

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2017-18
005 - Calgary-Buffalo - Ganley, Kathleen
For Expenses Processed Jan 1 - Mar 31, 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00		\$74.81
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			\$211.43
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$169.33	\$3,893.05
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$23,160.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$609.60	\$1,482.55
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000.0		
Special Trips (5 trips per year) - NF	5.0		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			1.5
Use of a Private Automobile (52 trips per year) - NF	52.0		
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



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: Ganley, Kathleen

Constituency: Calgary-Buffalo

For the Month of: February

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			<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
20	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
21	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
22	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
23	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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						\$169.33	\$8.47	\$177.80

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

April 18, 2018



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: Ganley, Kathleen

Constituency: Calgary-Buffalo

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

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Constituency: Calgary-Buffalo

Employee #: [REDACTED]

Date: 4/1/2017

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Fiscal Year: 2017-2018

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☒ Yes

☐ No

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\$ 1,930.00

x 12 = \$ 23,160.00

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Claim Payment Authorization (please check)

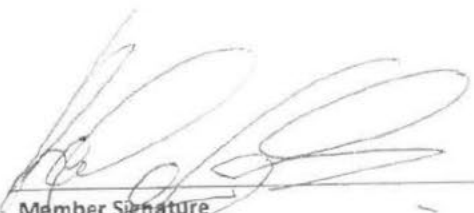
☒ 12 Monthly Payments

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

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Constituency: Calgary-Buffalo

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)

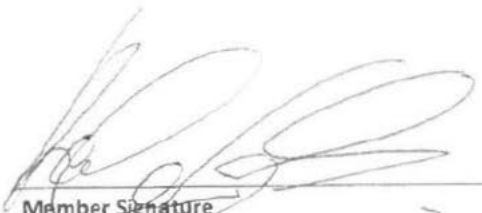
☒ 12 Monthly Payments

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: Kathleen Ganley

Claimant Name: Shae Doyle

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☒ Group: MLA Open House, March 2018 \$230 + GST

Purpose:

2 x fruit platters
2 x veggie platters
food for MLA Open House March 2018
\$241.50 excl. GST

CO-OP

CALGARY CO-OP

MIDTOWN MARKET #1

(403) 299-4257

GST : 100730894

16 INCH FRUIT TRAY	\$60.00 G
16 INCH FRUIT TRAY	\$60.00 G
16IN VEGGIE TRAY	\$55.00 G
16IN VEGGIE TRAY	\$55.00 G
FUTW GAME TICKET	
12 @ \$0.00 EA	\$0.00

16 BALANCE DUE \$241.50

TYPE: Purchase

ACCT: VISA \$ 241.50

REFERENCE #: 0010013030 03/29/2018 10:44:57
TERM: 65216167 C

AID: A0000000031010
TVR: 8080008000
TSI: 7800
VISA CREDIT

01 APPROVED - THANK YOU 027

IMPORTANT:

retain this copy for your records
CUSTOMER COPY

VISA
Auth Code = [REDACTED] \$241.50
CHANGE \$0.00

TAX-CODE	TAXABLE-VAL	TAX-VALUE
GST	\$230.00	\$11.50

Member Number [REDACTED]

CASHIER NAME: DEBORAH
C0113 #6558 10:46:09 29MAR2018
S00001 R006

**FUEL UP TO WIN
is back!**

Over \$8 Million in Prizes
One Guaranteed Winner of \$100,000
\$25,000 Community Donation

Collect to Win, Instant Win, Online Win

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Kathleen Ganley

Claimant Name: Shae Doyle

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☒ Group: MLA Open House - March 29, 2018

Purpose:

Coffee and hot water for tea for MLA Open House.
March 29, 2018
Email receipt attached - \$259.60, excl. GST



INVOICE

Calgary-Buffalo Constituency Office
Attention: Shae Doyle
130, 1177 11 Ave SW
CALGARY AB T2R 1K9
CANADA

Invoice Date
19 Mar 2018

Invoice Number
INV-46835

Reference
March 29 MLA Open House

GST
857064992RT0001

Phil & Sebastian
Coffee Roasters
618 Confluence Way SE
Calgary, AB T2G 0G1

Description	Quantity	Unit Price	Tax	Amount CAD
Cambro of Coffee for 50 people. Includes cream, sugar, napkins, and stir sticks for 80 people. (no cups needed). Cambros must be picked up at Simmons and returned at the end of the event. - Pickup at 2:30 pm	1.00	180.00	Tax Exempt	180.00
Cambro of Hot Water for 30 people	1.00	40.00	Tax Exempt	40.00
Gratuuity - 18%	1.00	39.60	Tax Exempt	39.60
Subtotal				259.60
TOTAL CAD				259.60

Due Date: 20 Mar 2018

**Due on Receipt

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Kathleen Ganley

Claimant Name: Natalie Jane Kubke

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Minister Ganley's Calgary-Buffalo Open House on Mar. 29, 2018.

Baked goods - [REDACTED]

\$120 + GST

EUROPEAN BAKERY AND DE
515 17TH AVE SW UNIT #
CALGARY, AB T2S 0A9

Merchant ID: 000000004318698
Term ID: 05521216
25234310011

**EUROPEAN
BAKERY & DELI**

#160, 515 - 17th Ave S.W.
PHONE: 403 - 806 - 3768
DATE 03/29/2018 THU TIME 13:13

BREAD	\$126.00
SUBTOTAL	\$126.00
TOTAL	\$126.00
VISA	\$126.00

GST# 821540275

THANKYOU!

LONA

No.244866 00022

Purchase

VISA CREDIT

AID: A0000000031010

Entry Method: Chip

Batch#: 000302

03/29/18

14:49:35

Ref#:000062155818

Inv #: 015452 Appr Code:

Total: \$ 126.00

Customer Copy



To: JANE KUBKE
CALGARY BUFFALO
130.1177 11TH AVE SW
T2R1K9

[illegible]

Make all checks payable to [EUROPEAN BAKERY AND DELI LTD]
Thank you for your business!