

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2017-18
068 - Lethbridge-East - Fitzpatrick, Maria
For Expenses Processed Oct 1 - Dec 31, 2017

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$393.65	\$1,797.12
MLA Parking Cap - \$	\$900.00		\$31.67
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$546.09	\$1,269.88
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$236.95	\$236.95
Member Travel (Meal Per Diems) - \$			\$881.67
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$17,370.00
Travel Accommodations Allowance			\$584.26
Travel Accommodations Allowance (days; 10 max) - NF	10.0		3.0
Other			
Hosting - \$		\$246.91	\$289.00
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000.0	1,071.0	3,406.0
Special Trips (5 trips per year) - NF	5.0	1.0	2.0
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		6.0	20.5
Use of a Private Automobile (52 trips per year) - NF	52.0	3.0	17.0
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0	5.0	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

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

\$ 34.95

PETRO-CANADA
283188 RANGE R 293
ROCKYVIEW COUNTY
ALBERTA T0N 0S0
(403) 946-4923

GST 838442929P
PC0535910:7785001
TERMINAL: 027785054
PAYPOINT: 027785001

2017-10-01 17:34

PUMP 04
DIESEL
LITRES L 33.091
PRICE/L \$ 1.109
FUEL SALES \$ 36.70*

TOTAL OWED \$ 36.70

TOTAL PAID
CREDIT CARD \$ 36.70

* GST INCL. \$ 1.75

UISA

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:

Fuel

\$ 19.05

GasKingEastside Gas King #150
213 N Mayor Magrath Dr
Lethbridge, AB
T1H 3P7
Tel (403) 320-6686
GST R101957306SALE RECEIPT # 3678687
Customer: Cash Sale
Cashier: Iain (R3/T2/S3)
12-Oct-2017 at 09:50 PM

Description	Quantity	Price	Amount
Reg 87 Pump-5	20.330L	\$0.984/L	\$20.00
Sub Total			20.00
Total			20.00
GST (5.0%) included in	\$20.00		0.95
Cash			20.00
Total Tendered			20.00

Download the Free Gas King App
today. Details at gasking.com.

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:

Fuel

\$ 36.52

PETRO-CANADA
1606 H. MAGRATH DR.
LETHBRIDGE
ALBERTA T1K 2R5
(403) 329-8809

GST 838442929
PC0203021:8761101
TERMINAL: 028761154
PAYPOINT: 028761101
2017-10-13 14:40

PUMP
REGULAR
LITRES L 36.909
PRICE/L \$ 1.039
FUEL SALES \$ 38.35*

TOTAL DUE \$ 38.35

TOTAL PAID
CREDIT CARD \$ 38.35

* GST INCL. \$ 1.83

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	
	\$ 48.37

WELCOME

Shell Canada
2203 - 110 STREET
T6J 6P4
EDMONTON AB
(780) 437-2819

Diesel
PUMP No. 08
LITRES 46.637
PRICE/L \$1.089
TOTAL FUEL \$50.79

TOTAL SALE \$50.79
MASTERCARD \$50.79

FUEL INCLUDES
GST - Fuel \$2.42
No. 137400032RT

01 APPROVED - THANK
YOU

TERMINAL NO.
89440950
VERIFIED BY PIN

IMPORTANT
retain this copy for
your records

MASTERCARD
PURCHASE C

INV No. 4409590669
2017/10/18 18:37
PC MasterCard
AID A0000000041010
TVR 0000008000
TSI E800

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

THANK YOU
Questions?
1-800-661-1600

STORE: C44095
TRAN: 2749589
10/18/2017 6:40:40

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
\$ 51.55

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

GST 119335453
PC0111594:7793501
TERMINAL: 027793501
PAYPOINT: 027793501

2017-10-23 20:20

PUMP 07
PREPAID GAS SALE
DIESEL
LITRES L 47.941
PRICE/L \$ 1.129
FUEL SALES \$ 54.13*

TOTAL OWED \$ 54.13

TOTAL PAID
CREDIT CARD \$ 54.13

* GST INCL. \$ 2.58

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

\$ 44.17

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

GST 119335453
PC0067838:7793501
TERMINAL: 027793558
PAYPOINT: 027793501

2017-07-13 08:17

PUMP 08
DIESEL
LITRES L 46.422
PRICE/L \$ 0.999
FUEL SALES \$ 46.38

TOTAL OWED \$ 46.38

TOTAL PAID
CREDIT CARD \$ 46.38

UISA

AUTH
PURCHASE
C 0010010010 00 027

UISA CREDIT
A0000000031010
8080008000
7800
INVOICE 051885

VERIFIED BY PIN

00 APPROVED
THANK YOU 027

-- IMPORTANT --
RETAIN THIS COPY
FOR YOUR RECORDS
- CUSTOMER'S 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:

MLA vehicle Fuel

\$ 48.29

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

GST 119335453
PC0070061:7793501
TERMINAL: 027793555
PAYPOINT: 027793501

2017-07-18 18:09

PUMP 05
REGULAR
LITRES L 53.424
PRICE/L \$ 0.949
FUEL SALES \$ 50.70

TOTAL OWED \$ 50.70

TOTAL PAID
CREDIT CARD \$ 50.70

UISA

AUTH [REDACTED]
PURCHASE
C 0010010010 00 027

UISA CREDIT
A00000000031010
8080008000
7800
INVOICE 053950

VERIFIED BY PIN

00 APPROVED
THANK YOU 027

-- IMPORTANT --
RETAIN THIS COPY
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-- CUSTOMER'S 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:

MLA vehicle Fuel

\$ 43.49

Eastside Gas King

#150

213 N Mayor Magrath

Lethbridge AB

T1H 3P7

403-320-6686

Inu# 9055371

Trans: Pre-Auth

Completion

**/* C

VISA CREDIT

AID: A0000000031010

Seq#: 581001001001

Terminal ID: GE15PC03

Auth No: [REDACTED]

ACI/ISO: 001/00

Date: 23/07/2017

Time: 12:44:36 PM

TUR000000000

TSI 7800

APPROVED

Pump # : 3-DSL

Vol : 45.707L

Price/L : \$0.999

Total : \$45.66

Fuel Includes:

GST(5.0%):\$2.17

Tax Total:\$2.17

GST # R101957306

Pump # : 3-DSL

Vol : 45.707L

Price/L : \$0.999

Total : \$45.66

Fuel Includes:

GST(5.0%):\$2.17

Tax Total:\$2.17

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
\$ 31.60

Eastside Gas King
#150
213 N Mayor Hagrath
Lethbridge AB
T1H 3P7
403-320-6686

Inv#: 905530
Trans: Pre-Auth
Completion

*** C
VISA CREDIT
AID: A0000000031010
Seq#: 504001001008
Terminal ID: GE15PC03
Auth No: [REDACTED]
ACI/ISO: 001/00
Date: 26/07/2017
Time: 3:27:19 PM
TUR000000000
TSI 7800
APPROVED

Pump # : 3-BSL
Vol : 33.209L
Price/L : \$0.999
Total : \$33.18

Fuel Includes:
GST(5.0%):\$1.58
Tax Total:\$1.58
GST # R101957306

Pump # : 3-BSL
Vol : 33.209L
Price/L : \$0.999
Total : \$33.18

Fuel Includes:
GST(5.0%):\$1.58
Tax Total:\$1.58
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
\$ 35.67

Northside Gas King
W250
944 5 Ave N
Lethbridge, AB
T1H 0H4
403-323-3059

Invt#: 9062 16
Trans: P a-Auth
Completion

*** C
VISA CREDIT
AID: A0000000031010
Seq#: 406001001001
Terminal ID: 0415PC04
Auth No: [REDACTED]
ACI/ISO: 001/00
Date: 08/31/2017
Time: 12:40:14 PM
TURBUS000000
TS1 7800
APPROVED

Pump # : 4-DSL
Vol : 34.709L
Price/L : \$1.079
Total : \$37.45

Fuel Includes:
GST(5.0%):\$1.78
Tax Total:\$1.78
GST # R101957306

Pump # : 4-DSL
Vol : 34.709L
Price/L : \$1.079
Total : \$37.45

Fuel Includes:
GST(5.0%):\$1.78
Tax Total:\$1.78
GST # R101957306

Personal Expense Claim Receipt Description

Taxi fare	
	\$ 61.90

24 Hour Service



Personal Expense Claim Receipt Description

\$ 52.38



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 fare

\$ 61.90

Official Receipt

Date: Oct 30, 2017 Amount: 65

From: Air Port

To: Downtown

Unit: 911 Driver: Swinder 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:

Taxi fare

\$ 61.90

Official Receipt

Date: 01-11-17 Amount: \$65

From: 99 AVE 107 St

To: AIRPORT

Unit: 99 Driver: TEJ GST: _____

Thank You for using Airport Taxi Service
Customer service: 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 fare

\$ 61.91

Official Receipt

Date: Nov 06 17 Amount: 65 \$

From: Airport

To: Legislative building downtown

Unit: 153 Driver: Aman GST: _____

Thank You for using Airport Taxi Service
Customer service: 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 fare

\$ 61.91

Official Receipt

Date: Nov 9, 2017 Amount: 65

From: Downtown

To: Air Port

Unit: 011 Driver: Shane GST: _____

Thank You for using Airport Taxi Service
Customer service: 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

\$52.38 + GST

Official Receipt

Date: Dec 3, 2017 Amount: \$55.00

From: VEG

To: Residence

Unit: 128 Driver: Chad GST: _____

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

 

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 fare in Edmonton



\$52.38 + GST

Official Receipt

Date: Nov 30, 2017 Amount: 55

From: [Redacted]

To: [Redacted]

Unit: 911 Driver: Swinky

Thank You for using Airport Taxi Service
Customer service: 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 fare in Edmonton

\$52.38 + GST

Official Receipt

Date: Nov 8/2017 Amount: \$55.00

From: _____

To: _____

Unit: 776 Driver: Sundt GST: _____

Thank You for using Airport Taxi Service
Customer service: 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
\$27.05 + GST

AIRPORT TAXI SERVICE
4608 101 ST.
(7808967070)
EDMONTON AB

CARD *****
CARD TYPE VISA
DATE 2017/11/2
TIME 4:52 08:41:00
INVOICE # 811
RECEIPT NUMBER
C85041275-001-071-011

PURCHASE
TOTAL
\$28.40

VISA CREDIT
A0000000031010
2E092C6EFA778CB8
8080008000-6800
61C8C0FC616675EA
8080008000-7800

APPROVED
AUTH#
THANK YOU

CARDHOLDER COPY

FOR USE ONLY

Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Vehicle Lease/Rental

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

MLA claimed only a portion of the total expense

\$ 236.95



RA # 172351339		RES # 1924433748		
MARIA FITZPATRICK LETHBRIDGE, AB T1H 4V7		ACCOUNT EXT REF #		
RENTAL LOCATION LETHBRIDGE AIRPORT (403)380 3070 417 STUBB ROSS RD LETHBRIDGE, AB T1K7N3		RENTAL DATE 03-OCT-2017 RENTAL TIME 07:16 PM		
RETURN LOCATION LETHBRIDGE AIRPORT (403)380 3070 417 STUBB ROSS RD LETHBRIDGE, AB T1K7N3		RETURN DATE 13-OCT-2017 RETURN TIME 04:00 PM		
RATE RULES AND QUALIFICATIONS INITIAL X _____ WEEKLY LOCAL RATE Min. rental 5 days Max. rental 28 days		VEHICLE INFORMATION RESERVED INTERMEDIATE 2/4 DOOR AUTOMATIC A/C DRIVEN Full Size 2/4 Door Car Auto A/C CHARGED INTERMEDIATE 2/4 DOOR AUTOMATIC A/C MAKE HYUNDAI MODEL SONATA COLOR WHITE ODOMETER 25112 PLATE L93080 REG AREA AB VEHICLE # HH535252 BAY STALL		
CHARGES		UNIT	PRICE/UNIT	CURRENT CHARGE
RENTER'S RESPONSIBILITY				
* TIME & DISTANCE		WEEK	284.35 X 1	284.35
* EXTRA - TIME & DISTANCE		Hour	15.80 X	0.00
* EXTRA - TIME & DISTANCE		Day	47.39 X 3	142.17
* UNLIMITED MILES/KM-TIME & DISTANCE		M/KM	0.00 X	0.00
* REFUELING SERVICE CHARGE		Litre	2.12 X	0.00
* CONCESSION RECOUP FEE 8.7 PCT @ 8.70%				39.71
* VEH LIC RECOUPMENT 2.99/DAY		Day		29.90
GOODS AND SERVICES TAX 5.00%				24.81
ESTIMATED CHARGES				520.94 INITIAL X _____
(ALL CHARGES ARE ESTIMATE ONLY - SUBJECT TO CHANGE IF VEHICLE NOT RETURNED TO THE LOCATION ON DATE AND TIME SPECIFIED, OR IF FUEL TANK IS NOT FULL AT RETURN AND FUEL SERVICE OPTION WAS NOT PURCHASED).				
PAYMENTS VISA 4542 Auth #				
I DECLINE OPTIONAL LOSS DAMAGE WAIVER. X _____				
I DECLINE NATIONAL'S OPTIONAL ROADSIDE ASSISTANCE PROTECTION X _____				
I RECOGNIZE THAT MY INSURANCE POLICY WILL BE PRIMARY INSURANCE COVERAGE FOR DAMAGE OR LIABILITY AS TO THE CAR WHILE I AM THE RENTER. X _____				
I, THE "RENTER" SIGNING BELOW, HAVE READ AND AGREE TO THE TERMS AND CONDITIONS IN THE RENTAL AGREEMENT JACKET. BY SIGNING BELOW, I AM AUTHORIZING OWNER TO CHARGE TO THE CREDIT CARD(S) AND/OR DEBIT CARD(S) THAT I HAVE PROVIDED TO OWNER ALL AMOUNTS OWED BY ME UNDER THIS AGREEMENT FOR ADVANCE DEPOSITS, INCREMENTAL AUTHORIZATIONS/DEPOSITS, AND ANY OTHER AMOUNTS OWED BY ME, AS WELL AS PAYMENTS REFUSED BY A THIRD PARTY TO WHOM BILLING WAS DIRECTED. I ALSO AUTHORIZE OWNER TO RE-INITIATE ANY CHARGE TO MY CARD(S) THAT IS DISHONORED FOR ANY REASON. I CERTIFY THAT THE DRIVERS LICENSE(S) PRESENTED IS CURRENTLY VALID AND IS NOT SUSPENDED, EXPIRED, REVOKED, CANCELLED OR SURRENDERED. I FURTHER ACKNOWLEDGE AND CONSENT TO THE DISPUTE RESOLUTION PROVISIONS CONTAINED IN THIS AGREEMENT.				
RENTER : _____		OWNER: Wild Roads Rental Ltd SMOKING AND PETS NOW PERMITTED IN THE VEHICLE		

RA # 172351339

PAGE 1 OF 1



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 #: 6545340

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.

OCTOBER 2017

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


Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

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

Member Name: Fitzpatrick, Maria M.

Constituency: Lethbridge-East

Employee #: 6545340

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.

NOVEMBER 2017

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


Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

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

Member Name: 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.

December 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: Maria Fitzpatrick

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☐ Group: Lethbridge and District Labour council

Purpose:

Meet and greet snacks
\$ 114.00

Kingsmen Pub
2012 Mayor Magrath Drive South
Lethbridge, Alberta T1K-2R9
403+-328-0423

11/01/17 8:38 PM
Table 30:1 Cust 2 Order # 4037
Your Server: Tracey

4 Dover Nachos	71.00
ADD Beef	20.00
1 Steak Sandwich	21.00
ADD Onion	2.00

GST # 811256767

Thank you for your patronage
Please Don't Drink and Drive

Please pay your server.

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Maria fitzpatrickClaimant Name: Maria FitzpatrickExpense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)☐ Individual Stakeholder(s)☐ Group: Nikka Yuko Board member and Exec Dir

Purpose:

Lunch Meeting

\$ 87.40

Thank you! :)

Mocha Cabana Bistro

317 4th St. South Lethbridge, AB T1J 1Z9

Phone #: 403-329-6243

GST #B70272002RT0001

Check#: 44217

Table: 34

Server: Mike 67 M

Check Desc: \$91.77

11/02/17

12:57pm

---[Seat 1]---	
1 Soup & Salad Combo	\$14.90
---[Seat 2]---	
1 HALF COTTAGE PIE	\$15.95
---[Seat 3]---	
1 Daily Lunch Feature	\$16.95
---[Seat 4]---	
1 Daily Lunch Feature	\$16.95
1 Coffee	\$2.85
---[Seat 5]---	
1 Daily Lunch Feature	\$16.95
1 Coffee	\$2.85

Subtotal: \$87.40

Tax:: \$4.37

Sub w/Tax: \$91.77

Total: **\$91.77**

Please Pay your server at the table

www.mochacabana.ca

Like us on Facebook-

www.facebook.com/mocha.cabana1

Have a great day!

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:

Gift Basket for Canadian Labour Film Festival Door Prize, plus
office supplies

\$45.51

AID: A0000002771010

TVR: 0080008000

00 APPROVED - THANK YOU 001

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CHANGE

\$0.00

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Points Earned

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if returned within 14 days of
purchase with original receipt
(some restrictions apply)

CASHIER NAME: Paula

C0140 #0744 08:36:43

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Cuppers Coffee	12.99
Cuppers Coffee	12.99
Dairyland Cream	2.45
*DEPOSIT	0.10
Hershey Kisses	4.99 G
Card 2/\$6.00 Save	1.99
LINDT LINDOR	7.99 G
Card \$6.99 Save	-1.00
LINDT LINDOR	7.99 G
Card \$6.99 Save	-1.00

Sub Total \$45.51

Card \$\$ pts- AB 45

Tax-Code	Taxable-Value	Tax-Value
GST	16.98	0.85

BALANCE DUE \$46.36

Debit \$46.36

[CHQ]

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

TYPE: Purchase INTERAC

ACCT: Chequing \$ 46.36

CARD NUMBER:

DATE/TIME: 11/29/2017 08:37:25

REFERENCE #: 0010011820 C

TERM: 66263872

AUTHOR.# :

TSI F800

Interac