

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2016-17  
007 - Calgary-Currie - Malkinson, Brian  
For Expenses Processed Oct 1 - Dec 31, 2016

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$1,192.36	\$3,033.48
MLA Parking Cap - \$	\$900.00	\$128.41	\$298.79
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$101.63	\$311.53
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$1,272.62	\$3,017.76
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$4,200.00	\$12,600.00
Travel Accommodations Allowance			\$304.65
Travel Accommodations Allowance (days; 10 max) - NF	10.0		3.0
<b>Other</b>			
Hosting - \$		\$122.65	\$887.74
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (43.5 cents per km)</b>			
Constituency Travel (Kilometres) - NF	35,000.0	939.0	2,123.0
Special Trips (5 trips per year) - NF	5.0		1.0
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF			1.0
Use of a Private Automobile (52 trips per year) - NF	52.0	9.0	20.5
<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-07-B MALKINSON	
-	-
-	-
-	-
-	-

CLIENT NO.	
NO DU CLIENT	
INVOICE DATE	10/01/16
DATE DE LA FACTURE	
INVOICE NO.	0006467039
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 AUTHORISE 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
	MALKINSON				000442643025 09/14/16	SHELL CANADA INC RED DEER AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	45.3	1.15	49.52	2.48 2.48	52.00 52.00
					000442454989 09/10/16	PETRO CANADA AIRDR E AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.2	1.10	40.00	2.00 2.00	42.00 42.00
					000442454984 09/07/16	PETRO CANADA ROCKYVIEW COU AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	46.8	1.09	48.50	2.42 2.42	50.92 50.92
					0014713 120013885711 LA18917 09/06/16	NORTH STAR FORD CALG CALGARY AB	LUB OIL FILTR/PREVENT MAINTENA GST-HST / TPS-TVH SHOP SUPPLIES/SHOP SUPPLIES/SH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0 1.0	211.71 6.02	211.71 6.02	10.89 10.89	228.62 228.62
					000442454986 08/25/16	PETRO CANADA CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.5	1.24	61.90	3.10 3.10	65.00 65.00
					000442454985 08/19/16	PETRO CANADA CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	54.4	1.16	60.00	3.00 3.00	63.00 63.00
					000442454988 08/17/16	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	50.1	.92	43.81	2.19 2.19	46.00 46.00
					000442454987 08/16/16	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	37.5	.92	32.86	1.64 1.64	34.50 34.50
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS	324.8		554.32		

BLG871

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

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 10/01/16  
 DATE DE LA FACTURE  
 INVOICE NO. 0006467039  
 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
	MALKINSON											
TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE										27.72		582.04
BKN TOTALS / TOTAUX CODIFICATION 01-07												
								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	324.8	554.32	27.72	
BKN TOTALS / TOTAUX CODIFICATION												582.04

# Element Fleet Management



BDF290001

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 11/01/16  
DATE DE LA FACTURE  
INVOICE NO. 0006478695  
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
	MALKINSON				000444106104 09/28/16	IMPERIAL OIL RED DEER AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	48.4	1.06	49.05	2.45 2.45	51.50 51.50
					000443395632 09/27/16	FEDERATED COOPERATIVES L MITED INNISFAIL 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	50.8 3.0	1.04 1.45	50.09 4.35	2.50 .22 2.72	57.16 57.16
					000444226057 09/23/16	PETRO CANADA NISKU AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	40.6	1.16	44.76	2.24 2.24	47.00 47.00
					000444226059 09/23/16	PETRO CANADA AIRDR E AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	31.8	1.11	33.62	1.68 1.68	35.30 35.30
					000444226060 09/22/16	PETRO CANADA AIRDR E AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	45.1	1.11	47.62	2.38 2.38	50.00 50.00
					000444226058 09/16/16	PETRO CANADA AIRDR E AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	48.0	1.08	49.29	2.46 2.46	51.75 51.75
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	264.7		278.78	13.93	292.71
	BKDN TOTALS / TOTAUX CODIFICATION 01-07				1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	264.7		278.78	13.93	
							BKDN TOTALS / TOTAUX CODIFICATION					292.71

BLG871

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

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

CLIENT NO. NO DU CLIENT	
INVOICE DATE DATE DE LA FACTURE	12/01/16
INVOICE NO. NO DE LA FACTURE	0006490543

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
	MALKINSON			0316500 LF17879	120013998818 11/05/16	MINIT LUBE LTD CALGARY AB	LUBRICATE-CHANGE OIL & FILTER/ GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0	63.94	63.94	3.20 3.20	67.14 67.14
					000445750899 11/04/16	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	40.3	.92	35.30	1.77 1.77	37.07 37.07
					000445896938 10/29/16	PETRO CANADA PONOKA AB	MIDGRADE UNLEADED GASOLINE 1 GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	51.5	1.03	50.48	2.52 2.52	53.00 53.00
					000445657136 10/24/16	IMPERIAL OIL AIRDR E AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	50.3	.91	43.81	2.19 2.19	46.00 46.00
					000445657135 10/23/16	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	39.6	.93	35.24	1.76 1.76	37.00 37.00
					000445657134 10/20/16	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	50.5	1.13	54.30	2.71 2.71	57.01 57.01
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	232.2		283.07	14.15	297.22
	BKDN TOTALS / TOTAUX CODIFICATION 01-07		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	232.2		283.07	14.15	
							BKDN TOTALS / TOTAUX CODIFICATION					297.22

BLG871

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

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$40.95+GST

Purpose:

Fuel -

SHELL CANADA PRODUCTS  
37547 HWY2  
RED DEER, AB T4E 1B1  
(403) 343-6555

Tax Description	Qty	Amount
F Bronze No3		
44.607 L @ \$0.964/ L		\$43.00
Sub Total		\$43.00
5.0% GST tax on	\$0.00	\$0.00
0.0% PST tax on	\$0.00	\$0.00
<b>TOTAL</b>		<b>\$43.00</b>
Debit:		\$43.00
Change		\$0.00

00 APPROVED - THANK YOU 001

INTERAC  
SAVINGS  
PURCHASE  
INV No.   
APPROVAL No.   
INTERAC  
AID A0000002771010  
TVR 8080008000  
TSI 6800

VERIFIED BY PIN

IMPORTANT  
retain this copy for your records

Fuel Includes GST 5.0% \$2.05  
Fuel Includes PST 0.0% \$0.00  
GST - Fuel - AB No. 137400032 RT

\*\*\*\*\* YOUR OPINION COUNTS \*\*\*\*\*  
Tell us about your recent visit at  
[www.shell.ca/opinion](http://www.shell.ca/opinion)  
and you could win a \$500 Shell Gift Card  
\*Receipt Required

THANK YOU  
Questions? 1-800-661-1600  
REG: 2 CSH: K, Anees TRAN:   
2016/11/06 19:55:42 ST:

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

- ☐ Individual Constituent(s)  
☐ Individual Stakeholder(s)  
☐ Group: \_\_\_\_\_ \$35.24 + GST

Purpose:

GAS

CENTRAL TIRE GAS BAR  
9914 109 ST NW  
EDMONTON AB

CARD TYPE VISA  
DATE 2016/11/22  
TIME 1617 20:17:08  
RECEIPT NUMBER  
C84066598-001-030-011-0

PURCHASE  
TOTAL

\$37.00

VISA  
A0000000031010  
69053DFFAFBE2230  
0080008000-E800  
CEDD7EA9F092CF0F  
0080008000-F800

APPROVED

01-027

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

CENTRAL TIRE GAS BAR  
9914-109 ST  
GST #R071708701  
Transaction #: 0012281

Pump: 3 REGULAR  
Hose 1

Credit:

Volume 41.162 Liter

@ Price 0.099/Liter

Total \$ 37.00

Time: 21:21  
Date: 11/22/2016

\*\*\*\* Thank You \*\*\*\*

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: \$38.00 + GST

Purpose:

Walk mile in her shoes event



SUNCOR ENERGY  
CENTRE

GST: 102466

RECEIPT A7

IN: 20/09/16 10:31

OUT: 20/09/16 14:30

DURATION: 0:03:59

PAID: \$ 39.90

VISA

REF. 46

GST No. 887315638RT



impark



LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Signe Spence

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$9.52 + GST

Purpose:

Parking at Telus Convention Centre for Accessible Canada session

**KEEP TICKET WITH YOU. DO NOT FOLD.**

1. When leaving, use this ticket to pay at the **WEST GATE** or **RECREATION EXITS**.

*(Cash and credit card payment accepted at paystations prior to exit)*

2. **Once paid, insert this ticket at the parking lot exit.**

*(You'll have 20 minutes to vacate the lot once the ticket is paid for)*

▷ **Please keep ticket away from cell phones or other magnetic devices.**

UP

18/13/2016 17:41 02 00 6 01-888443

0/13/16 20:0402 CA 0.00 10.00

SAMRU Event

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: \$4.76 + GST

Purpose:

Parking - Speaking at QUEST2016

WORKING AUTHORITY (403) 537-7000

CALGARY F

Terminal: 367

Zone: 1208

Valid through:

MONDAY 17 OCT 16

10:03 AM

QUEST 2016

AMOUNT PAID: \$5.00 (GST incl.)

Auth No: [REDACTED]

Start Time: 10/17/2016 8:10 AM

Receipt No: 22691

sting & Tire Inflation Services (403) 537-7006

FREE Battery Bo

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$14.29 + GST

Purpose:

Parking - Social Sector Leaders Roundtable

Priority (403) 537-7000

Terminal: 574

CALGARY PARKING AUTH

Zone: 9062

Valid through:

WEDNESDAY 19 OCT 16  
5:29 PM

AMOUNT PAID: \$15.00 (GST incl.)

Auth No: \_\_\_\_\_

Receipt No: 52371

Start Time: 10/19/2016 1:44 PM  
Priority Services (403) 537-7000 FREE Battery Boosting & Tire In

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$762 + GST

Purpose:

Parking - State of Prov. Event

537-7000

CALGARY PARKING AUTHORITY (403)

Terminal: 574

Zone: 9062

Valid through:

WEDNESDAY 19 OCT 16  
1:38 PM

AMOUNT PAID: \$8.00 (GST incl.)

Auth No: [REDACTED]

Start Time: 10/19/2016 11:38 AM

Receipt No: 52363

103) 537-7000 FREE Battery Boosting & Tire Inflation Services



LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$8.57 + GST

Purpose:

Parking - CLERC event

*CLERC*  
*Calin*  
Hotel Arts  
Calgary

Hotel Arts Parking Calgary

DATE: 10/20/16

TIME: 07:29 PM

\* Original \*

Receipt No. 13/774/212

Ticket - 238991

LPR =

TAX included 9.00

Credit: 9.00

Card type: VISA

Entry - 10/20/16 06:09 PM

Valid - 10/20/16 07:29 PM

GST# 861182947 RT0001

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian MALKINSON

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$4.76 + GST

Purpose:

Parking - Caucus meeting

SECURITY (403) 537-7000

Terminal: 857

CALGARY PARKING AUTH

Zone: Lot 28 : 9028

Valid through:

**SATURDAY 29 OCT 16**  
**5:00 AM**

*Caucus meeting*

*Oct 28*

AMOUNT PAID: \$5.00 (GST incl.)

START TIME: 10/28/2016 12:39 PM

Auth No: [REDACTED]

RECEIPT NO: 65337

ion Services (403) 537-7006

FREE Battery Boosting & Tire Infla

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian MALKINSON

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$ 9.00 + GST

Purpose:

Parking - Meg Energy Tour

SUNWEST AVIATION

CAN-11 1 *Meg Energy*

PS01 27/10/16 18:36  
Receipt 028697

Short-term parking tkt

1 - No. 042655

27/10/16 06:15

27/10/16 18:36

Period 0d12h22'

(GST) \$9.45

Total \$9.45

Payment Received

VTSA \$9.45

01 APPROVED-THANK YOU 027

01 APROUVEE-MERCI 027

Sub Total \$9.00

GST 5% \$0.45

All Amounts in CAD.

Deliv. Date=Receipt Date

24343705 - 1/1



LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$5.71 + GST

Purpose:

Parking - ATA meeting

Hotel Arts  
Calgary

Hotel Arts Parking Calgary

DATE: 11/15/16

TIME: 06:26 PM

\* Original \*

Receipt No. 4/799/212

Ticket - 241112

LPR =

TAX included 6.00

Credit: 6.00

Card Type: VISA

Entry - 11/15/16 05:47 PM

Valid - 11/15/16 06:26 PM

GST# 861182947 RT0001

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$7.14 + GST

Purpose:

Parking - Speaking at MRU

MOUNT ROYAL UNIVERSITY  
Date: 10/25/16 09:28:21  
Payment Type: Visa

ISO Code:

Ref:

7.50

Tax: .36

Total: 7.50

POS: AP5

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$5.71 + GST

Purpose:

Parking - InSitu oil producers meeting

ALGARY PARKING AUTHORITY (403) 537-7000

Terminal: 551

Zone: 3880

Plate: [REDACTED]

Valid through:

**FRIDAY 18 NOV 16**

**12:07 PM**

*In Situ*

AMOUNT PAID: \$6.00 (GST incl.)

Start Time: 11/18/2016 9:57 AM

Receipt No: 8799

Battery Boosting & Tire Inflation Services (403) 537-7006

FRI

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: \_\_\_\_\_

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$3.81 + GST

Purpose:

Aurora on the Park Opening - Parking

CALGARY PARKING AUTHORITY (403) 537-7000

Terminal: 758

Zone: 2714

Valid through:

THURSDAY 24 NOV 16  
12:09 PM

*Aurora on  
park opening*

AMOUNT PAID: \$4.00 (GST incl.)

Auth No: \_\_\_\_\_

Start Time: 11/24/2016 10:11 AM

Receipt No: 12377

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

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: \$9.52 + GST

Purpose:

parking - Premiers event

NG AUTHORITY (403) 537-7000

CALGARY PARK

Terminal: 857

Zone: Lot 28 : 9028

Valid through:

FRIDAY 16 DEC 16

12:18 PM

AMOUNT PAID: \$10.00 (GST incl.)

START TIME: 12/16/2016 10:46 AM  
& Tire Inflation Services (403) 537-7006

Auth No: [REDACTED]

RECEIPT NO: 66863

FREE Battery Boosting

## LEGISLATIVE ASSEMBLY OF ALBERTA

## Personal Expense Claim Receipt Description

Member Name: Brian MalkinsonClaimant Name: Brian MalkinsonExpense Category: Taxi, Bus Travel

## For hosting, select one:

☐ Individual Constituent(s)☐ Individual Stakeholder(s)☐ Group: \_\_\_\_\_

\$56.53 tax

## Purpose:

Leg to airport

Co-op Taxi Line

(780) 425-2525

www.co-optaxi.com

Terminal 349/66234833

Driver 1254

16/12/14 06:49:16

VISA

VISA

CHIP CARD

A0000000031010

0080008000

Ref # 0010011420 C

## PURCHASE

FARE : \$ 52.00

TIP : \$ 7.00

TOTAL : \$ 59.00

*Visa*APPROVED - THANK YOU  
(01-027)IMPORTANT: Retain this  
copy for your records

Customer Copy

Thank you for choosing  
Co-op taxi

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \$ 45.10 + GST -

Purpose:

airport to home

ASSOCIATED CAB  
ALLIED LIMOUSIN  
307-41 AVENUE NE  
CALGARY AB T2E 2N4  
(403) 299-1111

SALE

MID: 4189233  
TID: QE189233 REF#: 00000003  
Batch #: 329 SEQ: 329001001003  
12/14/16 09:46:25  
CVC: Y

VISA

\*\*/\*\*

AMOUNT	\$42.10
TIP	\$5.00
TOTAL	\$47.10

00 - APPROVED - 001

VISA

AID: A0000000031010  
TVR: 00 80 00 80 00  
TSI: F8 00

VISA

THANK YOU

CUSTOMER COPY





# 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: September

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	Travel to/from Capital	Innisfail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
8	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
9	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Red Deer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
15	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
16	Travel to/from Capital	Edmonton/Red Deer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
23	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
28	Travel to/from Capital	Red Deer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
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						\$254.86	\$12.74	\$267.60

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date

Nov 3, 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: October

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			<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	Travel to/from Capital	Red Deer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
24	Travel to/from Capital	Edmonton/Red Deer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
Grand Total						\$118.67	\$5.93	\$124.60

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date

Nov 3, 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: November

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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
2	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
3	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
4	Travel to/from Capital	Edmonton / Red Deer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
7	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
8	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
9	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<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	Travel to/from Capital	Red Deer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
21	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
22	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
23	Travel to/from Capital	Edm / RedDeer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Red Deer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
28	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
29	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$573.76	\$28.69	\$602.45

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date

Dec 3, 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:** 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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
2	Travel to/from Capital	Edm / Red Deer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	Travel to/from Capital	Innisfail	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
5	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
6	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	Travel to/from Capital	Red Deer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
12	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
13	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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"/>			
Grand Total						\$325.33	\$16.27	\$341.60

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date

*Brian Malkinson*  
Dec 27, 2016



## Members' Temporary Accommodation Allowance Claim Form

**Note to MLAs:** Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Malkinson, Brian

Constituency: Calgary-Currie

Employee #: [REDACTED]

Date: 4/18/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually  
Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,400.00

x 12 = \$ 16,800.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

**Please Note:** The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

October 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016





## Members' Temporary Accommodation Allowance Claim Form

**Note to MLAs:** Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Malkinson, Brian

Constituency: Calgary-Currie

Employee #: [REDACTED]

Date: 4/18/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually  
Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,400.00

x 12 = \$ 16,800.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

**Please Note:** The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

November 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

  
Member Signature

Updated April 2016



## Members' Temporary Accommodation Allowance Claim Form

**Note to MLAs:** Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Malkinson, Brian

Constituency: Calgary-Currie

Employee #: [REDACTED]

Date: 4/18/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually  
Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,400.00

x 12 = \$ 16,800.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

**Please Note:** The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

December 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

  
Member Signature

Updated April 2016

GREEN HILL RD VIETNAM  
2929 RICHMOND RD SW  
CALGARY, AB T2E2L1  
5673521234  
GST # R14653254

Headstock ID: S729571  
Turn ID: 001

Ref. 4: (a) 7

Sale

DEBIT

Entry Method: Chip

Act Type: Chew, 410

18/01/10

4C-05-08  
10-091-015

IV	11	0000001
IV	11	0000001

Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Approved \_\_\_\_\_

Batch# 000065  
Batch# 000065

Trace: 106-5-295

Manuscript received 4/16/80; revised 10/16/80; accepted 11/1/80.

## Abstract

\$ 107.65

**Tip:**

15.00

Total:

4	122.65
5	147.00

The signature required. Verified by PIN.  
Your account will be debited with the  
above amount.  
Retain this copy for statement  
verification.

Author's address: *University of Twente, Enschede, The Netherlands*

Green Cilantro  
2929 Richmond Road SW  
(587) 352-1234  
EST # 814-993234

OUR NUMBER 244072

DATE Oct 21 2016

CUSTOMER'S ORDER

SOLD TO

ADDRESS

SHIP TO

ADDRESS

FOB

TAX REG. NO.

SALESPERSON

QUANTITY

#### DESCRIPTION

**PRICE**

AMOUNT

30

Spring roll x 10

55 00

30

Salad roll x 10

47 50

107.65

TOTAL

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