### LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2018-19

## 005 - Calgary-Buffalo - Ganley, Kathleen For Expenses Processed July 1 - Sep 30 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation Fuel and Minor Maintenance - \$ MLA Parking Cap - \$ Other Travel - Parking - \$ Member Travel (overnight stay in constituency) - \$ Taxi, Bus Travel - \$ Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ Member Travel (Meal Per Diems) - \$	\$900.00	\$13.50	\$13.50
Accommodation Edmonton Accommodation Allowance (\$23,160.00/yr max) Travel Accommodations Allowance Travel Accommodations Allowance (days; 10 max) - NF	\$23,160.00 10.0	\$5,790.00	\$11,580.00
Other Hosting - \$ Event Tickets Disclosable - \$ Non-Financial Reporting			\$285.60
Use of Private Automobile (43.5 cents per km) Constituency Travel MLA (KM) - NF Constituency Travel Staff (KM) - NF Total Constituency Travel (KM) - NF	35,000.00		
Special Trips (5 trips per year) - NF	5.0		
Travel To and From the Capital Travel by Air, Bus or Train (Unlimited Trips) - NF Use of a Private Automobile (52 trips per year) - NF Other Travel	52.0		
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



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KATHLEEN T. GANLEY LEGIS ASSEMBLY OF AB

July 16, 2018

New Charges including Delinquency New Balance \$ Payments and Credits Previous Balance Assessment, if any 2.67 2.67 0.00 0.00

Page 1 of 2

Statement includes payments and charges received by July 16, 2018

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Total Credit Limit \$ Available Credit Limit \$ Credit Limit Summary On July 16, 2018 Amount \$ New Transactions for KATHLEEN T. GANLEY CalgParkAuth 2678268 CALGARY GOVERNMENT SERVICES 1.00 July 5 CalgParkAuth 2684205 CALGARY July 11 1.67 GOVERNMENT SERVICES Total New Transactions for KATHLEEN T. GANLEY 2.67

\$2.55 + GST

† Please detach here †

### AMERICAN EXPRESS®

Payment Options PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. See the About Your Payment Section.

Phone and Internet banking arranged through your financial institution

Your local bank branch

Automatic banking machines
Do Not Enclose Cash



KATHLEEN T. GANLEY LEGIS ASSEMBLY OF AB 4TH FLR 9820 107 ST **EDMONTON AB** T5K 1E7

Membership Number Amount Paid\$ Amount Due \$ 2.67

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# The American Express® Corporate Card Statement of Account

www.americanexpress.ca Amex Bank of Canada Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6

Page 1 of 2

Amount \$



Prepared For KATHLEEN T. GANLEY LEGIS ASSEMBLY OF AB

Previous Balance

Membership Number

August 16, 2018

New Charges including Delinquency Assessment, if any New Balance \$

Statement includes payments and charges received by August 16, 2018

Please see "About Your Statement" section for important information.

Payments and Credits

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Credit Limit Summary On August 16, 2018

Listing of Charges and Credits

**Total Credit Limit \$** 

**Available Credit Limit \$** 

July 30	Payment Received Thank You		28.0.27
New Trans	actions for KATHLEEN T. GANLEY		Amount \$
July 26	CalgParkAuth 2698062 CALGARY GOVERNMENT SERVICES	1	9.50
July 29	CalgParkAuth 2700492 CALGARY GOVERNMENT SERVICES		2.00
Total New	Transactions for KATHLEEN T. GANLEY		11.50

10.95 + GST

† Please detach here †

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KATHLEEN T. GANLEY LEGIS ASSEMBLY OF AB 4TH FLR 9820 107 ST EDMONTON AB T5K 1E7 Membership Number

Amount Due\$ Amount Paid\$

11.50

Amex Bank of Canada/ Banque Amex du Canada PO BOX 2000 West Hill ON M1E 5H4





occurs.

### 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 #:	Date: 5/11/2018
Claim Type: Temporary Residence Accommodation Allo	owance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in Ed Maximum of \$23,160 per fiscal year.	monton - Claimed Annually
Fiscal Year: 2018-2019	
Have you provided documents evidencing your Tempor Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach Monthly Amount (maximum \$1,930 or less)	
	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	ng of any changes to their permanent or temporary residence at the time it

July 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



occurs.

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Fiscal Year: 2018-2019	
Have you provided documents evidencing your Tempor Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach	i. Yes No
Monthly Amount (maximum \$1,930 or less)	\$ x 12 = \$ 0.00, 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.
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August 2018

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Have you provided documents evidencing your Tempora 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)	\$ 1930 x12 = \$ 0.00
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September 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.

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