

LEGISLATIVE ASSEMBLY OF ALBERTA - 29th LEG
Member EDR 2015-16 - 29th Leg
007 - Calgary-Currie - Malkinson, Brian
For Expenses Processed JAN 1 - MAR 31, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$1,034.28	\$3,285.41
MLA Parking Cap - \$	\$900.00	\$176.81	\$262.53
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Member Travel (Extraordinary Accommodation) - \$			\$326.35
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$	\$703.14	\$885.71	
Other			
Hosting - \$	\$508.48	\$696.45	
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	30	103
Travel Accommodations Allowance (days; 10 max)	10		2
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000	289	913
Special Trips (5 trips per year) - NF	5		3
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	8	27
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		

\$ - 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


BEDF290001

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-07-B MALKINSON												
- - - - - - - -												

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 AUTORISE 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 TPV/TVQ	TOTAL DUE MONTANT TOTAL DU
B	MALKINSON	[REDACTED]	[REDACTED]		000427790847 12/10/15	FEDERATED COOPERATIVES L MITED INNISFAIL AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	53.2	.83	42.30	2.12 2.12	44.42 44.42
		[REDACTED]	[REDACTED]		000427325237 12/06/15	FEDERATED COOPERATIVES L MITED INNISFAIL AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	27.1	.84	21.80	1.09 1.09	22.89 22.89
		[REDACTED]	[REDACTED]		000427628615 12/03/15	PETRO CANADA CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	61.9	.89	52.38	.26 2.88	60.55 60.55
		[REDACTED]	[REDACTED]		000427212715 11/29/15	IMPERIAL OIL RED DEER	ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	61.6	.84	49.52	2.48 2.48	52.00 52.00
		[REDACTED]	[REDACTED]		000427628614 11/27/15	PETRO CANADA PONOKA AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	30.7	.88	25.72	1.29 1.29	27.01 27.01
		[REDACTED]	[REDACTED]		000427628616 11/26/15	PETRO CANADA RED DEER AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	62.0	.85	50.14	2.51 2.51	52.65 52.65
		[REDACTED]	[REDACTED]		000427628613 11/22/15	PETRO CANADA EDMONTON AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	54.0	.83	42.86	2.14 2.14	45.00 45.00
		[REDACTED]	[REDACTED]		000427212714 11/20/15	IMPERIAL OIL OLDS AB	ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	64.3	.95	58.10	2.90 2.90	61.00 61.00
		[REDACTED]	[REDACTED]		000426820083 [REDACTED]	[REDACTED]	UNLEADED REGULAR GASOLINE	49.3	.93	43.81	GST-HST REG. NO / NO ENRG TPS-TVH R104164223 QST ID. NO / NO ID TVQ 1001439118	

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Element Fleet Management

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Element Fleet Management


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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-07-B MALKINSON											
- - - - - - - -											

CLIENT NO.	[REDACTED]
NO DU CLIENT	[REDACTED]
INVOICE DATE	02/01/16
DATE DE LA FACTURE	[REDACTED]
INVOICE NO.	[REDACTED]
NO DE LA FACTURE	[REDACTED]

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 AUTORISE 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 TPV/TVQ	TOTAL DUE MONTANT TOTAL DU
B MALKINSON	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	000428953721 12/28/15	PETRO CANADA CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	.47.2	.85	38.17	1.91 1.91	40.08
					000429110261 12/18/15	IMPERIAL OIL RED DEER AB	ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	.46.1	.82	36.19	1.81 1.81	38.00
					000428586379 12/17/15	FASGAS INNISFAIL AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	.56.7	.83	45.05	.27 2.52	53.06
							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	150.0	124.90	6.24	131.14 .57- 130.57	
	BKDN TOTALS / TOTAUX CODIFICATION 01-07	UNITS / VEHIC	1				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	150.0	124.90	6.24		
							BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL				131.14 .57- 130.57	

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

Element Fleet Management


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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-07-B MALKINSON

CLIENT NO.
 NO DU CLIENT
 INVOICE DATE
 DATE DE LA FACTURE
 INVOICE NO.
 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 AUTORIZE NO. DE 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 TPS-TVH TVP/TVQ	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU	
	B MALKINSON				000431055921 02/09/16	HUSKY OIL RED DEER	AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	.43.3	.74	30.54	1.47 1.47	32.01
					0307000 120013438542 MINIT LUBE LTD KN41338 02/08/16 CALGARY		AB	GST-HST / TPS-TVH LUBRICANT-CHANGE OIL & FILTER/ REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0	63.94	63.94		
					000430300983 SHELL CANADA INC 02/04/16 CARSTAIRS		AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	36.7	.71	24.76	1.24 1.24	26.00
					000430788914 PETRO CANADA 01/31/16 EDMONTON		AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	48.8	.81	37.62	1.88 1.88	39.50
					000430788912 PETRO CANADA 01/27/16 CALGARY		AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.5	.68	25.10	1.25 1.25	26.35
					000430788911 PETRO CANADA 01/21/16 EDMONTON		AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	37.2	.88	31.16	1.56 1.56	32.72
					000430788910 PETRO CANADA 01/19/16 ROCKYVIEW COU		AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	44.1	.93	39.05	1.95 1.95	41.00
					000430788913 PETRO CANADA 01/14/16 CALGARY		AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	49.3	.82	38.48	1.92 1.92	40.40

GST-HST REG. NO / NO ENRG TPS-TVH R104164223
 QST ID. NO / NO ID TVQ 1901430118

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Element Fleet Management

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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-07-B MALKINSON

CLIENT NO.
NO DU CLIENT
INVOICE DATE
DATE DE LA FACTURE
INVOICE NO.
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 AUTORIZER 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 TOTAL	GST-HST PST/QST TPS-TVH TVP/TYQ	TOTAL DUE MONTANT TOTAL DU
B. MALKINSON			UNITE				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST+HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	297.9			
BKDN TOTALS / TOTAUX CODIFICATION 01-07		UNITS / VEHIC	1				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST+HST/TPS-TVH	297.9			
							BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL				

\$290.65

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

Element Fleet Management



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FLEET MANAGEMENT SERVICES DETAIL DETAILED SERVICES DE GESTION DE PARC		CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION										
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		CLIENT NO. NO DU CLIENT [REDACTED] INVOICE DATE DATE DE LA FACTURE INVOICE NO. NO DE LA FACTURE 0006393974										
UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V. I. N. ----- NO. DE SERIE NO. DE CARTE	CARD NO. ----- NO. DE CARTE	KM AUTORISE ----- NO. DE REFERENCE DATE DE LA TRANS.	REFERENCE NO ACTIVITY DATE ----- 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 TPV/TVO	TOTAL DUE ----- HORAIRES TOTAL DU	
	B MALKINSON				000432431968 FEDERATED COOPERATIVES LIMITED 03/07/16 INNISFAIL AB	UNLEADED REGULAR GASOLINE GST+HST / TPS-TVH REF GST+HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	64.1	.82	50.02	2.50 2.50	52.52 52.52	
					000432323680 IMPERIAL OIL 03/01/16 RED DEER AB	ETHANOL REGULAR GRADE GST+HST / TPS-TVH REF GST+HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	45.0	.73	31.43	1.57 1.57	33.00 33.00	
					000432664530 PETRO CANADA 02/29/16 EDMONTON AB	UNLEADED PREMIUM GASOLINE GST+HST / TPS-TVH REF GST+HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	26.1	.90	22.38	1.12 1.12	23.50 23.50	
					000431978979 FEDERATED COOPERATIVES LIMITED 02/28/16 INNISFAIL AB	UNLEADED PREMIUM GASOLINE GST+HST / TPS-TVH REF GST+HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	39.5	.86	32.53	1.63 1.63	34.16 34.16	
					000432323679 IMPERIAL OIL 02/24/16 AIRDRIE AB	UNLEADED PREMIUM GASOLINE GST+HST / TPS-TVH REF GST+HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	53.9	.91	46.67	2.33 2.33	49.00 49.00	
					000431595620 FEDERATED COOPERATIVES LIMITED 02/21/16 INNISFAIL AB	UNLEADED REGULAR GASOLINE GST+HST / TPS-TVH MISCELLANEOUS GST+HST / TPS-TVH REF GST+HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.3	.74	37.07	1.85 22 2.07	43.49 43.49	
					000432323678 IMPERIAL OIL 02/08/16 RED DEER AB	ETHANOL REGULAR GRADE GST+HST / TPS-TVH REF GST+HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	50.8	.67	32.38	1.82 1.82	34.00 34.00	
					UNIT TOTAL / TOT UNITE	FUEL CITY / CITE CARB TOT CHARGES / TOT FRAIS TOT GST+HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	331.7		256.83	12.84	269.67	
						FUEL CITY / CITE CARB TOT CHARGES / TOT FRAIS	331.7		256.83			
						GST-HST REG. NO / NO ENRG TPS-TVH R104164223						
						BLG871						

Element Fleet Management

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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-07-B MALKINSON	
-	-
-	-
-	-
-	-

CLIENT NO. NO DU CLIENT	[REDACTED]
INVOICE DATE DATE DE LA FACTURE	04/01/16
INVOICE NO. NO DE LA FACTURE	0006393974

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 AUTORISE ----- 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+KST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE KONTANT TOTAL DU
BKN TOTALS / TOTALUX CODIFICATION												
GST-HST/TPS-TVH												
12.84												
BKN TOTALS / TOTALUX CODIFICATION												
269.67												

BLGB71

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

BRIAN MALKINSON, MLA

NOTE: A credit adjustment of \$30.02 is included in the reported amount for the category, "Fuel and Maintenance".

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson
Claimant Name: Brian Malkinson
Expense Category: Member Parking

For hosting, select one:
 Individual Constituent(s)
 Individual Stakeholder(s)
 Group: _____

Purpose:

Royalty Review meeting Downtown

ING AUTHORITY (403) 537-7000

CALGARY PARI

Terminal: 778
Plate: [REDACTED]

Zone: 9007
[REDACTED]

Valid through:

TUESDAY 06 OCT 15
6:00 AM

AMOUNT PAID: \$2.50 (GST incl.)

Auth No: [REDACTED]

Start Time: 10/5/2015 5:53 PM

Receipt No: 86204

g & Tire Inflation Services (403) 537-7006

FREE Battery Boosti

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
 Individual Stakeholder(s)
 Group: _____

Purpose:

meeting Minister Ganley

03) 537-7000

CALGARY PARKING AUTHORITY (4)

Terminal: 592
Plate: [REDACTED]

Zone: 3022
[REDACTED]

Valid through:

MONDAY 28 SEP 15
5:18 PM

AMOUNT PAID: \$3.50 (GST incl.)

Auth No: [REDACTED]

Start Time: 9/28/2015 3:54 PM

Receipt No: 9098

es (403) 537-7006 FREE Battery Boosting & Tire Inflation Servi

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson
Claimant Name: Brian Malkinson
Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
 Individual Stakeholder(s)
 Group: _____

Purpose:

Event Parking Downtown

ARKING AUTHORITY (403) 537-7000 CALGARY P
Terminal: 574 Zone: 9062
Plate: [REDACTED]

Valid through:

MONDAY 05 OCT 15
3:06 PM

AMOUNT PAID: \$13.25 (GST incl.)
Start Time: 10/5/2015 11:48 AM
Auth No: [REDACTED]
Receipt No: 33925

osting & Tire Inflation Services (403) 537-7006 FREE Battery Bo

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
- Individual Stakeholder(s)
- Group: _____

Purpose:

U of C Student Union Leadership Dinner

3522E

PLACE ON DASH
FACE UP

PLACE ON DASH
FACE UP

PLACE ON DASH
FACE UP

PLACE ON DASH
FACE UP
TERMINAL: MACEWANB CWT
PLATE:

PLACE ON DASH
FACE UP

Plate: [REDACTED]

Valid through:

THURSDAY 28 JAN16
8:07 PM

AMOUNT PAID: \$15.00 RECEIPT NO: 2165
ENTRY TIME: 1/28/2016 5:37 PM

[REDACTED] TRN: A7F24DB0720C2855

VALID THROUGH:
28 JAN16
8:07 PM

AMOUNT PAID:
\$15.00
ENTRY TIME:
1/28/2016
5:37 PM
RECEIPT NO: 2165

U of C
student union
Leadership dinner
GST# CA 108102864

64

01892126

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LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
- Individual Stakeholder(s)
- Group: _____

Purpose:

royalty review announcement

Royalty Review
Hyatt Regency Calgary
Hyatt Regency Parking Calgary
DATE :01/29/16
TIME :12:43: PM
* Original *
Receipt No. 35/1065/211
Ticket - 45514
TAX included 29.00
TAX Exempt 29.00
Valid - 01/29/16
GST# 859734659 RT000Z

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: _____

Purpose:

Inn from the Cold Tour

3522E
KING AUTHORITY (403) 537-7000

Terminal: 499

CALGARY PAR

Zone: 3177

Valid through:

FRIDAY 05 FEB 16
11:29 AM

Me + staff
tour of Inn
from the Cold

AMOUNT PAID: \$4.00 (GST incl.)

Start Time: 2/5/2016 9:59 AM

ng & Tire Inflation Services (403) 537-7006

Receipt No: 11273

FREE Battery Boost

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
- Individual Stakeholder(s)
- Group: _____

Purpose:

Chinese New Year Dinner

DISPLAY TICKET ON DASH

Expiration Date/Time

06:00 AM
FEB 08, 2016

Purchase Date/Time: 05:30pm Feb 07, 2016

Total Parking: \$5.00

Total FEDERAL: \$0.25

Total Due: \$5.25

Rate: WEEK END RATE

Payment Type: Card

Ticket #: 00440451

S/N #: 300010360381

Setting: Lot 330

Mach Name: Lot 330-1

GST REG #102466000

RECEIPT

Expiration Date/Time: 06:00am Feb 08, 2016

Purchase Date/Time: 05:30pm Feb 07, 2016

Total Parking: \$5.00

Total FEDERAL: \$0.25

Total Due: \$5.25

Rate: WEEK END RATE

Payment Type: Card

Ticket #: 00440451

Setting: Lot 330

Mach Name: Lot 330-1

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
- Individual Stakeholder(s)
- Group: _____

Purpose:

Flood mitigation announcement - Parking

CALGARY PARKING AUTHORITY (403) 537-7000

Terminal: 258

Zone: 1183

Valid through:

FRIDAY 26 FEB 16
11:22 AM

AMOUNT PAID: \$7.25 (GST incl.)

FREE Battery Boosting & Tire Inflation Services (403) 537-7001

Receipt No: 5974

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
- Individual Stakeholder(s)
- Group: _____

Purpose:

Bill 209 Consultation - Parking

3 AUTHORITY (403) 537-7000

Terminal: 339

CALGARY PARKIN

Zone: 3686

Valid through:

THURSDAY 25 FEB 16
5:04 PM

AMOUNT PAID: \$5.00 (GST incl.)
Start Time: 2/25/2016 2:55 PM
Tire Inflation Services (403) 537-7006
Receipt No: 19629
FREE Battery Boosting 8

Bill 209
Consult

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson _____

13

Claimant Name: Brian Malkinson _____

Expense Category: Member Parking _____

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: _____

Purpose:

Parking for Immigrants of Distinction awards dinner



The Westin Calgary
 320 Fourth Ave SW
 Calgary, AB T2P 2S6
 Canada
 Tel: 403-266-1611 Fax: 403-233-7471

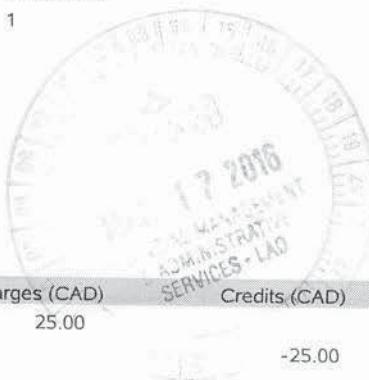
Brian Makinson

*Fmmigrants
of Distinction
Dinner*

WESTIN®
 HOTELS & RESORTS

Page Number	:	1	Invoice Nbr	:	191939
Guest Number	:	1216785			
Folio ID	:	A			
Arrive Date	:	11-MAR-16			
Depart Date	:	11-MAR-16			
No. Of Guest	:	1			
Room Number	:				
Club Account	:				

Tax Invoice



Tax ID : 815462536RT0001
 The Westin Calgary 11-MAR-16 18:01 AKSHDIW

Date	Reference	Description	Charges (CAD)	Credits (CAD)
11-MAR-16	bell grat	Paid Out - Bellmen's Grat (Parking)	25.00	
11-MAR-16	VI	Visa		-25.00
		** Total	25.00	-25.00
		*** Balance	0.00	

GST Summary

Amount (CAD)

Room	0.00
Food & Beverage	0.00
Telephone	0.00
Other Revenue	0.00
Total	0.00

Continued on the next page

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

student
association
receipt

Member Name: Brian Malkinson

MOUNT ROYAL UNIVERSITY

Claimant Name:

Date: 03/18/16 20:38:25

Expense Category: Member Parking

Tax: .38
Total: 8.00
Total Paid: 20.00
Change: 12.00
POS: AP1

For hosting, select one:

- Individual Constituent(s)
- Individual Stakeholder(s)
- Group: _____

Purpose:

Mount Royal U -- Student union event

LISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
- Individual Stakeholder(s)
- Group: _____

Purpose:

APEGA lunch

PALLISER
SQUARE

APEGA
lunch

Payment Receipt

Station name: POF 3 West

Entry: 2/11/16 11:23 AM

Payment date: 2/11/16 1:10 PM

Due: CAD 16.00

Reduction: CAD 0.00
Paid with: CAD 16.00
Amount change: CAD 0.00
Change owed: CAD 0.00

VISA

Seq# 003027 012

Purchase 16/02/11 13:11:07

Auth# [REDACTED]

APPROVED

LISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: _____

Purpose:

ATA event

ATA event

Hyatt Regency Calgary

Hyatt Regency Parking Calgary

main

Date: 02/11/16

Time: 05:19 PM

Receipt no. 2/1078/1

* Original *

61023

Ticket: In : C2/11/16 11:35 AM

Valid: C2/11/16 05:19 PM

Rate: 3

Fee: 39.00

Credit: 39.00

Trans ID : 35119

Card No. :

Card Type: VISA

GST# E59734659 RT0002

LISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

- Individual Constituent(s)
 Individual Stakeholder(s)
 Group: _____

Purpose:

Tom Baker cancer center tour

*Tom
Baker
tour*
Alberta Health
Services
FMC Lot 6

RECEIPT C7

ENTRY DATE/TIME:

10/02/16 13:01

PAY DATE/TIME:

10/02/16 15:45

PARK-DUR.: HRS:MIN

0:02:44

ALLOWED EXIT TO:

10.02.16 16:16

PAID: \$ 13.50

VISA

REF. 62

* Parking Rates *

* Are GST Exempt *

* Please Exit *

* Site Within *

* 15 Minutes *

* After Payment *

* Is Made *

* No In/Out *

* Privileges *

* Managed by *

* Alberta *

* HealthServices *

* Have Questions *

* Or Concerns? *

* Call Us *

* 403-944-1014 *

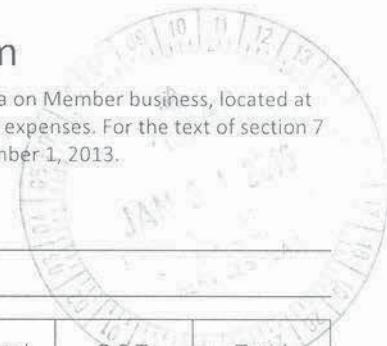
S



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: Malkinson, Brian

Constituency: Calgary-Currie

For the Month of: November'

Year: 2015

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	Travel to/from Capital	Calgary	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	Travel to/from Capital	Innisfail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20	Travel to/from Capital	Calgary	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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	Travel to/from Capital	Ponoka	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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.

Grand Total \$81.38 \$4.07 \$85.45

Member Signature

Date

Jan 20, 2016



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: Malkinson, Brian

Constituency: Calgary-Currie

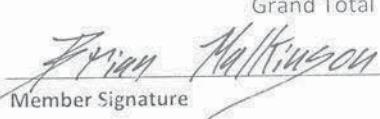
For the Month of: December'

Year: 2015

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	Travel to/from Capital	Red Deer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	Travel to/from Capital	Innisfail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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"/>			

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.

Grand Total \$30.81 \$1.54 \$32.35

 Member Signature Date Jan 30, 2016



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: Malkinson, Brian

Constituency: Calgary-Currie

For the Month of: January

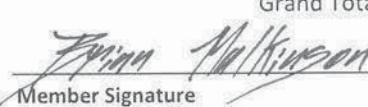
Year: 2016

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	Red Deer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
20	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
21	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
22	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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 \$79.05 \$3.95 \$83.00

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 Feb 17, 2016
 Date



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: Malkinson, Brian

Constituency: Calgary-Currie

For the Month of: February

Year: 2016

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
2	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
3	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
4	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
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	Travel to/from Capital	Red Deer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
9	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21	Travel to/from Capital	Innisfail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
22	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
23	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
24	Travel to/from Capital	Edmonton/Red Deer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
29	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

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.

Grand Total \$257.00 \$12.85 \$269.85

Member Signature

Date

Feb 29, 2016



Members' Travel Expenses Per-Diems Claim Form

DD

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: Malkinson, Brian

Constituency: Calgary-Currie

For the Month of: March

Year: 2016

Employee #: _____

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
8	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
9	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
10	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13	Travel to/from Capital	Red Deere	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
15	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
16	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
17	Travel to/from Capital	Innisfail / Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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"/>			

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.

Grand Total \$254.90 \$12.75 \$267.65

Member Signature

April 6, 2016
Date

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Hosting

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: Staff

Purpose:

Staff Christmas Lunch

WHITE SPOT #307
3322 NE 23rd Street
Calgary, AB
T2E 8Z5
403-237-5101

** TRANSACTION RECORD **

Trans. #: 14940
Check #: 580868
Employee #: 48
Employee Name:CHRISTAL I

AID: A00000000031010

Amount \$60.84

Tip \$8.00

=====

TOTAL CAD\$68.84

00-001 070593
WS307S13/WS307C13
467001001007
2015/12/15 13:22:36

TUR: 0000008000
TSI: F800

Customer Copy

THANK YOU
Come Again

CHECK # 580868

DATE 12/15/15

TABLE # 34

TIME 1:11PM

-- 1-DINING : CHRISTAL I --

ITEMS ORDERED	AMOUNT
---------------	--------

1 Sub O Rings	1.99
---------------	------

1 6 OZ B/C BURGER	
0 Topping Brg, sub caesar	

14.49

1 LEGENDARY BGR	
2 Toppings Brg, Bacon	
Cheddar, add lettuce, fries	

13.48

1 TURKEY BRG, 0 Topping Brg	
-----------------------------	--

15.99

1 ICED TEA	3.25
------------	------

1 ROOT BEER	3.25
-------------	------

1 STRAWBRY SHAKE	5.49
------------------	------

SUBTOTAL	57.94
G.S.T. %	2.90

TOTAL DUE	60.84
-----------	-------

# OF GUESTS	3
-------------	---

Share your experience today
and receive a coupon for
\$5 OFF your next
purchase AND CHANCES to WIN
DAILY CASH PLUS OTHER
WEEKLY PRIZES

Keep this receipt and visit
www.talktowhitespot.ca
for complete contest rules

White Spot Restaurant # 307
Barlow Trail
G.S.T. # R105672505

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Hosting

For hosting, select one:

- Individual Constituent(s)
 Individual Stakeholder(s)
 Group: Bow Cliff Seniors Board

Purpose:

Lunch for members of Bow Cliff Seniors board at Alberta Leg.

EDONPROPINC-GOV-CTRL.EDGH2873
10800 97 AVE
LEGISLATIVE BUILDING
EDMONTON, AB T5K 2B6
TEL (780) 427-7262

TERM ID: B4235128 BATCH #: 221
SHIFT #: 002

Sale
INV# : 000000062
VISA Chip
Application Label: VISA
AID:A00000000031010
TVR:00 00 00 00 00
TSI:FB 00

Total: CAD\$ 39.55

APPROVED [REDACTED]
001/00
16-Mar-16 12:14:56

CUSTOMER COPY
THANK YOU

*hosting
low cliff
seniors at leg
Dorcas Dyer
Jean Langdon
Gail Martin
John Lamont
Lorraine Myler
Vance Taylor
Aramark Canada Ltd.
Alberta Legislature Cafe*

===== Feature Deli =====

1	6.00ti
Feature Deli	6.00ti
1	6.00ti
Feature Deli	6.00ti
1	3.70ti
Soup - Large	3.70ti
1	3.70ti
Soup - small	3.70ti
1	3.15ti
Soup - small	3.15ti
1	3.15ti
Soup - small	3.15ti
1	3.15ti
Poutine (Small)	3.15ti
1	3.70ti
Cheese	3.70ti
1	1.00ti

===== Sub Total: =====

Total:	39.55
Cash	39.55
Item Count	39.55
#00000010442	Lane1
03/16/2016	1

12:14:04

Thank You

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Signe Spence

Expense Category: Hosting

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

\$ 37.70

Group: _____

Purpose:

24 cups of Tim Horton's coffee to hand out to constituents at Westbrook train station in order to meet and greet on February 17, 2016 between 7:30am - 8:30am.

Tim Hortons.

Always Fresh.

3955 17th Ave SW, Calgary, AB

Always There. Since 1964

1 Take 12 Original Blend	\$18.85
1 Take 12 Original Blend	\$18.85
Subtotal:	\$37.70
GST: \$1.89	PST: \$0.00
GrandTotal:	\$39.59
Visa:	\$39.59
Change Due:	\$0.00
Take Out # 348 Cashier 200	
Thanks for stopping by!	
Tell us how we did at	
www.telltimhortons.com 1-888-601-1616	
Wed Feb 17, 2016 07:15:57	
Receipt #: 6394063	
GST #	

Card Entry:TAP_ICC	Sequence:000074
Trans Type:Purchase	\$39.59
Term #:	203
Application Label:	VISA CREDIT
AID #:	A0000000031010
TVR #:	0000000000
TSI #:	0000
[REDACTED]	
APPROVED	

Guest Copy

REPRINT RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Signe Spence

Expense Category: Hosting

For hosting, select one:

- Individual Constituent(s)
 Individual Stakeholder(s) \$ 248.81
 Group: _____

Purpose:

Stampede breakfast items from Costco and Dollarama to use at the MLA Stampede breakfast on July 9, 2016. Breakfast is in the constituency and for constituents to connect with their MLA .



#251 CALGARY SOUTH

99 HERITAGE GATE SE

CALGARY AB
CANADA T2H 3A7

118263	KS	SYRUP	12.89
119609	CANOLA OIL	6.49	
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
118263	KS	SYRUP	12.89
1189	CUBE SUGAR	16.99	
15071	K.S. COFFEE	12.99	
15071	K.S. COFFEE	12.99	
15071	K.S. COFFEE	12.99	
15071	K.S. COFFEE	12.99	
15071	K.S. COFFEE	12.99	
293056	COC MLK DEAL	9.49	
	DEPOSIT	.60	
	ENVIRO FEE N	.12	
682	PANCAKE MIX	8.79	
682	PANCAKE MIX	8.79	
682	PANCAKE MIX	8.79	
682	PANCAKE MIX	8.79	
497	G/F PANCAKE	11.89	

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson
Claimant Name: Signe Spence
Expense Category: Hosting

For hosting, select one:

- Individual Constituent(s)
 Individual Stakeholder(s)
 Group: _____

\$15.00

Purpose:

Starbucks coffee x12 for constituents

Starbucks Coffee Canada #17310
2509 14 Street SW
Calgary, AB T2T 3T8

Mar 04 2016 06:59 am Trans# 732655

TRANSACTION RECORD

Card Number : [REDACTED]
Card Type : VISA
Card Entry : TAP CHIP
Trans Type : PURCHASE
Amount : [REDACTED]

Auth # : [REDACTED]
Sequence # : 000007
Term ID : 002
Date : 16/03/04
Time : 06:59:26

APPROVED

Application Label: VISA CREDIT
AID: A000000031010
TVR: 0000000000
TC : 29E33223E7958105
TSI: 0000

*** CUSTOMER COPY ***

Starbucks Coffee Canada #17310
2509 14 Street SW
Calgary, AB T2T 3T8

CHK 732655
03/04/2016 06:59 AM
1838402 Drawer: 2 Reg: 2

Coffee Traveler

15.00

VISA

Subtotal

GST 5%

Total

Change Due

[REDACTED]

\$0.00

Check Closed
03/04/2016 06:59 AM

GST: 86585 3535

New members get a FREE DRINK!
Join our loyalty program
Sign up for email rewards
Visit Starbucks.ca/rewards
Or download our app
Participating Stores Only



An **Office DEPOT**, Inc. Company
une société d'**Office DEPOT**, Inc.

COST CENTRE BILLING REPORT

REQUISITION REPORT

SOLD TO ACCOUNT NO.	[REDACTED]	G.S.T.	R894032192
	ALTA LEGISLATIVE ASSEMBLY M	Q.S.T.	1001640701TQ0009
	9718 107 ST NW		
	9TH FLR		
	EDMONTON, AB T5K 1E4		
		PERIOD ENDING	02/29/2016
		ACCT MGR NO.	[REDACTED]

INVOICE NO.	J331808	SHIP TO ACCOUNT NO.	[REDACTED]	ALTA LEGISLATIVE ASSEMBLY
COST CENTRE	[REDACTED]			CALGARY-CURRIE
				2108 B 33 AVE SW
				CALGARY, AB T2T 1Z6

QTY	QTY	QTY	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
ORD	SHIP	B/O								
REQ NO.	G67051		DATE	02/03/2016	ATTENTION	Calgary Currie	P.O.#	MLA156620		

3	3	0	BX	3030371	TEA EARL GREY INDIVIDUALLY	4.87	CONTRACT	4.87	14.61	- 19.48
1	1	0	BX	3030382	TEA CHAMOMILE HERBAL INDIVIDUA	4.87	CONTRACT	4.87	4.87	-

QTY	QTY	QTY	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
ORD	SHIP	B/O								
REQ NO.	G67051		DATE	02/03/2016	ATTENTION	Calgary Currie	P.O.#	MLA156620		

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson _____

Claimant Name: Brian Malkinson _____

Expense Category: Hosting _____

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: _____

Purpose:

Culligan water for constituents and constituency office X4

Culligan®

better water. pure and simple.™

H.S.T. # 813808607 RT 0001

INVOICE

Remit Payment to:

Culligan Water Treatment
1110 58th Ave., SE
Calgary AB T2H 2C9
(403) 243-5141
CalgCustServ@culliganwater.ca

Invoice #:

51592TF

Invoice Date:

01/25/2016

Shipped:

01/25/2016

PO No:**Customer No:****Due Date:**

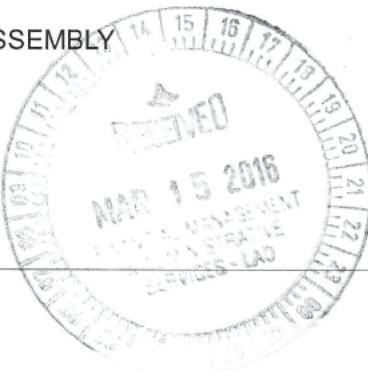
02/24/2016

Balance:**Billing Address:**

CALGARY CURRIE LEGISLATIVE ASSEMBLY
9718 107 ST NW
901 LEGISLATURE ANNEX
EDMONTON AB T5K 1E4

Location Address:

CALGARY CURRIE LEGISLATIVE ASSEMBLY
2108 B 33 AVE SW
CALGARY AB T2T 1Z6

**Comments:**

Service Date	Description	Comments	Reference	Qty.	Price	Amount
01/25/2016	18L RO Water Delivered			2	8.00	16.00
01/25/2016	Bottle Deposit	Dp: 2 Rt:2		0	0.00	0.00



Please include Customer No. and Invoice No. with your payment.

Page 1 of 1

Sub-Total:**Tax:****Total:****Customer No:****Invoice No:**

51592TF

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson _____

Claimant Name: Brian Malkinson _____

Expense Category: Hosting _____

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: _____

Purpose:

Culligan water for constituents and constituency office X4



better water. pure and simple.

H.S.T. # 813808607 RT 0001

INVOICE

Remit Payment to:

Culligan Water Treatment
1110 58th Ave., SE
Calgary AB T2H 2C9
(403) 243-5141
CalgCustServ@culliganwater.ca

Invoice #:

37062TE

Invoice Date:

10/01/2015

Shipped:

10/01/2015

PO No:

[REDACTED]

Customer No:

[REDACTED]

Due Date:

10/31/2015

Balance: [REDACTED]

Billing Address:

CALGARY CURRIE LEGISLATIVE ASSEMBLY
9718 107 ST NW
901 LEGISLATURE ANNEX
EDMONTON AB T5K 1E4

Location Address:

CALGARY CURRIE LEGISLATIVE ASSEMBLY
2108 B 33 AVE SW
CALGARY AB T2T 1Z6

Comments:

Service Date	Description	Comments	Reference	Qty.	Price	Amount
10/01/2015	Bottle Deposit	Dp: 3 Rt:5		-2	10.00	-20.00
10/01/2015	18L RO Water Delivered			3	8.00	24.00
10/01/2015	New Customer Set Up Driver Sale	1518402112		1	0.00	0.00





Please include Customer No. and Invoice No. with your payment.

Page 1 of 1

Sub-Total:

Tax:

Total:

Customer No:

Invoice No:

37062TE

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson _____

Claimant Name: Brian Malkinson _____

Expense Category: Hosting _____

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: _____

Purpose:

Culligan water for constituents and constituency office X4



better water. pure and simple.TM

H.S.T. # 813808607 RT 0001

INVOICE

Remit Payment to:

Culligan Water Treatment
1110 58th Ave., SE
Calgary AB T2H 2C9
(403) 243-5141
CalgCustServ@culliganwater.ca

Invoice #:

40292TE

Invoice Date:

10/13/2015

Shipped:

10/13/2015

PO No:

[REDACTED]

Customer No:

[REDACTED]

Due Date:

11/12/2015

Balance: [REDACTED]

Billing Address:

CALGARY CURRIE LEGISLATIVE ASSEMBLY
9718 107 ST NW
901 LEGISLATURE ANNEX
EDMONTON AB T5K 1E4

Location Address:

CALGARY CURRIE LEGISLATIVE ASSEMBLY
2108 B 33 AVE SW
CALGARY AB T2T 1Z6

Comments:

Service Date	Description	Comments	Reference	Qty.	Price	Amount
10/13/2015	18L RO Water Delivered			2	8.00	16.00
10/13/2015	Bottle Deposit	Dp: 2 Rt:1		1	10.00	10.00



Please include Customer No. and Invoice No. with your payment.

Page 1 of 1

Sub-Total:

Tax:

Total:

Customer No:

Invoice No:

40292TE

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson _____

Claimant Name: Brian Malkinson _____

Expense Category: Hosting _____

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: _____

Purpose:

Culligan water for constituents and constituency office X4



better water. pure and simple.™

H.S.T. # 813808607 RT 0001

INVOICE

Remit Payment to:

Culligan Water Treatment
1110 58th Ave., SE
Calgary AB T2H 2C9
(403) 243-5141
CalgCustServ@culliganwater.ca

Invoice #:

72303TE

Invoice Date:

11/10/2015

Shipped:

11/10/2015

PO No:

Customer No:

Due Date:

12/10/2015

Balance: [REDACTED]

Billing Address:

CALGARY CURRIE LEGISLATIVE ASSEMBLY
9718 107 ST NW
901 LEGISLATURE ANNEX
EDMONTON AB T5K 1E4

Location Address:

CALGARY CURRIE LEGISLATIVE ASSEMBLY
2108 B 33 AVE SW
CALGARY AB T2T 1Z6

Comments:

Service Date	Description	Comments	Reference	Qty.	Price	Amount
11/10/2015	18L RO Water Delivered			2	8.00	16.00
11/10/2015	Bottle Deposit	Dp: 2 Rt:0		2	10.00	20.00



[REDACTED]

[REDACTED]

Please include Customer No. and Invoice No. with your payment.

Page 1 of 1

Sub-Total:

Tax:

Total:

Customer No:

Invoice No:

72303TE