

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2017-18  
068 - Lethbridge-East - Fitzpatrick, Maria  
For Expenses Processed Apr 1 to Jun 30, 2017

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$461.57	\$461.57
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$352.37	\$352.37
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$853.15	\$853.15
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$5,790.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
<b>Other</b>			
Hosting - \$		\$42.09	\$42.09
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (43.5 cents per km)</b>			
Constituency Travel (Kilometres) - NF	35,000.0	309.0	309.0
Special Trips (5 trips per year) - NF	5.0		
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF		14.5	14.5
Use of a Private Automobile (52 trips per year) - NF	52.0	10.0	10.0
<b>Other Travel</b>			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		

\$ - Reported on CAD dollar amount of actual expense

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

Budget reported is the maximum annual amount that may be claimed

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

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

\$28.57

PETRO-CANADA  
2657 SCENIC DR  
LETHBRIDGE  
Alberta T1H 5L9

GST: 119335453

2017-03-25 PC0027415:7793501 (403) 000-0000 15:42

TERMINAL: 027793501 OPER: A

PAYPOINT: 027793501

\*\* PREAUTH RECEIPT ONLY \*\*

FUEL	(L)	(\$/L)	(\$)
Pump 1 PREPAID			
DIESEL	28.328	1.059	30.00
Total Owed			30.00

TOTAL PAID  
CREDIT CARD \$ ~~30.00~~

VISA CREDIT  
A0000000031010  
8080008000  
7800

VERIFIED BY PIN

GO APPROVED - THANK YOU

-- IMPORTANT --  
Retain This Copy For Your Records

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

Northside Gas King  
#250  
944 5 Ave N  
Lethbridge, AB  
T1M 0H4  
403-328-3869

Inv#: 9065526  
Trans: Pre-Auth  
Completion

\*\*\* C  
VISA CREDIT  
AID: A0000000031010  
Seq#: 508001001001  
Terminal ID: 6H15PC04

ACI/ISO: 001/00  
Date: 09/04/2017  
Time: 3:12:55 PM  
TUR000000000  
TSI 7800  
APPROVED

Pump # : 4-DSL  
Vol : 35.323L  
Price/L : \$1.039  
Total : \$36.70

Fuel Includes:  
GST(5.0%):\$1.75  
Tax Total:\$1.75  
GST # R101957306

Pump # : 4-DSL  
Vol : 35.323L  
Price/L : \$1.039  
Total : \$36.70

Fuel Includes:  
GST(5.0%):\$1.75  
Tax Total:\$1.75  
GST # R101957306

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

PETRO-CANADA  
2653 SCENIC DR  
LETHBRIDGE  
ALBERTA T1H 5L9  
(403) 000-0000

GST 119335453  
PC0033720:7793501  
TERMINAL: 027793501  
PAYPOINT: 027793501

~~2017-04-17~~ 12:00

PUMP 07  
PREPAID GAS SALE  
DIESEL  
LITRES L 44.631  
PRICE/L \$ 1.059  
FUEL SALES \$ 47.26

TOTAL OWED \$ 47.26

TOTAL PAID  
CREDIT CARD \$ ~~47.26~~

UISA



PURCHASE  
C 0010010010 00 027

UISA CREDIT  
A0000000031010  
8080008000  
7800  
INVOICE 020776

VERIFIED BY PIN

00 APPROVED  
THANK YOU 027

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\*\*\* BONUS POINTS \*\*\*  
IF APPLICABLE, WILL  
BE UPDATED LATER

THANK YOU FOR BEING  
A PETRO-POINTS AND  
MORE REWARDS MEMBER

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

11103 ELLERSLIE RD  
EDMONTON AB T6W 0E9

ESS: EXPRESS PAY

7 ELEVEN STORE 37813  
00302295  
11103 ELLERSLIE ROAD  
EDMONTON, AB T6W 0E  
URN:R119335453  
~~04/21/2017~~ 436650366  
07:52:10 AM

PUMP# 3  
BIODL 14.671L  
PRICE/L \$1.049  
FUEL TOTAL \$ 15.39

GST in fuel \$ 0.73  
CREDIT \$ ~~15.39~~

TYPE: PURCHASE

ACCOUNT: VISA

\$15.39

INVOICE: TUCKER

VERIFIED BY PIN

A- VISA CREDIT

B- A0000000031010

01 Approved - Thank You 027

HTLES:

IMPORTANT - retain this copy for your records

THANK YOU

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: MAria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Fuel MLA Car

PETRO-CANADA  
9936 109 STREET  
EDMONTON  
Alberta T5K 1H5

GST: 0885609321 (780) 423-1429  
2017-05-04 PC0843041:8598601 17:08  
TERMINAL: 028598601 OPER: A  
PAYPOINT: 028598601

\*\* FINAL RECEIPT \*\*

FUEL	(L)	(\$/L)	(\$)
Pump 7			
Regular	35.698	0.949	33.88*
Total Owed			33.88

**TOTAL PAID**  
**CREDIT CARD \$ 33.88**

\*TAXES INCL. #TAXES EXCL.

GST TOTAL \$ 1.61

Purchase  
C 0010010010 00 027

VISA CREDIT  
A0000000031010  
8080008000  
7800

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00 APPROVED - THANK YOU

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Survey! Earn Points  
& chance to win gas  
[petro-canada.ca/hero](http://petro-canada.ca/hero)

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: MAria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Fuel MLA Car

7 ELEVEN STORE 37813  
11103 ELLERSLIE ROAD S. W.  
EDMONTON, AB T6W 0E9

00302295

VRN:R119335453

05/11/2017 4:23:16 PM

Register: 1 Trans #: 5425 Up ID: 217  
Your cashier: silky

\*\*\* PREPAID RECEIPT \*\*\*

BIODL CA PUMP# 4 \$40.00 101  
GST Incl In Fuel \$1.90

Subtotal = \$40.00

Total = \$40.00

Change Due = \$0.00

Credit \$40.00

TYPE: PURCHASE

ACCOUNT: VISA

\$40.00

INVOICE: TWG04286

CARD NUMBER: C \*\*\*\* \*

VERIFIED BY PIN

A- VISA CREDIT

B- 4000000031010

E- 8080009000

G- 8080009000

01 Approved - Thank You 027

LOYALTY AWARDED, DETAILS TEMPORARILY  
UNAVAILABLE

IMPORTANT - retain this copy for your  
records

Pre-approved maximum purchase amount

Store Copy

Thank You

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: MAria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Fuel MLA Car

Northside Gas King  
#258  
944 5 Ave N  
Lethbridge, AB  
T1H 0H4  
403-328-3069

Inv#: 9066591  
Trans: Pre-Auth  
Completion

\*\*/\* C  
VISA CREDIT  
AID: A0000000031010  
Seq#: 538001001003  
Terminal ID: 0N15PC00

ACI/ISO: 001/00  
Date: 07/05/2017  
Time: 2:25:26 PM  
TUR8080008000  
TSI 7800  
APPROVED

Pump # : 4-DSL  
Vol : 43.575L  
Price/L : \$1.039  
Total : \$45.27

Fuel Includes:  
GST(5.0%):\$2.16  
Tax Total:\$2.16  
GST # R101957306

Pump # : 4-DSL  
Vol : 43.575L  
Price/L : \$1.039  
Total : \$45.27

Fuel Includes:  
GST(5.0%):\$2.16  
Tax Total:\$2.16  
GST # R101957306



LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

MLA Vehicle Fuel

\$ 23.80

PETRO-CANADA

2653 SCENIC DR

LETHBRIDGE

ALBERTA T1H 5L9

(403) 000-0000

GST 119335453

PC0027416:7793501

TERMINAL: 027793501

PAYPOINT: 027793501

2017-03-29 15:42

PUMP 01

PAYMENT GAS SALE

DIESEL

LITRES L 23.603

PRICE/L \$ 1.059

FUEL SALES \$ 25.00

TOTAL OWED \$ 25.00

TOTAL PAID

CREDIT CARD \$ 25.00

UISA

AUTH

PURCHASE

0010010010 00 027

UISA CREDIT

80000000031010

8080000000

7800

INVOICE, 015030

VERIFIED BY PIN

00 APPROVED

THANK YOU 027

IMPORTANT

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\*\*\*\*\*

PETRO-POINTS

BALANCE BEFORE

PURCHASE

\*\*\*\*\*

\*\*\* BONUS POINTS \*\*\*

IF APPLICABLE, WILL

BE UPDATED LATER

## Personal Expense Claim Receipt Description

Member Name: Maria FitzpatrickClaimant Name: Maria FitzpatrickExpense Category: Fuel and Minor Maintenance

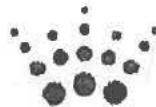
For hosting, select one:

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

Purpose:

MLA Vehicle Fuel

\$ 40.00

**GasKing.**

Eastside Gas King #150  
213 N Mayor Magrath Dr  
Lethbridge, AB  
T1H 3P7  
Tel (403) 320-6686  
GST R101957306

SALE RECEIPT # 3560025  
Customer: Cash Sale  
Cashier: Stef (R2/T1/S3)  
04-Jun-2017 at 03:15 PM

Description	Quantity	Price	Amount
Diesel Pump-7	40.421L	\$1.039/L	\$42.001
Sub Total			42.00
Total			42.00
GST (5.0%) included in		\$42.00	2.00
Credit Card			42.00
Total Tendered			42.00

Download the Free Gas King App  
today. Details at [gasking.com](http://gasking.com).

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

MLA Vehicle Fuel

\$ 44.60

ESSO

7 ELEVEN STORE 37813  
11103 ELLERSLIE ROAD S. W.  
EDMONTON, AB T6V 0E9

ESSO EXPRESS PAY

2017-06-08 16:30:04

TRANS #: 001798

STATION#: 00302295

GST #: R119335453

PUMP 4

BIODL \$ 46.83

46.413L AT \$1.009/  
L

GST INCLUDED \$ 2.23

TOTAL \$ 46.83

TYPE: PURCHASE

UISA

INVOICE NO: TWG/4316

AUTH: [REDACTED]

UISA CREDIT

A0000000031010

8080008000

7800

01 APPROVED - TH

ANK YOU 027

VERIFIED BY PIN

LOYALTY: NO

YOU COULD HAVE  
EARNED 46 ESSO EXTRA  
POINTS. YOUR FIRST  
REWARD STARTS AT 150  
POINTS.

PICK ONE UP IN STORE  
OR VISIT  
ESSOEXTRA.COM

RECONCILIATION ID:

TWG717060816270945

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LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

MLA Vehicle Fuel
\$ 37.87

PETRO-CANADA  
2653 SCENIC DR  
LETHBRIDGE  
ALBERTA T1H 5L9  
(403) 000-0000

GST 1193.5453  
PC0054617:7793501  
TERMINAL: 027793558  
PAYPOINT: 027793501

2017-06-11 13:14

PUMP 08  
DIESEL  
LITRES L 38.272  
PRICE/L \$ 1.039  
FUEL SALES \$ 39.76

TOTAL OWED \$ 39.76

TOTAL PAID  
CREDIT CARD \$ 39.76

UISA  
[REDACTED] C  
AUTH [REDACTED]  
PURCHASE  
C 0010010010 00 027

UISA CREDIT  
A00000000031010  
8080000000  
7800  
INVOICE 039786

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00 APPROVED  
THANK YOU 027

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LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

MLA Vehicle Fuel

\$ 40.42

WELCOME

Shell Canada  
5830 104 STREET  
T6H 2K3  
EDMONTON AB  
(780) 437-2220

Diesel  
PUMP No. 08  
LITRES 42.917  
PRICE/L \$0.989  
TOTAL FUEL \$42.44

TOTAL SALE \$42.44  
VISA \$42.44

FUEL INCLUDES  
GST - Fuel \$2.02  
No. 137400032RT

01 APPROVED - THANK  
YOU 001

APPROVAL No. [REDACTED]  
TERMINAL No.  
89000450  
VERIFIED BY PIN

IMPORTANT  
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your records

VISA  
PURCHASE C

INV No. 0004599786  
2017/06/15 20:01  
VISA CREDIT  
AID A0000000031010  
TVR 8080008000  
TSI 7800

YOUR OPINION COUNTS  
Tell us about your  
recent visit at  
[www.shell.ca/opinion](http://www.shell.ca/opinion)  
and you could win a  
\$500 Shell Gift Card  
\*Receipt Required

THANK YOU  
Questions?  
1-800-661-1600

STORE: C00045  
TRAN: 2405607  
6/15/2017 8:04:53

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

MLA Vehicle Fuel

\$ 38.21

ESSO

7 ELLESLIE RD. #37813  
11103 ELLERSLIE ROAD S. W.  
EDMONTON, AB T6V 0E9

ESSO EXPRESS PAY

2017-06-23 09:35:27

TRANS #: 018214  
STATION#: 00302295  
GST #: R119335453

PUMP 4  
BIODL \$ 40.12  
40.565L AT \$0.989/L

GST INCLUDED \$ 1.91

TOTAL \$ 40.12

TYPE: PURCHASE  
VISA

INVOICE NO: TWG  
AUTH: [REDACTED]

VISA CREDIT  
A0000000031010  
8080008000  
7800

01 APPROVED - TH  
ANK YOU 027

VERIFIED BY PIN

LOYALTY: NO

YOU COULD HAVE  
EARNED 40 ESSO EXTRA  
POINTS. YOUR FIRST  
REWARD STARTS AT 150  
POINTS.  
PICK ONE UP IN STORE  
OR VISIT  
ESSOEXTRA.COM

RECONCILIATION ID:  
TWG717062309331358

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Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

\$61.90

From 410 Port  
To Downtown  
Time 8:30  
Date March 20, 2017  
Trip Amount 65  
Driver Name Swinder  
Car Number 911  
GST \_\_\_\_\_

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

\$61.90

From Air Port  
To Downtown  
Time 8:30  
Date April 3, 2017  
Trip Amount 65  
Driver Name Surinder  
Car Number 911  
GST \_\_\_\_\_



Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

\$52.38

*Official Receipt*

Date: April 7 2017 55

To: Al R

Unit: 911 Driver: Sarah GST: \_\_\_\_\_

Thank You for using Airport Taxi Service  
Customer service: [information@airporttaxiservice.ca](mailto:information@airporttaxiservice.ca)

24 Hour Service

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: MARIA Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

taxi Airport - Legislature

\$52.38

Official Receipt

Date: April 29, 2017

Amount: 55

From: Air Port

To: [REDACTED]

Unit: 911

Driver: Sander

GST: \_\_\_\_\_

Thank You for using Airport Taxi Service  
Customer service: information@airporttaxiservice.ca

24 Hour Service



Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

MLA Taxi in Edmonton bwtm Airport and Legislature

\$ 61.90

**Official Receipt**

Date: June 19, 2017 Amount: 65

From: Downtown

To: Air Port

Unit: 711 Driver: Subinda GST: \_\_\_\_\_

Thank You for using Airport Taxi Service  
Customer service: [information@airporttaxiservice.ca](mailto:information@airporttaxiservice.ca)

24 Hour Service  
 

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

MLA Taxi in Edmonton bwt n Airport and Legislature

\$ 61.91

*Official Receipt*

Date: June 29 2017 Amount: 65<sup>00</sup>

From: Air Port

To: Down town

Unit: 911 Driver: Swindle GST: \_\_\_\_\_

Thank You for using Airport Taxi Service  
Customer service: [information@airporttaxiservice.ca](mailto:information@airporttaxiservice.ca)

24 Hour Service  
  



# 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:** Fitzpatrick, Maria M.

**Constituency:** Lethbridge-East

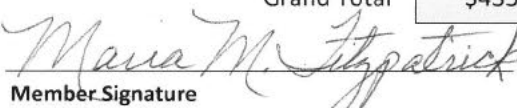
**For the Month of:** April

**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	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
4	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
5	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
6	60 km from Perm. Res.	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	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
11	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
13	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
19	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<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						\$435.29	\$21.76	\$457.05

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

Apr 24/17  
 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)

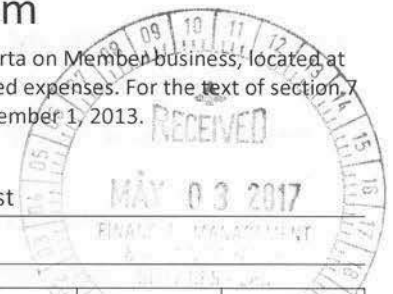
**Member Name:** Fitzpatrick, Maria M.

**Constituency:** Lethbridge-East

**For the Month of:** March

**Year:** 2016

**Employee #:**



Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
2	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
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	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
9	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
14	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
15	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
16	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
21	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
22	60 km from Perm. Res.	Edmonton	<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			<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						\$417.86	\$20.89	\$438.75

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

Member Signature

Date

*Maria M. Fitzpatrick* Apr 24/17



## Members' Temporary Accommodation Allowance Claim Form

68

**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:** Fitzpatrick, Maria M.

**Constituency:** Lethbridge-East

**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

April 2017

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

☒ Yes

☐ No

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

\$ 1,930.00

x 12 = \$ 23,160.00

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

**Claim Payment Authorization (please check)**



**12 Monthly Payments**

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

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

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

68

**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:** Fitzpatrick, Maria M.

**Constituency:** Lethbridge-East

**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

May 2017

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

☒ Yes

☐ No

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

\$ 1,930.00

x 12 = \$ 23,160.00

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

**Claim Payment Authorization (please check)**

☒ **12 Monthly Payments**

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

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

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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:** Fitzpatrick, Maria M.

**Constituency:** Lethbridge-East

**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.

June 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

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Sherry Hunt

Expense Category: Office supplies

For hosting, select one:

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

Purpose:

Coffee Purchase

\$ 2.09

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North Lethbridge

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Dairyland Creamo 1.99  
\*DEPOSIT AB 0.10

Card \$\$ pts- AB 9

Tax-Code	Taxable-Value	Tax-Value
GST		

**BALANCE DUE**

Rounding

Cash

**CHANGE**

\*\*\*

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Points Earned

More Rewards Total Points

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Save On Foods gift card

100% MONEY BACK GUARANTEE  
if returned within 14 days of  
purchase with original receipt  
(some restrictions apply)

CASHIER NAME: Elizabeth (E.A.)

C0168 #7545 08:39:37 09May2017  
S06645 R001

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Sherry Hunt

Expense Category: Office supplies

For hosting, select one:

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

Purpose:

Coffee Purchase

\$ 40.00

REÇU  
RECEIPT

REÇU DE RECEIVED FROM		DATE <u>June 13, 2017</u>
<u>Lethbridge Area Search &amp; Rescue</u>		\$ <u>40.00</u>
		100 DOLLARS
POUR FOR	<u>Lethbridge East Constituency Office</u>	
<u>RE: Coffee Sales</u>		NO. _____
N° DE TAXE TAX REG. NO. _____		PAR BY <u>RA</u>
		DC272B