

LEGISLATIVE ASSEMBLY OF ALBERTA  
 Member EDR 2019-20 29th and 30th Leg  
 028 - Edmonton-Castle Downs - MLA Nicole Goehring  
 For Expenses Processed Jul 1 - Sep 30, 2019

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$1,182.32	\$1,273.54
MLA Parking Cap - \$	\$900.00	\$26.82	\$26.82
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$166.94	\$166.94
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)			
Travel Accommodations Allowance		\$676.26	\$676.26
Travel Accommodations Allowance (days; 10 max) - NF	10.0	4.0	4.0
<b>Other</b>			
Hosting - \$		\$445.90	\$445.90
Event Tickets Disclosable - \$			
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (43.5 cents per km)</b>			
Constituency Travel MLA (KM) - NF	35,000.0	4,354.0	4,354.0
Constituency Travel Staff (KM) - NF		373.0	373.0
Total Constituency Travel (KM) - NF	35,000.0	4,727.0	4,727.0
Special Trips (5 trips per year) - NF	5.0	1.0	1.0
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF			
<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

Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL  
 DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY  
 DIV-30-N GOEHRING

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CLIENT NO.  
 NO DU CLIENT  
 INVOICE DATE 07/01/19  
 DATE DE LA FACTURE  
 INVOICE NO. 0007607257  
 NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	GOEHRING			0140898	000533512424 06/01/19	SHELL CANADA INC EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	63.9 1.0	1.30 13.99	79.07 13.99	3.95 4.65 7.0 4.65	97.71 97.71
				0139796	000534588529 05/15/19	IMPERIAL OIL EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	69.7	1.34	88.82	4.44 4.44	93.26 93.26
				0138631	000534588528 05/03/19	IMPERIAL OIL CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	44.8	1.47	62.82	3.14 3.14	65.96 65.96
	UNIT TOTAL / TOT UNITE						FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	178.4		244.70	12.23	256.93
BKDN TOTALS / TOTAUX CODIFICATION 01-30			UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	178.4		244.70	12.23	
BKDN TOTALS / TOTAUX CODIFICATION											256.93	

# Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL  
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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY  
 DIV-30-N GOEHRING

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CLIENT NO. [REDACTED]  
 NO DU CLIENT [REDACTED]  
 NVOICE DATE 08/01/19  
 DATE DE LA FACTURE  
 NVOICE NO. 0007654751  
 NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCR PTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
[REDACTED]	GOEHRING [REDACTED]	[REDACTED]	[REDACTED]	0143132	000537230725 07/02/19	IMPERIAL OIL EDMONTON	AB UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH CAR WASH GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	63.4 1.0	1.17 14.99	70.70 14.99	3.54 0.74 4.28	89.97 89.97
				0142580	000537230724 06/24/19	IMPERIAL OIL EDMONTON	AB UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	55.7	1.17	62.02	3.10 3.10	65.12 65.12
				0142045	000537230723 06/20/19	IMPERIAL OIL EDMONTON	AB UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH CAR WASH GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	70.9 1.0	1.11 14.99	74.93 14.99	3.75 0.75 4.50	94.42 94.42
				0141425	000537230722 06/10/19	IMPERIAL OIL EDMONTON	AB UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH CAR WASH GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.3 1.0	1.15 14.99	66.05 14.99	3.30 0.75 4.05	85.09 85.09
				UNIT TOTAL / TOT UNITE				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	250.3		318.67	15.93 334.60
	BKDN TOTALS / TOTAUX CODIFICATION 01-30			UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	250.3		318.67	15.93
								BKDN TOTALS / TOTAUX CODIFICATION				334.60

Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL  
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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY  
 DIV-30-N GOEHRING

CLIENT NO.  
 NO DU CLIENT  
 INVOICE DATE 09/01/19  
 DATE DE LA FACTURE  
 INVOICE NO. 0007704388  
 NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	GOEHRING A2983563			0146713	000540540060 08/04/19	PETRO CANADA EDMONTON	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	33.0	1.26	39.59	1.98 1.98	41.57 41.57
				0146413	000540422227 08/01/19	IMPERIAL OIL EDMONTON	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	66.0	1.27	79.80	3.99 3.99	83.79 83.79
				0145854	000538778499 07/27/19	SHELL CANADA INC EDMONTON	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.8	1.30	81.38	4.07 4.07	85.45 85.45
				0145242	000540540059 07/19/19	PETRO CANADA EDMONTON	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.7	1.31	71.88	3.59 3.59	75.47 75.47
				0144803	000540422226 07/13/19	IMPERIAL OIL EDMONTON	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.6	1.29	80.63	4.03 4.03	84.66 84.66
				0144151	000540422225 07/09/19	IMPERIAL OIL AIRDRIE	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.2	1.33	71.23	3.56 3.56	74.79 74.79
				0143660	000540422224 07/08/19	IMPERIAL OIL EDMONTON	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.2	1.31	72.56	3.63 3.63	76.19 76.19
				UNIT TOTAL / TOT UNITE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	402.5		497.07	24.85	521.92
	BKDN TOTALS / TOTAUX CODIFICATION 01-30			UNITS / VEHIC	1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	402.5		497.07	24.85	

BLE871

GST-HST REG. NO / NO ENRG TPS-TVH R104164223  
 GST ID. NO / NO ID TVQ 1001439118

FLEET MANAGEMENT SERVICES DETAIL  
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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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CLIENT NO.  
 NO DU CLIENT  
 INVOICE DATE 09/01/19  
 DATE DE LA FACTURE  
 INVOICE NO. 0007704388  
 NO DE LA FACTURE

UNIT NO ----- NO. D'UNITE	DRIVER NAME DRIVER ID. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. ----- NO. DE SERIE	CARD NO. ----- NO. DE CARTE	KM AUTHORIZE ----- KM AUTORISE	REFERENCE NO ACTIVITY DATE ----- NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION ----- NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION ----- DESCRIPTION DES FRAIS	QTY ----- QTE	UNIT COST ----- COUT UNIT	EXTENDED PRICE ----- TOTAL	GST-HST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE ----- MONTANT TOTAL DU
BKDN TOTALS / TOTAUX CODIFICATION						BKDN TOTALS / TOTAUX CODIFICATION						521.92



# Legislative Assembly of Alberta

## ME01783 - Members' Other Expenses Claim Form

Receipt Description	car maintenance
Member Name	Nicole Goehring
Claimant	Nicole Goehring
Expense Category	Fuel and Minor Maintenance

CUSTOMER #

135308



NICOLE RENEE GOEHRING

\*INVOICE\*

PAGE 1

17616 111th AVENUE N.W.  
EDMONTON, ALBERTA T5S 0A2  
PHONE 780-489-7900 - FAX: 780-489-7904  
SERVICE DIRECT: 780-733-4500  
www.erickseninfiniti.com

SERVICE ADVISOR: 9171 KIRT KOK

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL	
A					REPLACE SYNTHETIC OIL AND FILTER * LUBRICATE SPECIFIED COMPONENTS * INSPECT THE FOLLOWING: INFINITI RECOMMENDED SERVICE INSPECTION			
					CAUSE: REPLACE SYNTHETIC OIL AND FILTER * LUBRICATE SPECIFIED COMPONENTS * INSPECT THE FOLLOWING: INFINITI RECOMMENDED SERVICE INSPECTION			
LOFS					REPLACE SYNTHETIC OIL AND FILTER * LUBRICATE SPECIFIED COMPONENTS * INSPECT THE FOLLOWING: INFINITI RECOMMENDED SERVICE INSPECTION			
				9160	CI	0.50		
1	15208					15.71	15.71	
1	RC					0.75	0.75	
1	11026					2.47	2.47	
5	5W30S					13.49	13.49	
5	OL					0.10	0.10	
PARTS: 85.63					LABOR: 35.00		OTHER: 1.25	TOTAL LINE A: 121.88
144942 PERFORMED SYNTHETIC OIL AND FILTER CHANGE SERVICE: REPLACE ENGINE OIL & FILTER. INSPECT LIGHTS, AIR FILTER, FLUIDS CHECKED AND TOPPED-OFF, BELTS, RADIATOR HOSES, INSPECTED TIRES AND ADJUST AIR PRESSURE								

WE USE THE FLAT RATE HOUR SYSTEM PUBLISHED IN AN INDUSTRY ACCEPTED GUIDE LISTING REPRESENTATIVE TIME REQUIREMENTS FOR SPECIFIC VEHICLE REPAIRS/SERVICES WHICH MAY BE MORE OR LESS THAN THE ACTUAL CLOCK TIME.

ALL GENUINE INFINITI PARTS AND ASSOCIATED LABOUR TO INSTALL ARE WARRANTED FOR 12 MONTHS OR 20,000 KILOMETERS FROM ORIGINAL INSTALLATION DATE, WHICHEVER COMES FIRST.

THANK YOU FOR YOUR BUSINESS

INDEBTEDNESS IS HEREBY ACKNOWLEDGED IN THE SUM OF \$ BEING ALL OR THE BALANCE OWING FOR REPAIRS, PARTS AND ACCESSORIES DESCRIBED IN THIS INVOICE

You agree by your signature below that Ericksen Infiniti may retain any of your personal information we presently have on file and/or any of your personal information on this form. You acknowledge and agree that (i) we collect/use such information in order to provide services to you and/or to communicate with you, including marketing communications and (ii) in order to carry out the foregoing purposes we may share your personal information with (a) our computing and marketing service providers, such as ADP, Canada Co., (b) motor vehicle manufacturers with whom we have a franchise agreement and (c) others as may be specifically allowed by applicable law.

O  
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T

CUSTOMER SIGNATURE

X

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
DISCOUNTS	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
INSURANCE/PAYABLE	
G.S.T.	
PLEASE PAY THIS AMOUNT	

G.S.T. # B1383 8422

Copyright 2014 Cox Sales, LLC SERVICE INVOICE FTS 8 - WPC - MARCH

CUSTOMER COPY



I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



**Legislative Assembly of Alberta**  
**ME01783 - Members' Other Expenses Claim Form**

Receipt Description	parking in calgary
Member Name	Nicole Goehring
Claimant	Nicole Goehring
Expense Category	Member Parking



DISPLAY THIS SIDE UP ON DASHBOARD

EXPIRATION DATE: 10/07/19 06:00

EXPIRATION TIME: 06:00

AMOUNT PAID: \$ 3.16 17:45 AC5598

DETACH RECEIPT FROM TICKET

DATE ISSUED: 09/07/19 17:45

TIME ISSUED: 17:45

AMOUNT PAID: \$ 3.16

43833001 LOT3030 CC

PRECISE PARKLINK RECEIPT

008215 NON TRANSFERABLE

008215

CHARGES ARE FOR THE USE OF THE PARKING SPACE ONLY. WE WILL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE TO CAR OR CONTENTS, HOWEVER CAUSED, INCLUDING BUT NOT LIMITED TO FIRE, THEFT OR COLLISION.

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



# Legislative Assembly of Alberta

## MP01400 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP01400
Description	May 2019 - Per-Diems
Claimant	Nicole Goehring
Employee Number	
Constituency	Edmonton-Castle Downs 28 (Nicole Goehring)
Date Submitted	June 28, 2019
Date Received	July 2, 2019
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
2524	May 1, 2019	60 km from Perm. Res.	calgary			X	19.76	0.99	20.75
2525	May 2, 2019	60 km from Perm. Res.	calgary	X		X	28.52	1.43	29.95
2526	May 3, 2019	60 km from Perm. Res.	calgary	X			8.76	0.44	9.20
							57.04	2.86	59.90

This Claim Form has been certified by the Member to 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.





# Legislative Assembly of Alberta

## MP01673 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP01673
Description	July 2019 - Per-Diems
Claimant	Nicole Goehring
Employee Number	
Constituency	Edmonton-Castle Downs 28 (Nicole Goehring)
Date Submitted	July 11, 2019
Date Received	July 12, 2019
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
3025	Jul 8, 2019	60 km from Perm. Res.	calgary			X	19.76	0.99	20.75
3026	Jul 9, 2019	60 km from Perm. Res.	calgary		X	X	30.81	1.54	32.35
							50.57	2.53	53.10

This Claim Form has been certified by the Member to 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.



# Legislative Assembly of Alberta

## MP02772 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP02772
Description	August 2019 - Per-Diems
Claimant	Nicole Goehring
Employee Number	
Constituency	Edmonton-Castle Downs 28 (Nicole Goehring)
Date Submitted	September 3, 2019
Date Received	September 4, 2019
Mailing Address	

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
4207	Aug 30, 2019	60 km from Perm. Res.	Calgary		X	X	30.81	1.54	32.35
4208	Aug 31, 2019	60 km from Perm. Res.	calgary	X		X	28.52	1.43	29.95
							59.33	2.97	62.30

This Claim Form has been certified by the Member to 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.



**Legislative Assembly of Alberta**  
**ME01496 - Members' Other Expenses Claim Form**

Receipt Description	hotel in calgary for AFL
Member Name	Nicole Goehring
Claimant	Nicole Goehring
Expense Category	Other



**Your receipt from Airbnb**

Receipt ID: RCDQESMNHT · Apr 28, 2019

**Calgary**

2 nights in Calgary

Wed, May 01, 2019 → Fri, May 03, 2019

Entire home/apt · 2 beds · 1 guest

Confirmation code: HMARN8E43F

[Go to listing](#)

Cancellation policy: Strict

Cancel within 48 hours of booking and 14 days before check-in to get a full refund.  
 Cancel up to 7 days before check in and get a 50% refund (minus service fees). Cancel  
 within 7 days of your trip and the reservation is non-refundable.

**Price breakdown**

\$129.00 x 2 nights	\$258.00
Special offer: 12% off	-\$30.96
Cleaning fee	\$45.00
Service fee	\$35.09
<b>Total (CAD)</b>	<b>\$307.13</b>

Claiming 1 night \$146.25 + gst

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



**Legislative Assembly of Alberta**  
**ME01674 - Members' Other Expenses Claim Form**

Receipt Description	hotel in calgary
Member Name	Nicole Goehring
Claimant	Nicole Goehring
Expense Category	Other

RESERVATIONS.COM



**You're all set!**

**Congratulations Nicole, you are on your way! Your hotel room reservation at Sheraton Cavalier Calgary Hotel is confirmed.**

Your reservation details are below.

**Guest Details**

**Name:** Nicole Goehring

**Contact Email:** [nicole.goehring@assembly.ab.ca](mailto:nicole.goehring@assembly.ab.ca)

**Reservation Details**

**Booking Status:** CONFIRMED

**Reservation Number:** R180198434

**Itinerary Number:** 8145718200568

**Check-in Date:** Monday, July 8, 2019

**Check-out Date:** Tuesday, July 9, 2019

**Hotel Details**

Sheraton Cavalier Calgary Hotel

2620 32 Ave NE

Calgary AB T1Y 6B8

CA

**Room Details**

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



# Legislative Assembly of Alberta

## ME01674 - Members' Other Expenses Claim Form

Receipt Description	hotel in calgary
Member Name	Nicole Goehring
Claimant	Nicole Goehring
Expense Category	Other

**Room Sub Total:**USD \$224.43 (excluding taxes and fees)  
**Taxes & Fees:**USD \$40.98  
**Sub Total:**USD \$265.41  
**Service Fee:**USD \$14.99  
**Total:**USD \$280.40 (including taxes and fees)      **\$366.79 Cdn**

We have charged your credit card for the total amount of this reservation. All prices are displayed in USD. The charges to your credit card were made by Travelscape LLC & Reservations.com

By confirming your booking you have agreed to Reservations.com [Terms of Service](#).

#### Hotel Cancellation Policy

This rate is non-refundable. If you choose to change or cancel this booking you will not be refunded any of the payment. The USD 14.99 fee from Reservations.com included in the total is non-refundable. The room rates listed are for double occupancy per room unless otherwise stated and exclude tax recovery charges and service fees. Any partial hotel stays is subject to be charged for the full reservations amount.

#### Check-in Instructions

Know Before You Go The property has connecting/adjoining rooms, which are subject to availability and can be requested by contacting the property using the number on the booking confirmation. Fees The following fees and deposits are charged by the property at time of service, check-in, or check-out. Breakfast fee: between CAD 12 and CAD 20 per person (approximately) Rollaway bed fee: CAD 15.00 per night The above list may not be comprehensive. Fees and deposits may not include tax and are subject to change.

To view or cancel your reservation or if you need help regarding your booking, please visit <http://support.reservations.com> or call 855-516-1090

**International callers:** Australia: 1800-875-303, New Zealand: 0-800-447-355, Singapore: 800-101-3670, United Kingdom: 0800-031-5657

Thank you,  
Reservations.com Support Team

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



# Legislative Assembly of Alberta

## MR02774 - Members' Temporary Accommodation Allowance Claim Form

Receipt Description	
Member Name	Nicole Goehring
Claimant	Nicole Goehring
Expense Category	Member Travel

[Back to itinerary page](#) [Print](#)



### Receipt for Hilton Garden Inn Calgary Downtown, Calgary

Aug 30, 2019 - Sep 1, 2019

Itinerary # 7467167090117

<p><b>Booked Items</b></p> <p><b>Hotel:</b> Hilton Garden Inn Calgary Downtown</p> <p>Suite A-711 4th St SE, Calgary, ABT2G 1N3</p> <p>Check-in: 30/08/2019   Check-out: 01/09/2019, 1 room  2 nights</p> <p><b>Traveller Information</b></p> <p><b>NICOLE GOEHRING</b></p> <p>Room 1: Room, 1 King Bed</p>	<p><b>Cost Summary</b></p> <p><b>Booked Date:</b> Aug 24, 2019</p> <ul style="list-style-type: none"> <li>• <b>Room Price CA \$171.38</b></li> <li>• 2 nights CA \$152.64 /night</li> </ul> <p>• <b>Taxes &amp; Fees</b></p> <p><b>What are Taxes &amp; Service Fees?</b> The taxes are tax recovery charges Expedia For TD pays to its vendors (e.g. hotels); for details, please see our Terms of Use. We retain our service fees and compensation in servicing your travel reservation.</p> <p style="text-align: right;">\$37.48</p> <p style="text-align: right;">Total</p> <p style="text-align: right;"><b>CA \$171.38</b></p> <p style="text-align: right;">Collected by Expedia For TD</p> <p style="text-align: right;">Paid: <b>CA \$171.38</b></p> <p style="text-align: right;">All prices quoted in CAD.</p>
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I certify that I have met the requirements of the Members' Allowances Order, RMSC 1992, c. M-1, as amended, have incurred accommodation expenses on the dates or months selected, and have not previously claimed or been paid for these expenses.



# Legislative Assembly of Alberta

## SE01385 - Staff Other Expenses Claim Form

Receipt Description	Food - Community Event/ GC - Community Events
Member Name	Nicole Goehring
Claimant	Heather Belanger
Expense Category	Hosting - Group (Multiple Constituency Schools for Year End Parties) Hosting Purpose - Community Event - providing food



RCSS 1572 - 12350-137th Ave  
780-406-3769  
Welcome to Real Canadian Superstore  
519 on Fresh, Low on Price

PRODUCE  
514031 WMELCN RED SEED HRJ 49.90  
5 @ \$9.98

SUBTOTAL

TOTAL

-----TRANSACTION RECORD-----  
GLOBAL PAYMENTS MERCHANT # 0963496  
Superstore  
12350 137 Ave NW  
Edmonton AB  
TERM 20157213 SLIP # 920000  
RETAIN THIS COPY FOR YOUR RECORDS  
\*\* Purchase \*\* Chip  
Chequing  
CARD # \*\*\*\*\* EXP \*\*/\*\*/01  
Interac  
REF #: 926001001016 AUTH # :  
CID: A0700002771010  
TSI 7601 TUR 6080008000  
26/13/2019 09:59:51 S  
APPROVED

\*\*\*\*\*  
THANK YOU FOR SHOPPING RCSS GST # 12223-5922 RT0001  
MANAGER NAME: TANLA  
2019/06/13 Juan 256 13 9200 09:00  
\*\*\*\*\*  
TELL US HOW WE DID TODAY! VISIT  
WWW.STOREOPINION.CA OR CALL  
1-800-531-2929. WIN 1 of 2 MONTHLY  
PRIZES OF 1 MILLION PC OPTIMUM POINTS  
OR \$1000 IN PC GIFT CARDS. SEE  
WWW.STOREOPINION.CA FOR FULL  
CONTEST RULES. STORE: 01572  
REF: 061319 090013 9200 01572  
\*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



# Legislative Assembly of Alberta

## SE01385 - Staff Other Expenses Claim Form

Receipt Description	Community Food
Member Name	Nicole Goehring
Claimant	Heather Belanger
Expense Category	Hosting - Group (Castle Downs Recreational Society) Hosting Purpose - Canada Day Oranges for Public



SOBEYS BEAUMARIS  
15367 Castledowns Road  
780.472.8100  
GST# 849224852RT0001

Served by: Vanessa V

```

PRODUCE \
Clementines 2lb          $306.00* C
OTHER
COUPON 129                $0.00 C
GIFT CARD
$10 Corp Gift Card        $10.00
INSTANT SAVINGS           -$10.00
-----
SUBTOTAL                   $306.00
TOTAL TAX                   $0.00
TOTAL                       $306.00
-----
Cash                        $306.00
TENDER                      $306.00
Change                       $0.00
-----
NUMBER OF ITEMS             3
  
```

\*\*\*\*\*YOUR SAVINGS\*\*\*\*\*  
Discounts & Specials \$10.00  
Your Total Savings \$10.00  
\*\*\*\*\*

AIR MILES  
LET US REWARD YOU

Air Miles you could have earned  
this visit: 15

Enroll today, visit [www.airmiles.ca](http://www.airmiles.ca)

Gift Card Purchase Amount \$10.00  
Acct: 615996\*\*\*\*\*  
RMOO APPROVED 00  
Approval Code:  
Gift Card Balance \$10.00

MERCHANT ID 040080048171 INSERTED  
CLIENT ID 9803 RECEIPT# 2059000  
TERMINAL ID 030 TRACE#

\*\* PURCHASE \*\* \$ 306.00  
DEBIT #  
ACCOUNT RESP  
DATE 06/28/2019 TIME 08:56:22  
AUTH # REF #  
APPL. VISA CREDIT  
AID A0000000031010  
TVR TSI

TRANSACTION NOT COMPLETED

CLIENT ID 9803 INSERTED  
TERMINAL ID 030  
\*\* PURCHASE \*\* \$ 306.00  
CARD Visa RCPT 2059000  
NO. \*\*\*\*\* RESP 000  
DATE 06/28/2019 TIME 08:56:57  
AUTH # REF # 00000001  
APPL. VISA CREDIT  
AID A0000000031010  
TVR 8080008000 TSI 7800

APPROVED

NO SIGNATURE REQUIRED

BY ENTERING A VERIFIED PIN, CARDHOLDER  
AGREES TO PAY ISSUER SUCH TOTAL IN  
ACCORDANCE WITH ISSUER'S AGREEMENT WITH  
CARDHOLDER

Term Tran Store Oper 06/28/19  
30 2059 1072 124 08:57:04

Thank you for shopping  
at Beaumaris Sobeys  
Consumer Response Line 1.888.476.2397  
100% Satisfaction Guarantee!

\*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.





**PERSONAL EXPENSE CLAIM RECEIPT**

**Description Form**

(one receipt per page)

Member name: Nicole Goehring

Claimant's name: Crystal Clean Water

Expense category: Hosting

For hosting (Note: do not include personal information):

Group: \_\_\_\_\_

Individual:  Constituent(s)

Stakeholder(s)

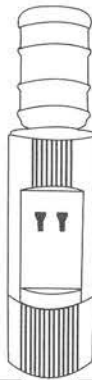
Purpose: Water for office

**Crystal Clean Water Delivery**

57023 RGE RD 261, Sturgeon County, AB T8R 0W3

Tel: (780) 997-4370

crystalcleanwater@hotmail.ca



OUR NUMBER	<b>W-238735</b>
DATE	<u>May 30/19</u>
CUSTOMER'S ORDER NO.	

SOLD TO MLA. N Goehring  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_

SHIP TO \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_

GST #134825769RT0002 SALESPERSON

PAID BY:  CHEQUE  CASH  M/C  VISA  CHARGE

QUANTITY	DESCRIPTION	PRICE	AMOUNT
<u>5</u>	ULTRA CLEAR	<u>8 00</u>	<u>40 00</u>
	DISTILLED		
	R/O		
	<u>5</u> FULL +		
	<u>5</u> EMPTY -		

ACCT# \_\_\_\_\_ EXP. DATE MO \_\_\_\_\_ YR \_\_\_\_\_  
SIGNATURE \_\_\_\_\_

*Thank You For Your Business*

SUBTOTAL	
DEPOSITS	+
GST	
TOTAL	<u>40 00</u>



# Legislative Assembly of Alberta

## ME02903 - Members' Other Expenses Claim Form

Receipt Description	cookies for school staff
Member Name	Nicole Goehring
Claimant	Nicole Goehring
Expense Category	Hosting - Group (schools in Castle Downs) Hosting Purpose - welcome back cookies for school staff



LB NORTH TOWN CENTRE  
 LOOKING FOR WORK? www.londondrugs.com

ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
ROYAL DANSK	4.99
1.0 PLASTIC BAG	05
1.0 PLASTIC BAG	05
**** TAX 00 BAI	50.00
VF Visa	59.00
XXXXXXXXXX	
AUTH	
CHANGE	00
CASH 00	
CASH 00	

LDE:tras # 780-XXX-8365  
 VOUCHERS REDEEMED = \$ 00  
 VOUCHERS AVAIL ABLE = \$5.00  
 4/04/19 09 49 0021 12 0008 35874  
 B O T H - G S T - P S T  
 LONDON DRUGS LTD G S T #R103378972

