

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2017-18  
068 - Lethbridge-East - Fitzpatrick, Maria  
For Expenses Processed Jan 1 - Mar 31, 2018

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
Transportation			
Fuel and Minor Maintenance - \$		\$447.27	\$2,244.39
MLA Parking Cap - \$	\$900.00		\$31.67
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$723.77	\$1,993.65
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			\$236.95
Member Travel (Meal Per Diems) - \$			\$881.67
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$23,160.00
Travel Accommodations Allowance			\$584.26
Travel Accommodations Allowance (days; 10 max) - NF	10.0		3.0
Other			
Hosting - \$		\$801.05	\$1,090.05
<b>Non-Financial Reporting</b>			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000.0	1,193.0	4,599.0
Special Trips (5 trips per year) - NF	5.0	1.0	3.0
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			20.5
Use of a Private Automobile (52 trips per year) - NF	52.0	2.0	19.0
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	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

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Maria fitzpatrick

Claimant Name: Maria Fitzpatrick

Expense Category: Fuel and Minor Maintenance

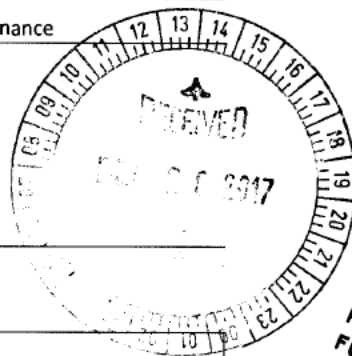
For hosting, select one:

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

Purpose:

Fuel

\$53.82



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

GST 119335453  
PC0131923:7793501  
TERMINAL: 027793558  
PAYPOINT: 027793501

2017-12-08 16:22

PUMP  
DIESEL  
LITRES L 46.740  
PRICE/L \$ 1.209  
FUEL SALES \$ 56.51\*

TOTAL OWED \$ 56.51

TOTAL PAID  
CREDIT CARD \$ 56.51

\* GST INCL. \$ 2.69

0000000031010  
0000000000  
7800

INVOICE 109492

VERIFIED BY PIN  
00 APPROVED  
THANK YOU 027

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

LEARN HOW TO  
SAVE 3 CENTS/L  
EVERYDAY AT  
PETRO-CANADA.CA/RBC

THANKS FOR SHOPPING!  
SURVEY! EARN POINTS  
& CHANCE TO WIN GAS  
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

\$55.24



**GasKing**

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

SALE RECEIPT # 3731539  
Customer: Cash Sale  
Cashier: Mary (R3/T2/S2)  
14-Dec-2017 at 10:42 AM

Description	Quantity	Price	Amount
Diesel Pump-8	48.374L	\$1.199/L	\$58.00I
Sub Total			58.00
Total			58.00
GST (5.0%) included in		\$58.00	2.76
Credit Card			58.00
Total Tendered			58.00

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:

Fuel
<div style="text-align: right;">\$54.81</div>



**GasKing**

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

SALE RECEIPT # 3736958  
Customer: Cash Sale  
Cashier: Ryan (R2/T1/S2)  
20-Dec-2017 at 02:00 PM

Description	Quantity	Price	Amount
Diesel Pump-8	49.227L	\$1.169/L	\$57.551
Sub Total			57.55
Total			57.55
GST (5.0%) included in	\$57.55		2.74
Credit Card			57.55
Total Tendered			57.55

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

保鮮性佳

**THANKS FOR SHOPPING!  
SURVEY? EARN POINTS  
& CHANCE TO WIN GAS  
PETRO-CANADA.CA/HERO**



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



\* GST INCL. \$ 1.85

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: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Taxi in Edmonton

\$61.90



*Official Receipt*

Date: Dec 11, 2017 Amount: 65

From: \_\_\_\_\_

To: \_\_\_\_\_

Unit: all Driver: Sandra GST: \_\_\_\_\_

Thank You for using Airport Taxi Service  
Customer service: [information@airporttaxiservice.ca](mailto: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 in Edmonton
\$61.90



*Official Receipt*

Date: Dec 13, 2017 Amount: 65

From: \_\_\_\_\_

To: \_\_\_\_\_

Unit: 911 Driver: Scandla GST: \_\_\_\_\_

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







**Official Receipt**

Date: March 7, 2018 Amount: 55

From: Am Port

[Redacted]

Unit: 911 Driver: Subida GST: \_\_\_\_\_

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

24 Hour Service







taxi	
	\$61.90 + GST

**Official Receipt**

Date: March 14 2018 Amount: 65

From: Art Bell

To: Downtown

Unit: 911 Driver: Scarb GST: \_\_\_\_\_

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

24 Hour Service

Member Name: Maria Fitzpatrick  
 Claimant Name: Maria Fitzpatrick  
 Expense Category: Taxi, Bus Travel

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

taxi	
	\$ 52.38 + GST

Date: March 14, 2018 Amount: 55

To: Mr. Hart

Unit: 911 Driver: Swindley 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:

airport - residence

\$52.38+GST

*Official Receipt*

Date: March 14 2018 Amount: \$55

From: Ali Port

Unit: 911 Driver: Swickel 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:

Downtown to airport

\$ 61.90 + GST

**Official Receipt**

Date: March 15, 2018 Amount: 65

From: Downtown

To: Air Port

Unit: 211 Driver: Sundep 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:

airport - residence

\$52.38 + GST

Official Receipt

Date: 19-3-18 Amount: 55\$

[REDACTED] BM

Driver: [REDACTED] Unit #: 535 GST # \_\_\_\_\_

Thank You for using Airport Taxi Services  
Gary: 780-710-4500

24 Hour Service  










## 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.

JANUARY 2018

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

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Maximum of \$23,160 per fiscal year.

**Fiscal Year:** 2017-2018

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☒ 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.

February 2018

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.

March 2018

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 District Labour Council

Purpose:

Christmas party

\$60.00



#37 - 2

Sisters Pub & Grill  
814 2nd Ave S.  
Lethbridge, AB T1J 0C6  
Phone (403)328-4882

Date: Dec 13, 2017 Time: 09:26PM  
Server: Nicole  
Bill: 0043 Table : 37

2 Full Platter

60.00

Subtotal  
GST 844130260

Total

GST 844130260 Incl 1.86

Open Time : Dec 13, 2017 07:28PM

Please Pay Server

Thank You!!



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: Sik Ooh Kotoki Friendship Centre

Purpose:

Pizza for constituents staying in temporary emergency shelter at  
Friendship centre

\$159.98 + GST

Papa Johns Pizza  
487 Mayor Magrath Dr S  
Lethbridge Ab  
GST# 82538 2252 RT0001

Name: Dave C  
Address: 1709 2 Ave S  
Lethbridge AB T1J 0a8  
Phone#: (403) 892-6638 Sector: W12

Completed:

3	<14> 14" Original	69.00
	+3 Pepperoncini Peppers	
	+Meats	
	+3 Garlic Sauce Cup	
3	<14> 14" Original	51.00
	+Pepperoni	
	+3 Garlic Sauce Cup	
	+3 Pepperoncini Peppers	
1	<14> 14" Original	23.00
	+1 Pepperoncini Peppers	
	+Chicken BBQ	
	+1 Garlic Sauce Cup	
4	2Ltr Schw Gngr Ale	13.48
	Delivery Fee	3.50

Order Date: 01/12/2018  
Order Number: 0085  
Makeline Print Time: 08:44 PM  
Order Ready Time:  
Order Left Store:  
Est. Del Time: 09:29 PM  
Time Driver Returned:  
Driver:  
Order Taker: MANAGER  
# Of Order in Run:  
Sequence in Run:  
CSC: 0

Amount Tender:	167.91
Order Total:	159.98
Discount:	0.00
Fees:	3.50
Tax:	7.93
Tip:	0.00
Product Refund/Void Amount:	
Refund/Void Tip:	
Refund/Void Amount:	
Refund/Void Tax:	
Refund/Void Total:	

Payments: 167.91  
Cash

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Sherry Hunt

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)  
☐ Individual Stakeholder(s)  
☒ Group: UofL English Students/Public

Purpose:

UofL "Bearing Witness" Poetry symposium. MLA Office  
contributed \$500 towards refreshment costs

\$500.00

U OF L CATERING  
4401 UNIVERSITY  
OFFICE A620  
LETHBRIDGE, AB T1K3M3  
4033324475

Merchant ID: 5831848  
Term ID: 001

Ref #: 001

Sale

DEBIT

Entry Method: Chip

Acct Type: Chequing

02/15/18

11:36:05

Inv #: 000001

Apprvd

Batch#: 046001

Trace: 00232286

Retrieval Ref. #: 00000001

Total: \$ 500.00

No signature required. Verified by PIN.  
Your account will be debited with the  
above amount.

Retain this copy for statement  
verification.

Application Label: Interac  
AID: A0000002771010  
TVR: 00 00 00 00 00  
TSI: F8 00

Customer Copy

Order Name: **Poetry Symposium**University of  
LethbridgeAramark Classic Fare Catering  
4401 University Dr, Lethbridge, AB T1K 3M4  
403-332-4475

ORDER #6505

Thursday, 2/15/2018

Ordered On: 1/12/2018

Last Modified: 2/15/2018 11:37:07 AM

Confirmed

## Customer Information

First Name:	
Last Name:	
Address:	
City:	
Province:	
Postal Code:	
Department:	
Email:	
Phone:	
Click To View Policies:	
Initial to Accept:	

## Delivery / Pickup Information

Method:	On-Site Delivery
Booking Contact:	
Delivery Phone:	
On Site Contact:	
Building:	Andy's Place
Room #:	Anderson Hall 100
Number of Tables:	None: chairs only
Type of Tables Ordered:	none
Serviceware (Paper Service has a 5% Discount):	Paper/Disposable

## Payment Information

Payment Type:	Debit
---------------	-------

## Event Information

Internal:	False
Guest Count:	95
Pick-up/ Delivery Date:	Thursday, 2/15/2018
Room Access Time:	11:30 AM
Items Set & Ready Time:	12:15 PM
Event Start Time:	12:15 PM
Event End/ Food Clean up Time:	2:45 PM

## FOOD

	Qty.	Price	Ext.
<b>Snack Attack</b>			
Enjoy Assorted Chips, Cookies and Squares. Includes Organic Fair Trade Espresso's Brand Coffee, Tazo Tea and Iced Water.	95	\$6.09	\$578.55

## BEVERAGES

	Qty.	Price	Ext.
<b>Organic Fair Trade Espresso's Brand Coffee, Tazo Tea and Iced Water</b>	95	\$0.00	\$0.00

		Order Totals	
		Sub Total	
		Admin Fee	
		GST	
		Service Fee	
		Serviceware Discount	
		Order Total	
		Payment Summary	
		Payment: Debit   2/15/2018	-\$500.00
		Payment: Business Cheque   2/6/2018	
		Balance Due	\$0.00

Special Instructions

Order #6505

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Maria Fitzpatrick

Claimant Name: Sherry Hunt

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)  
☐ Individual Stakeholder(s)  
☒ Group: Nordbrisse Seniors centre

Purpose:

Chocolate Coins to give out to constituents in celebration-of the Lunar New Year at Nordbrisse Seniors Centre

\$81.07 + GST

TRANSACTION RECORD

BULK BARN #587  
3724 MAYOR MAGRATH T1K7V1  
LETHBRIDGE AB  
21754796  
QC2175479601

SALE

02-15-2018 14:06:48

Account Chequing Card Type DP  
A0000002771010  
Interac

Trace # 640022  
Inv. # 4865

RRN 001401022

Sale \$85.12

TOTAL \$85.12

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

Retain this copy for your  
records  
Customer copy

**BulkBarn\***

Bulk Barn #587  
3724 Mayor Magrath Drive South  
Lethbridge, AB.  
(403) 320-2855

GST# 815114822 RT0001

Lane: 001 Cashier: 117

Date: 02/15/2018 Time: 14:06

Transaction: 58710821897

CHOCOLATE LOONIES \$81.07GD  
2.645 kg @ \$30.65 /kg  
Net: 2.645 kg Gross: 2.770 kg

Sub-Total: \$81.07  
GST \$4.05  
Total Amount: \$85.12  
DEBIT \$85.12  
Total Tendered: \$85.12

Items Sold: 1

G=GST B=BOTH TAXES

GET YOUR WEB OR MOBILE COUPON  
UNTIL FEB 28 AT BULKBARN.CA