LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2025-26
032 - Edmonton-Glenora - Sarah Hoffman
For Expenses Processed Jul 1 - Sep 30, 2025

	Budget	Reimbursed This Quarter	Reimbursed to Date
Financial Reporting - $ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - $			
MLA Parking Cap - $	$900		
Other Travel - Parking - $			
Member Travel (overnight stay in constituency) - $			
Taxi, Bus Travel - $			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - $			
Member Travel (Meal Per Diems) - $			
Accommodation			
Edmonton Accommodation Allowance ($23,160.00/yr max)			
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.00		
Other			
Hosting - $		$161.26	$161.26
Event Tickets Disclosable - $		$125	$341
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.00	4,504.0	5,759.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0	4,504.0	5,759.0
Adverse Driving Conditions	-		
Special Trips (5 trips per year) - NF	5.00		
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	52.00		
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.00		

$ - 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

Note:
Expenses are reported in the Quarter the expense is reimbursed and not necessarily the Quarter the expense was incurred.
The reader should take this into account when reviewing the disclosure

Hosting - $49.98

Legislative Assembly of Alberta

SE54960 - Staff Other Expenses Claim Form

Receipt Description	Costco Cakes
Member Name	Sarah Hoffman
Claimant	Tonya Malo
Expense Category	Hosting - Group (St Andrew's Residence) Hosting Purpose - St. Andrew's Canada Day

COSTCO WHOLESALE

N Edmonton #154
12450 149th St NW
Edmonton, AB T5V 1G9

SELF-CHECKOUT

Y1 Member [redacted]
227595 WHITE CAKE 24.99
227595 WHITE CAKE 24.99
SUBTOTAL 49.98
TAX 0.00
**** TOTAL [illegible]

XXXXXXXXXXXX[redacted]
ACCT: INTERAC FLASH DEFAULT
REFERENCE #: 0010019690 H
AUTH #: [redacted] 2025/06/28 12:28:22
Invoice Number: 204969
Purchase - Interac
A0000002771010
0080008000 A800

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.

Hosting - $111.28+GST

Legislative Assembly of Alberta

SE55855 - Staff Other Expenses Claim Form

Receipt Description	Costco - back to school visits
Member Name	Sarah Hoffman
Claimant	Tonya Malo
Expense Category	Hosting - Individual Stakeholder(s) Hosting Purpose - Back to School

COSTCO WHOLESALE

N Edmonton #154
12450 149th St NW
Edmonton, AB T5V 1G9

MI Member [redacted]
4 @ 9.99
21366 CLEMENTINES 39.96
4 @ 2.00
1983735 TPD/21366 8.00-
4 @ 9.99
49118 GALA APPLES 39.96
4 @ 3.00
1983161 TPD/49118 12.00-
2 @ 13.99
2154720 MADEGOOD BIT 27.98 G
2 @ 3.30
1984633 TPD/2154720 6.60-G
2 @ 14.99
1848557 AWAKE CHOC. 29.98 G
SUBTOTAL 111.28
TAX 2.57
**** TOTAL 113.85

XXXXXXXXXXXX[redacted]
ACCT: INTERAC FLASH DEFAULT
REFERENCE #: 0010012580 H
AUTH #: [redacted] 2025/08/28 13:17:47
Invoice Number: 006258
Purchase - Interac
A0000002771010
0080008000 A800

00 APPROVED - THANK YOU 001
AMOUNT: $113.85

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

SE55758 - Staff Other Expenses Claim Form

Receipt Description	Friends of Medicare Gala Ticket (Sarah Hoffman)
Member Name	Sarah Hoffman
Claimant	Tonya Malo
Expense Category	Other

Friends of Medicare

Friends of Medicare Receipt — Confirmation **#26773**

Date	**18/08/2025 4:14 PM**
Your info	**Sarah Hoffman** [redacted]
Amount	**$125.00** **Thank you!**
Paid by	**Credit/Debit Card**

Not Tax Deductible

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.