

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2017-18
007 - Calgary-Currie - Malkinson, Brian
For Expenses Processed Jan 1 - Mar 31, 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$1,472.78	\$5,080.32
MLA Parking Cap - \$	\$900.00	\$72.38	\$267.31
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$217.67	\$559.29
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$655.09	\$3,989.61
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,550.00	\$19,350.00
Travel Accommodations Allowance			\$455.25
Travel Accommodations Allowance (days; 10 max) - NF	10.0		3.0
Other			
Hosting - \$		\$278.99	\$1,588.56
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000.0	3,101.0	9,158.0
Special Trips (5 trips per year) - NF	5.0		2.0
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			1.0
Use of a Private Automobile (52 trips per year) - NF	52.0	4.0	27.0
Other Travel			
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
DETAI LS 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

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CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
NVOICE DATE 01/01/18
DATE DE LA FACTURE
NVOICE NO. 0006993645
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCR PTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
[REDACTED]	MALKINSON	[REDACTED]	[REDACTED]		000483865259 12/14/17	PETRO CANADA AIRDRIE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	69.1	.97	63.81	3.19 3.19	67.00 67.00
				0342257 BC00000	000483265048 12/07/17	F&F. HOLDINGS LTD EDMONTON AB	LUBRIFICATION OIL CHANGE LABO GST-HST / TPS-TVH OIL & FILTER SERVICE LUBRICATION OIL CHANGE PARTS MOTOR OIL MISC. MECHANICAL PARTS ENGINE ANTIFREEZE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0 1.0 1.0 1.0 1.0	65.00 7.35 6.30	65.00 7.35 6.30	3.94	82.59 82.59
					000483865257 12/07/17	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	35.2	1.01	33.81	1.69 1.69	35.50 35.50
					000482593413 12/03/17	SHELL CANADA INC RED DEER AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	31.5	1.08	32.38	1.62 1.62	34.00 34.00
					000483865258 12/01/17	PETRO CANADA AIRDRIE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	46.2	.97	42.86	2.14 2.14	45.00 45.00
					000483865260 11/27/17	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	29.6	1.01	28.58	1.43 1.43	30.01 30.01
					000483741326 11/26/17	IMPERIAL OIL CROSSFELD AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	61.8	1.04	60.95	3.05 3.05	64.00 64.00
					000482782183 11/20/17	FASGAS INNISFAIL AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.4	1.09	68.10	3.40 3.40	71.50

BLE871

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
DETAI LS 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
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- -

CLIENT NO.
NO DU CLIENT
NVOICE DATE 01/01/18
DATE DE LA FACTURE
NVOICE NO. 0006993645
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 DESCRPTION 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						SUBTOTAL / SOUS TOT			68.10	3.40	71.50
							DISCOUNT / RABAIS			.65-		.65-
							TOTAL / TOTAL			67.45		70.85
					000483741325	IMPERIAL OIL		46.8	1.10	49.05		
					11/19/17	CROSSF ELD	AB				2.45	
							UNLEADED REGULAR GASOLINE					
							GST-HST / TPS-TVH				2.45	
							REF GST-HST / TPS-TVH REF					
							** REF NO TOT / TOT NO REF **					51.50
							TOTAL / TOTAL			49.05	2.45	51.50
					000484230785	HUSKY OIL		61.8	1.15	67.70		
					11/16/17	CALGARY	AB				3.30	
							UNLEADED REGULAR GASOLINE					
							GST-HST / TPS-TVH				3.30	
							REF GST-HST / TPS-TVH REF					
							** REF NO TOT / TOT NO REF **					71.00
							SUBTOTAL / SOUS TOT			67.70	3.30	71.00
							DISCOUNT / RABAIS			.62-		.62-
							TOTAL / TOTAL			67.08		70.38
					000482792384	FASGAS		55.0	1.20	62.86		
					11/09/17	RED DEER COUN	AB				3.14	
							UNLEADED REGULAR GASOLINE					
							GST-HST / TPS-TVH				3.14	
							REF GST-HST / TPS-TVH REF					
							** REF NO TOT / TOT NO REF **					66.00
							SUBTOTAL / SOUS TOT			62.86	3.14	66.00
							DISCOUNT / RABAIS			.55-		.55-
							TOTAL / TOTAL			62.31		65.45
					000482792385	FASGAS		2.0	7.05	14.10		
					11/09/17	RED DEER COUN	AB				.71	
							GST-HST / TPS-TVH				.71	
							REF GST-HST / TPS-TVH REF					
							** REF NO TOT / TOT NO REF **					14.81
							TOTAL / TOTAL			14.10	.71	14.81
					UNIT TOTAL / TOT UNITE							
							FUEL QTY / QTE CARB	502.4				
							TOT CHARGES / TOT FRAIS			602.85		
							TOT GST-HST / TOT TPS-TVH				30.06	
							UNIT TOTAL / TOT UNITE					632.91
							DISCOUNT / RABAIS					1.82-
							TOTAL / TOTAL					631.09
	BKDN TOTALS / TOTAUX CODIFICATION		UNITS / VEHIC		1		FUEL QTY / QTE CARB	502.4		602.85		
	01-07						TOT CHARGES / TOT FRAIS				30.06	
							GST-HST/TPS-TVH					
							BKDN TOTALS / TOTAUX COD FICATION					632.91
							DISCOUNT / RABAIS					1.82-
							TOTAL / TOTAL					631.09

BLE871

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

Element Fleet Management



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FLEET MANAGEMENT SERVICES DETAIL
DETAI LS 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
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- -
- -
- -

CLIENT NO.
NO DU CLIENT
NVOICE DATE 02/01/18
DATE DE LA FACTURE
NVOICE NO. 0007019898
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 DESCRPTION 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				000486573271 01/10/18	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	55.2	1.07	56.19 2.81 59.00	2.81 59.00	59.00
					000486573272 12/20/17	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	57.6	1.13	61.90 3.10 65.00	3.10 65.00	65.00
					000486573273 12/20/17	PETRO CANADA CALGARY AB	MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0	9.98	9.98 .50 10.48	.50 10.48	10.48
					000486573274 12/17/17	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	64.5	.93	57.43 2.87 60.30	2.87 60.30	60.30
					000485642957 12/10/17	FASGAS BOWDEN AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	53.7	1.02	52.38 2.62 55.00 52.38 54.- 51.84	2.62 55.00 54.- 54.46	55.00 55.00 54.- 54.46
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	231.0		237.88 11.90 249.78 54.- 249.24	11.90	249.78 54.- 249.24
	BKDN TOTALS / TOTAUX CODIFICATION 01-07		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH BKDN TOTALS / TOTAUX COD FICATION DISCOUNT / RABAIS TOTAL / TOTAL	231.0		237.88 11.90 249.78 54.- 249.24	11.90	249.78 54.- 249.24

BLE871

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

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 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	
NVOICE DATE	03/01/18
DATE DE LA FACTURE	
NVOICE NO.	0007042854
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 ----- DESCRPTION 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				000489351003 02/08/18	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	41.3	1.09	42.86	2.14 2.14	45.00 45.00
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	41.3		42.86	2.14	45.00
	BKDN TOTALS / TOTAUX CODIFICATION 01-07				UNITS / VEHIC 1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	41.3		42.86	2.14	
							BKDN TOTALS / TOTAUX COD FICATION					45.00

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	04/01/18
DATE DE LA FACTURE	
INVOICE NO.	0007066291
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 DESCRPTION 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				000492120279 03/11/18	PETRO CANADA NISKU AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	46.4	1.01	44.76	2.24 2.24	47.00 47.00
					000492120276 03/09/18	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	46.3	1.08	47.63	2.38 2.38	50.01 50.01
					000491684843 03/06/18	SHELL CANADA INC RED DEER AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	63.7	1.14	69.05	3.45 3.45	72.50 72.50
					0349000 000491585439 02/26/18	MR LUBE AB	STANDARD PACKAGE GST-HST / TPS-TVH SHOP SUPPLIES VEND VIN/NIV REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0 1.0	64.99 4.99	64.99 4.99	3.50 3.50	73.48 73.48
					000492120280 02/26/18	PETRO CANADA ROCKYVIEW COU AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	62.7	1.07	63.81	3.19 3.19	67.00 67.00
					000492120277 02/15/18	PETRO CANADA AIRDRIE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	64.1	1.14	69.52	3.48 3.48	73.00 73.00
					000492120278 02/15/18	PETRO CANADA AIRDRIE AB	MISCELLANEOUS GST-HST / TPS-TVH OIL REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0 1.0	19.96 7.79	19.96 7.79	1.39 1.39	29.14 29.14
					000491266799 02/14/18	FASGAS BOWDEN AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS	60.9	1.06	61.43	3.07 3.07	64.50 64.50 61- 61-

BLE871

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

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DIV-07-B MALKINSON
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- -

CLIENT NO.
NO DU CLIENT
NVOICE DATE 04/01/18
DATE DE LA FACTURE
NVOICE NO. 0007066291
NO DE LA FACTURE

UNIT NO ----- NO. D'UNITE	DRIVER NAME DRIVER ID. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. ----- NO. DE SERIE	CARD NO. ----- NO. DE CARTE	KM AUTHORIZE ----- KM AUTORISE	REFERENCE NO ACTIVITY DATE ----- NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION ----- NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION ----- DESCR PTION DES FRAIS	QTY ----- QTE	UNIT COST ----- COUT UNIT	EXTENDED PRICE ----- TOTAL	GST-HST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE ----- MONTANT TOTAL DU
	MALKINSON						TOTAL / TOTAL			60.82		63.89
							FUEL QTY / QTE CARB	344.1				
							TOT CHARGES / TOT FRAIS			453.93		
							TOT GST-HST / TOT TPS-TVH				22.70	
							UNIT TOTAL / TOT UNITE					476.63
							DISCOUNT / RABAIS					.61-
							TOTAL / TOTAL					476.02
	BKDN TOTALS / TOTAUX CODIFICATION 01-07				1		FUEL QTY / QTE CARB	344.1				
							TOT CHARGES / TOT FRAIS			453.93		
							GST-HST/TPS-TVH				22.70	
							BKDN TOTALS / TOTAUX COD FICATION					476.63
							DISCOUNT / RABAIS					.61-
							TOTAL / TOTAL					476.02

BLE871

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: _____

Purpose:

gasoline

\$ 72.40



PETRO-CANADA
217 EDMONTON TR.
AIRDRIE
ALBERTA T4B 1S1
(403) 948-6076

GST 809568272
PC0473365:8541501
TERMINAL: 028541553
PAYPOINT: 028541501

2018-02-27 22:11

PUMP 03
REGULAR
LITRES L 66.156
PRICE/L \$ 1.179
FUEL SALES \$ 78.00*
CARD SAVINGS
@ 3.0 CPL \$ -1.98

TOTAL OWED \$ 76.02

TOTAL PAID
CREDIT CARD \$ 76.02

* GST INCL. \$ 3.62

UISA

INVOICE 093161
AUTH
PURCHASE
T 0010010010 00 027
APPROVED
THANK YOU

-- IMPORTANT --
RETAIN THIS COPY
FOR YOUR RECORDS
- CUSTOMER'S COPY -

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: _____

Purpose:

gas

\$62.86

Personal Visa
at Kreta Souvlaki
Calgary, Alberta
(403) 457-0040

2018/01/29 08:48:28

Trans #: 000010030574
Fuel: REGULAR UNLEADED
Pump: 3
Volume: 58.457 L
Unit Price: \$1.129/L
Total: \$66.00

GST(5%): \$3.14

Tax Included

PRE-AUTH COMPLETION

\$66.00

CARD [REDACTED]
VISA [REDACTED]
DATE 18/01/29
TIME 08:51:36
REFERENCE #
KRETPC03 012001001004 C
AUTH# [REDACTED]
INVOICE # 0030574
VISA CREDIT
A0000000031010
000
APPROVED 00

TVR 0080008000
TSI F800

CUSTOMER COPY

THANK YOU
HAVE A NICE DAY !!!

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:

Christmas Stakeholders event

\$ 3.33

Plate: [REDACTED]
Zone: **1326**

Valid through:

FRIDAY
15 DEC 17
11:58 AM

START TIME: 12/15/2017 11:12 AM
AMOUNT PAID: \$3.50 (GST Incl.)

Auth No: [REDACTED]

Trn No: 1a8864347e578ceb

Terminal: 1124

Receipt No: 5823 [REDACTED]

CALGARY PARKING AUTHORITY (403) 537-7000

CAL

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:

YYC- Counseling meeting

\$ 2.86

plus.ca

Plate: [REDACTED]

Zone: **3957**

Valid through:

FRIDAY
02 FEB 18
2:16 PM

Pay for your parking online: www.parkplus.ca

START TIME: 2/2/2018 12:58 PM
AMOUNT PAID: \$3.00 (GST Incl.)

Auth No: [REDACTED]
Trn No: 29728d4b1054b6f7
Terminal: 1383
Receipt No: 1744

3) 537-7000

CALGARY PARKING AUTHORITY (403) 537-7000

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:

Constituent meeting

\$ 17.14

20 VIC
CORE PARKADE
Indigo Park
RECEIPT C2

ENTRY TIME:
07.02.18 12:03

EXIT TIME:
07.02.18 16:23

PARK-DUR.: HRS:MIN
0:04:20

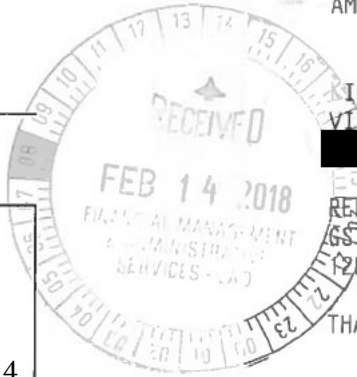
AMOUNT:
\$ 18.00

KIND OF PAYMENT:
VISA

XXXXX 67

REG
GST No.
R2099-6095 RT0004

THANK YOU FOR YOUR
VISIT



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:

Student Connect - MRU

\$ 7.86



Student + remittance
MOUNT ROYAL UNIVERSITY

Date: 02/08/18 20:43:13

Payment Type: Visa

Account Number: [REDACTED]

Auth Code: [REDACTED]

ISO Code:

Ref:

8.25

Tax: .39

Total: 8.25

POS: AP1

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:

Immigrants of distinction parking charge
\$ 30.00

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

WESTIN®

HOTELS & RESORTS

Malkinson

Page Number : 1 Invoice Nbr : 325942
Guest Number : 1405181
Folio ID : A
Arrive Date : 09-MAR-18
Depart Date : 09-MAR-18
No. Of Guest : 1
Room Number :
Club Account :

Tax Invoice

Tax ID : 815462536RT0001

The Westin Calgary MAR-09-2018 18:11 A0114019

Date	Reference	Description	Charges (CAD)	Credits (CAD)
09-MAR-18	parking	Paid Out - Bellmen's Grat	30.00	
09-MAR-18	VI			-30.00

Approve EMV Receipt for VI - : PIN Verified

Application Label: VISA CREDIT

** Total 30.00 -30.00
*** Balance 0.00

Continued on the next page

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: _____

\$5.48 + GST

Purpose:

parking - career leap tour

Plate: [REDACTED]

Zone: **1957**

Pay for your parking online: www.park

Valid through:

**THURSDAY
15 MAR 18
3:02 PM**

START TIME: 3/15/2018 1:46 PM

AMOUNT PAID: \$5.75 (GST incl.)

Trn No: a454036bb22f762b

Terminal: 1021

Receipt No: 15711

CALGARY PARKING AUTHORITY (403) 537-7000

CAL

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: \$5.71 + GST

Purpose:

Bill 2 announcement

MEREDITH BLOCK
611 MEREDITH RD NE
CALGARY AB T2E5A9
RECEIPT C1

ENTRY TIME: 03/15/18 09:07
EXIT TIME: 03/15/18 10:32
PARK-DUR.: HRS:MIN
0:01:25

PURCHASE
VISA
AMOUNT [REDACTED] \$6.00

Date: MAR-15-2018
Time: 10:32:20
662588100010010570C

Auth.#: [REDACTED]
VISA CREDIT
A00000000031010
TVR: 0080008000
TSI: F800
01 APPROVED - THANK
YOU 027

VERIFIED BY PIN
*IMPORTANT - retain
this copy for your
records

CUSTOMER COPY
THANK YOU FOR YOUR
VISIT



The American Express® Corporate Card Statement of Account

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

Prepared For
BRIAN MALKINSON
LEGIS ASSEMBLY OF AB

Membership Number

Date
February 16, 2018



Page 1 of 2

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
0.00	0.00	31.50	31.50

Statement includes payments and charges received by February 16, 2018

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

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

0951

Credit Limit Summary On February 16, 2018

Total Credit Limit \$ Available Credit Limit \$

New Transactions for BRIAN MALKINSON

Amount \$

February 1	DELTA CABS LTD 40824 CALGARY Goods or Services	10.40
February 1	CALGARY UNITED CABS CALGARY Goods or Services	9.25
February 5	CALGARY UNITED CABS CALGARY Goods or Services	11.85
Total New Transactions for BRIAN MALKINSON		31.50

\$ 30.00 plus GST

AMERICAN EXPRESS®

Payment Options

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

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash

† Please detach here †

Membership Number

Amount Due \$

31.50

Amount Paid \$

000145



BRIAN MALKINSON
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

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





The American Express® Corporate Card Statement of Account

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

Prepared For
BRIAN MALKINSON
LEGIS ASSEMBLY OF AB

Membership Number

Date
March 18, 2018



Page 1 of 2

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

Statement includes payments and charges received by March 18, 2018

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

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

Credit Limit Summary On March 18, 2018

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

March 8 Payment Received Thank You

New Transactions for BRIAN MALKINSON

Amount \$

March 16 CO OP TAXI LINE LTD EDMONTON
TAXICABS AND LIMOUSINES

62.00

March 16 ASSOCIATED CAB/ALLIE CALGARY
TAXICABS AND LIMOUSINES

48.50

Total New Transactions for BRIAN MALKINSON

\$105.24 +GST

↑ Please detach here ↑

AMERICAN EXPRESS®

Payment Options

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

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash



BRIAN MALKINSON
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

Membership Number

Amount Due \$

Amount Paid \$

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



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: _____

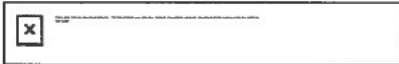
Purpose:

Red arrow bus travel
\$ 72.38

Brian Malkinson

From: Red Arrow Reservations <itinerary@redarrow.ca>
Sent: Saturday, January 27, 2018 11:23 AM
To: Brian Malkinson
Subject: Red Arrow Itinerary/Receipt

B76C7

INVOICE

2018-01-27

You can reach us at:

Website User

Corporate Sales

ORDER#	ORDERED	CUSTOMER#	P.O.	GROUP NAME	DEPARTING	RETURNING	SALES REP	SALES AGENT
1755156	2018-01-27				2018-01-31	2018-01-31	-	Website User

Travellers:

Malkinson/Brian

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
EDMCAL 18:30 Assigned to: 12A Departs Edmonton (EDMTO / ETO 10014 104 St) at 18:30 on 2018-01-31. Arrives Calgary (CALTO / CTO 205 9 Ave SE) at 22:00 on 2018-01-31. (3 hrs 30 mins)	3 hrs 30 mins	Adult	1	\$ 72.38	\$ 76.00

Base Price: \$ 72.38**Discounts:** \$ 0.00**Service Charges:** \$ 0.00**GST:** \$ 3.62**Invoice Total:** \$ 76.00**Payments Received**

DATE	GUEST	REFERENCE	AMOUNT
2018-01-27	Brian Malkinson		\$ 76.00

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: _____

Purpose:

taxi - return from red arrow station

\$ 10.05

CALGARY UNITED CABS
5660 10TH ST NE
SUITE 8
CALGARY AB T2E 8W7
(403) 777-1111
U# A029

VISA
SALE

Batch #: 046 REF#: 00000033
01/31/18 SEQ: 046001001033
APPR CODE: **22:10:47**
VISA

AMOUNT	\$8.45
TIP	\$2.00
TOTAL	\$10.45

00 - APPROVED - 001

VISA CREDIT
AID: A0000000031010
TVR: 00 80 00 80 00
TS: F8 00

www.calgarycabs.ca

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: January

Year: 2018

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			<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	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
Grand Total						\$98.90	\$4.95	\$103.85

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

Feb 6, 2018



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: 2018

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
15	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
27	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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						\$98.86	\$4.94	\$103.80

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

Feb 28, 2018



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: March

Year: 2018

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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 type="checkbox"/>	19.81	0.99	20.80
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
15	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
16	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
19	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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						\$457.33	\$22.87	\$480.20

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 *March 23, 2018*



Members' Temporary Accommodation Allowance Claim Form

07

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 #:

Date: 12/3/2017

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: 2017-2018

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)

\$ 1,850.00

x 12 = \$ 22,200.00

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.

January 2018

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

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

07

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 #:

Date: 12/3/2017

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: 2017-2018

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)

\$ 1,850.00

x 12 = \$ 22,200.00

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.

February 2018

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

Member Signature

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 #:

Date: 12/3/2017

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: 2017-2018

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)

\$ 1,850.00

x 12 = \$ 22,200.00

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.

March 2018

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

Member Signature

Updated April 2016

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:

staff Christmas lunch

\$ 50.97

GREY EAGLE CASINO - THE
BUFFET
3777 GREY EAGLE DR
TSUU T'INA AB

CARD [REDACTED]
CARD TYPE VISA
DATE 2017/12/19
TIME 6891 12:22:56
SERVR ID 7354
CHECK # 811941
TABLE # 47
RECEIPT NUMBER
C82007368-001-118-007-0

PURCHASE
TOTAL

\$53.52

VISA CREDIT
A0000000031010
94A6F1BEA735FDB6
0080008000-E800
19738612F9EF7B8F
0080008000-F800

APPROVED

AUTH# [REDACTED] 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

CHECK # 811941 DATE 12/19/17
TABLE # 47 TIME 12:18PM
=====

-- BUFFET REST : AM CASH --

ITEMS ORDERED	AMOUNT
3 XMAS LUNCH BUFFET	50.97

SUBTOTAL	50.97
GST PLUS	2.55

TOTAL DUE 53.52

OF GUESTS 3

Room # _____
Tip _____
Total _____
Print Name _____
Signature _____

Thank you for your Patronage
Grey Eagle Resort & Casino
www.greyeagleresortandcasino.ca
GST# 83687 6961 RT 0001
18% Gratuity on parties of six or more.

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: MLA Stampede breakfast on July 8, 2018

Purpose:

paper cups, plates, utensils, pancake mix and maple syrup for the
July 8, 2018 Stampede Breakfast hosted by the MLA in Rosscarrock

\$206.83



#251 CALGARY SOUTH

99 HERITAGE GATE SE

CALGARY AB
CANADA T2H 3A7

1 **Begin Bottom of Basket

6 @ 13.99

679131 KS ORG SYRUP 83.94

6 @ 13.99

679131 KS ORG SYRUP 83.94

1 *Bottom of Basket Item Count = 12

5 @ 7.79

682 PANCAKE MIX 38.95

SUBTOTAL

**** GST 5%

TOTAL

VF Interac

ACCT: CHEQUING

REFERENCE#: 66233297-0010013050 C

AUTH#: 01/17/18 13:25:09

Invoice#: 22140

COSTCO # 251

99 HERITAGE GATE SE

CALGARY AB T2H 3A7

PURCHASE - INTERAC

Interac

A0000002771010

0080008000 F800

00 APPROVED - THANK YOU 001

AMOUNT:

0251 008 0000000036 0180

*** CARDHOLDER COPY ***

CHANGE

TOTAL DISCOUNT(S) .00 6.00

TOTAL NUMBER OF ITEMS SOLD = 39

CASHIER: Terril

REG# 8

2018/01/17 13:25 0251 08 0180 36

GST/HST #121476329

THANK YOU!

GST# 121476329

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Culligan Water Treatment

Expense Category:

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☒ Group:

Purpose:

Water for office
\$ 0.50



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 #:

71574TH

Invoice Date:

01/25/2018

Shipped:

01/25/2018

PO No:

Customer No:

Due Date:

02/24/2018

Balance:

\$0.50 CAD

Billing Address:

LEGISLATIVE ASSEMBLY OFFICE
9820 107 ST
4TH FLOOR
EDMONTON AB T5K 1E7

Location Address:

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

Comments:

R-1682937



Service Date	Description	Comments	Reference	Qty.	Price	Amount
01/25/2018	Bottle Deposit	Dp: 1 Rt:2		-1	10.00	-10.00
01/25/2018	18L RO Delivered			1	8.00	8.00
01/25/2018	Delivery Fee			1	2.50	2.50

recommended by: *Erinn
Malkinson*

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

Page 1 of 1

Sub-Total: \$0.50 CAD

Tax: \$0.00 CAD

Total: **\$0.50 CAD**

Customer No:

Invoice No:

71574TH

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: " "

Expense Category: Hosting

For hosting, select one:

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

Purpose:

pepsi for consit meetings

\$ 4.69



**SHOPPERS
DRUG MART**

33RD AVENUE

2067-33rd AVENUE SW, CALGARY, AB, T2T 1Z5
 403-685-6807

Feb 28, 2018 11:35 AM

2387	1011	321779	164003	3
PEPSI	3.49	G	3.49	S
CAN DEP	1.20	N	1.20	
SUBTOTAL:			4.69	
5.0% GST:			0.17	
TOTAL:			\$4.86	
2 Items				
VISA			4.86	

You have saved \$1.00

 WITH YOUR PC OPTIMUM CARD
 YOU COULD HAVE EARNED THESE POINTS: 45

 83718-5156 RT0002



9990223871011003217790

Retain Receipt for return within 30 days.
 Visit shoppersdrugmart.ca for exclusions.

TYPE : PURCHASE

ACCT : VISA \$ 4.86

CARD NUMBER:

DATE/TIME: 18/02/28 11:35:18

REFERENCE #: 66341984 0017530570 H

AUTHOR. #:

VISA CREDIT

A0000000031010 0000000000

01/027 APPROVED - THANK YOU

-- IMPORTANT --

Retain This Copy For Your Records

*** CUSTOMER COPY ***

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Culligan

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: _____

Purpose:

Water for Constituents



INVOICE

better water. pure and simple.™

H.S.T. # 813808607 RT 0001

Remit Payment to:

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

Invoice #: 1038946
Invoice Date: 03/22/2018
Shipped: 03/22/2018
PO No:
Customer No: [REDACTED]
Due Date: 04/21/2018

Balance: [REDACTED]

Billing Address:

LEGISLATIVE ASSEMBLY OFFICE
9820 107 ST
4TH FLOOR
EDMONTON AB T5K 1E7

Location Address:

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

Comments:

R-1732109 D-21299



Service Date	Description	Comments	Reference	Qty.	Price	Amount
03/22/2018	18L RO Delivered			2	8.00	16.00

recommended by *Fraser MacKenzie*

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

Page 1 of 1

\$16.00

Sub-Total: [REDACTED] CAD
Tax: [REDACTED] CAD
Total: [REDACTED] CAD

Customer No: [REDACTED]
Invoice No: 1038946