customer Copy