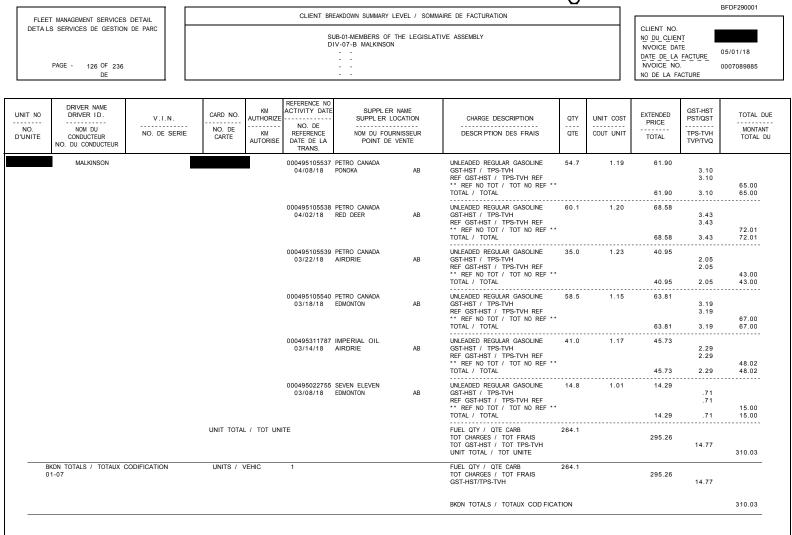
LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2018-19 007 - Calgary-Currie - Malkinson, Brian For Expenses Processed April 1 - June 30, 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation Fuel and Minor Maintenance - \$ MLA Parking Cap - \$ Other Travel - Parking - \$ Member Travel (overnight stay in constituency) - \$ Taxi, Bus Travel - \$ Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ Member Travel (Meal Per Diems) - \$	\$900.00	\$1,492.02 \$42.92 \$76.09 \$1,130.15	\$1,492.02 \$42.92 \$76.09 \$1,130.15
Accommodation Edmonton Accommodation Allowance (\$23,160.00/yr max) Travel Accommodations Allowance Travel Accommodations Allowance (days; 10 max) - NF	\$ 23,160.00 10.0	\$5,625.00	\$5,625.00
Other Hosting - \$		\$854.23	\$854.23
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km) Constituency Travel (Kilometres) - NF Special Trips (5 trips per year) - NF	35,000.0 5.0	732.0	732.0
Travel To and From the Capital Travel by Air, Bus or Train (Unlimited Trips) - NF Use of a Private Automobile (52 trips per year) - NF	52.0	6.0	6.0
Other Travel Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		
 Reported on CAD dollar amount of actual expense NE Reported based on number of trips, number of kilometres, or number of data 			

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

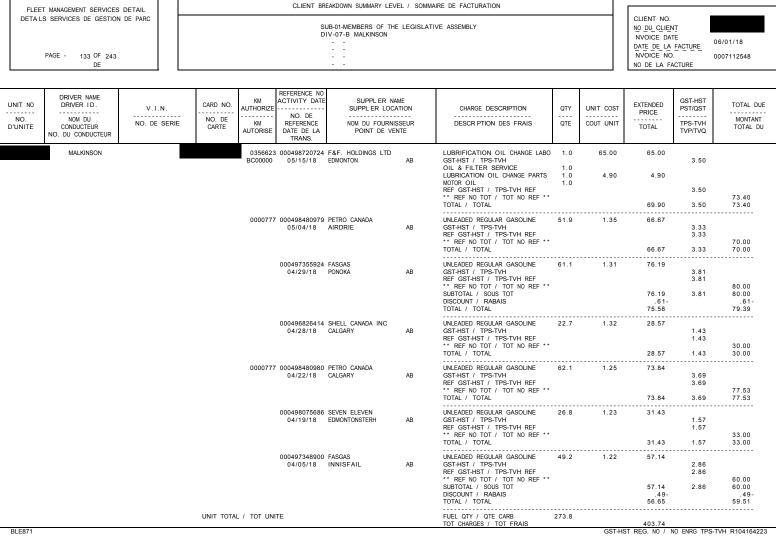
Element Fleet Management



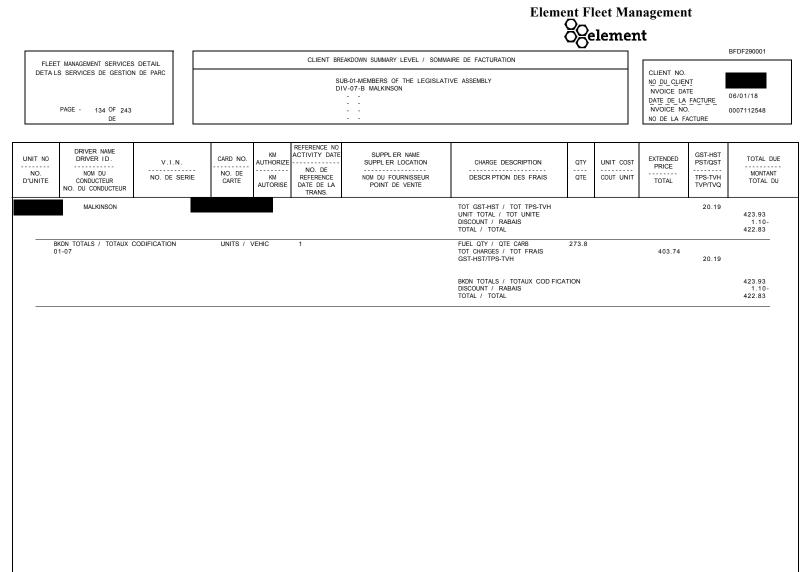
GST-HST REG. NO / NO ENRG TPS-TVH R104164223 QST ID. NO / NO ID TVQ 1001439118

Element Fleet Management Relement

BFDF290001

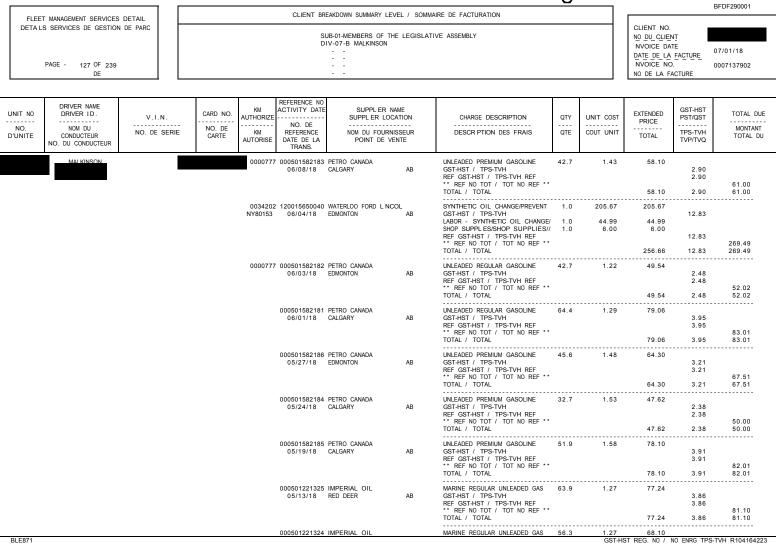


QST ID. NO / NO ID TVQ 1001439118



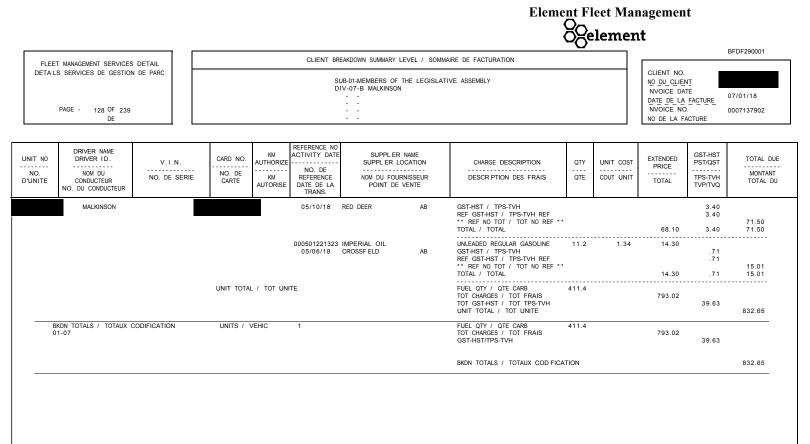
GST-HST REG. NO / NO ENRG TPS-TVH R104164223 QST ID. NO / NO ID TVQ 1001439118

Element Fleet Management



GST-HST REG. NO / NO ENRG TPS-TVH R104 QST ID. NO / NO ID TVQ 1001439118

Marine fuel is actually vehicle fuel



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

IVE ASSEMBLY OF ALBERTA

Aember Name: Brian Malkinson

Claimant Name:	Brian	Malkinson
----------------	-------	-----------

Expense Category: Member Parking

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

\$ 7.33 + GST

Purpose:

parking - MRU administration meeting

MOUNT ROYAL UNIVERSITY Date: 03/27/18 13:30:09 Payment Type: Visa

Ι	SO	Cod	e :	and the		1
R	kef:				100	
	7.7	0				
T	ax:	.3	7			
1	fota	11:	7.70			
F	205:	AP	5			

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

\$ GLF + GST

· · · ;

Purpose:

parking - SIAT grad Tves

1 (RECEIPT GTAT
	se Plate Number
06:0	100 Date/Time*# 0 AM 3, 2018
Purchase Date/Time: 12:5 Total Due: \$7.00 Total Paid: \$7.00 Ticket #: 60074401 S/N #: 520117220963 Setting: Lot 27 Mach Name: Lot 27 -8	⁵⁴ pm Jun 12, 2018 Rate: \$7 - 6 am Payment Type: Card
Visa	Auth #:
GST REG #8873	15638

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

\$6.67+9ST

Purpose:

parking - SIAT grad - Wrd

STAT J RECE	e Number
#*Expiration	
JUN 14	
Purchase Date/Time: 11:56	
Total Due: \$7.00 Total Paid: \$7.00	Rate: \$7 - 6 am Payment Type: Card
Ticket #: 04695410 S/N #: 520117220863 Setting: Lot 27	

Member Name: Brian Malkinso n

Claimant Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

Individual Con	stituent(S
----------------	-----------	---

Individual Stakeholder(s)

□ Group: _____ & 9.00 +GST

- -;

Purpose:

Parking - Elder Abuse Event

n Date/Time*#
) DM
/ 「!!!
, 2018
om Jun 15, 2018
te: \$9-Зhr Lunch Special Payment Type: Card
Auth #:

Member Name:	Brian	Malkinson	

Claimant Name:	Brian	Malki nson
-----------------------	-------	------------

Expense Category: Member Parking

For hosting, select one:

	Individual	Constituent(S)
--	------------	--------------	---	---

Individual Stakeholder(s)

Group:

8.25 + GST

Purpose:

meeting - McDougall

		CAL
1	Pay for Plate:	_GARY
	Zone: 1501	PARK
	arking Valid through:	ING AU
	MONDAY	JTHO
	Payforyour parking Zone: 1501 McDourgh Valid through: MONDAY 23 APR 18 11:37 AM 11:37 AM	CALGARY PARKING AUTHORITY (403) 537-7000
	5 START TIME: 4/23/2018 9:37 AM & AMOUNT PAID: \$8.66 (GST incl.)	13) 537-
	Trn No: 4267d6c0a3177e20 Terminal: 1124 Receipt No: 7702	.7000
	Pay for	CALGARY

Member Name: Brian Malkinson	1.3
Claimant Name: Brian Malkinson	
Expense Category: Member Parking	
For hosting, select one:	KING AUTHORITY (403) 537-7000 CALGARY PAR
Individual Constituent(s)	Terminal: 640 3 Hour Short Stay Zone 9236
Individual Stakeholder(s)	Plate:
□ Group: # 4.05 + GST	
	Valid through:
Purpose:	SATURDAY 05 MAY 18
parking - Calagry & area history fair	10:24 AM ye Region History
	AMOUNT PAID: \$4.25 (GST incl.) START TIME: 5/5/2018 8:59 AM RECEIPT NO: 124087 parking online: www.parkplus.ca Pay for your

- -,

Member Name: Brian Malkinson

Expense Category: Member Parking

For hosting, select one:

Individual Constituent(s)		Individual	Constituent(s)
---------------------------	--	------------	--------------	----

Individual Stakeholder(s)

Group:

\$ 0.95+GST

·· ·· ,

Purpose:

parking - bike swap

.ca		37-7000
Plat	e:	00
Zon	e: 3120	
		CAL
Valid Valid	through:	GAR
for yo	ATURDAY	Y PA
our pa	5 MAY 18	RKI
arking	2:44 PM	NG A
Pay for your parking online	Г ТІМЕ: 5/5/2018 10:44	CALGARY PARKING AUTHORITY (403) 537-7000
AMOU	INT PAID: \$1.00 (GST Inc	II.) ORIT
pa Term	o: 8ee5ca6e547d85a9 iinal: 1305	Y (4)
.parkplus.ca	ipt No: 8219	03) (
s.ca	Bitter	537-7
		7000

	he America tatement of		[®] Corpora	te Card	An Corpo	nericanexpress.ca nex Bank of Canada orate Service Centre D Box 7000 Station B
Prepared For		Membership	Number	Date	Willowdale	e (Ontario) M2K 2R6
BRIAN MA	LKINSON SEMBLY OF AB	(Wenteesh)		y 17, 2018		
		New Charges				Page 1 of 2
Previous B	Balance Payments and Credits	including Delinquency Assessment, if any	New Balance \$			
Statement include	s payments and charges received by M	May 17, 2018				
			00.			
Please see "A	bout Your Statement" sectio	n for important informatic	and the second se	you for your ong	oing members	ship.
Please see "A Please pay Credit Li	bout Your Statement" section y your balance in full imit Summary	n for important informatio upon receipt of st	and the second se	you for your ong Available Cre		ship.
Please see "A Please pay Credit Li On May	bout Your Statement" sectio y your balance in full	n for important information upon receipt of st Total Co	tatement. Thank			Ship. Amount \$
Please see "A Please pay Credit Li On May New Trans	bout Your Statement" sectio y your balance in full imit Summary 17, 2018	n for important informatio upon receipt of st Total Co MALKINSON	tatement. Thank			
Please see "A Please pay Credit Li On May	bout Your Statement" section y your balance in full imit Summary 17, 2018 sactions for BRIAN I CALGARY UNITED	n for important information upon receipt of since Total Control Contro	tatement. Thank			Amount \$

\$25.95 +GST

6960

1 Please detach here 1

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	o Number	
	Amount Due \$	Amount Paid \$

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



Member Name: Brian Malkinson

Claimant Name:	Brian N	Aalkinson
----------------	---------	-----------

Expense Category: Taxi, Bus Travel

For hosting, select one:

	Inc	dividua	l Constituent	(s
--	-----	---------	---------------	----

Individual Stakeholder(s)

Group:

\$ 50.14+9ST

--,

Purpose:

taxi

ose:		

CALGARYUNITEDCABS#1745 #8-5660 10TH ST NE-T2E8W7 CALGARY AB 27041293 QW2704129301

SALE

05-18-2018	15:34:38
	С
Exp Date **/** Name: MALKINSON/E A0000000031010 VISA CREDIT	Card Type VI BRIAN
Trace # 150007 Inv. # 87	
	RRN 001016007
Sale	\$44.25
Тір	\$8.00
TOTAL	\$52.25

00 APPROVED-THANK YOU

Retain this copy for your records Customer copy

> www.calgarycabs.ca 403-777-1111



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)

					Currie		
onth of: April	Year: 2018	E	mplo	yee	#:		
Reason for Travel	Meal Purchase Location(s)	В	Mea L	D	Subtotal	G.S.T.	Total
	12						
Travel to/from Capital	Edmonton		\boxtimes	\boxtimes	30.81	1.54	32.3
60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.5
60 km from Perm. Res.	Edmonton	\boxtimes		\boxtimes	39.57	1.98	41.5
Travel to/from Capital	Edmonton			\boxtimes	39.57	1.98	41.5
	-						
Travel to/from Capital	Edmonton			\boxtimes	19.76	0.99	20.7
60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.5
60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.5
60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.5
60 km from Perm. Res.	Edmonton		\boxtimes		19.81	0.99	20.8
60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.5
60 km from Perm. Res.	Edmonton		\boxtimes	\boxtimes	39.57	1.98	41.5
60 km from Perm. Res.	Edmonton		\boxtimes		39.57	1.98	41.5
Travel to/from Capital	Edmonton		\boxtimes		39.57	1.98	41.5
	÷						
Travel to/from Capital	Edmonton				19.76	0.99	20.75
60 km from Perm. Res.	Edmonton		\boxtimes		19.81	0.99	20.80
	TravelImage: Image: Imag	TravelMeal Purchase Location(s)Travel to/from CapitalEdmonton60 km from Perm. Res.Edmonton60 km from Perm. Res.Edmonton7 travel to/from CapitalEdmonton60 km from Perm. Res.Edmonton60 km from Perm. Res.Edmonton7 ravel to/from CapitalEdmonton60 km from Perm. Res.Edmonton60 km from Perm. Res.Edmonton7 ravel to/from CapitalEdmonton7 ravel to/from CapitalEdmonton7 ravel to/from CapitalEdmonton7 ravel to/from CapitalEdmonton	Reason for Travel Meal Purchase Location(s) B Image: Travel to/from Capital Edmonton Image: Travel to/from Capital Edmonton Image: Travel to/from Capital 60 km from Perm. Res. Edmonton Image: Travel to/from Capital Edmonton Image: Travel to/from Capital 7 Travel to/from Capital Edmonton Image: Travel to/from Capital Edmonton Image: Travel to/from Capital 60 km from Perm. Res. Edmonton Image: Travel to/from Capital Edmonton Image: Travel to/from Capital 60 km from Perm. Res. Edmonton Image: Travel to/from Perm. Res. Edmonton Image: Travel to/from Perm. Res. 60 km from Perm. Res. Edmonton Image: Travel to/from Capital Im	Reason for Travel Meal Purchase Location(s) Image: Meal Purchase Location(s)	Reason for Travel Meal Purchase Location(s) Image Location (s) I	Reason for Travel Meal Purchase Location(s) B L D Subtoral Image: Subtoral subtora subtoral subtoral subtoral subtoral subtora subtoral subtoral su	Reason for Travel Meal Purchase Location(s) $I = I$

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



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)

	Jame: Malkinson, Brian	Const	ituency:	Ca	lgary-	Currie				
For the Me	nth of: May Year: 2018				Employee #:					
Day	Reason for	Meal Purchase Location(s)		Mea	al	Culstatel	6.6.F			
of Month	Travel		В	L	D	Subtotal	G.S.T.	Total		
1	60 km from Perm. Res.	Edmonton	\boxtimes		\boxtimes	39.57	1.98	41.5		
2	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.5		
3	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.5		
4	Travel to/from Capital	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.8		
5										
6	Travel to/from Capital	Edmonton			\boxtimes	19.76	0.99	20.7		
7	60 km from Perm. Res.	Edmonton	\boxtimes			19.81	0.99	20.80		
8	60 km from Perm. Res.	Edmonton		\mathbf{X}	\square	39.57	1.98	41.55		
9	60 km from Perm. Res.	Edmonton			\mathbf{X}	39.57	1.98	41.55		
10	Travel to/from Capital	Edmonton				39.57	1.98	41.55		
11							1.50	41.5.		
12		1								
13	Travel to/from Capital	Edmonton			\boxtimes	30.81	1.54	32.35		
14	60 km from Perm. Res.	Edmonton				19.81	0.99	20.80		
15	60 km from Perm. Res.	Edmonton				39.57	1.98			
16	60 km from Perm. Res.	Edmonton				39.57		41.55		
17	Travel to/from Capital	Edmonton					1.98	41.55		
18		Lamonton				39.57	1.98	41.55		
19										
20								T. II.		
20										
22										
23										
			L							
24										
25							1906-9480			
26										
27	Travel to/from Capital	Edmonton		\boxtimes	\boxtimes	30.81	1.54	32.35		
28	60 km from Perm. Res.	Edmonton	\square	\boxtimes		19.81	0.99	20.80		
29	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	\boxtimes	39.57	1.98	41.55		
30	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80		
31	Travel to/from Capital	Edmonton	\boxtimes		\boxtimes	28.52	1.43	29.95		

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

Grand Total

Date

\$30.23

\$634.90

\$604.67



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: 4/23/2018	
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claimed Annually	
Temporary Residence Accommodation Allowance in <i>Maximum of \$23,160 per fiscal year.</i>	ו Edmonton - Claimed Annually	
Fiscal Year: 2018-2019		
Have you provided documents evidencing your Tem Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please at		
Monthly Amount (maximum \$1,930 or less)	\$ 1,875.00 x 12 = \$ 22,500.00	
Please Note: The Member is responsible for retaining	- Il seconds which support the approach are suptidentified above	
riease note. The member is responsible for retaining	g all records which support the annual amount identified above.	

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

April 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.

in the typen

Member Signature

Updated March 2018



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: 4/23/2018
Claim Type: Temporary Residence Accommodation A	llowance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in B Maximum of \$23,160 per fiscal year.	Edmonton - Claimed Annually
Fiscal Year: 2018-2019	
Have you provided documents evidencing your Temp Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attac	
Monthly Amount (maximum \$1,930 or less)	\$ 1,875.00 x 12 = \$ 22,500.00
Please Note: The Member is responsible for retaining a	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.

May 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.

the tig on inn

Member Signature

Updated March 2018



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: 4/23/2018
Claim Type: Temporary Residence Accommodation Allo	wance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in Ed <i>Maximum of \$23,160 per fiscal year.</i>	monton - Claimed Annually
Fiscal Year: 2018-2019	
Have you provided documents evidencing your Tempor Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach	
Monthly Amount (maximum \$1,930 or less)	\$ 1,875.00 x 12 = \$ 22,500.00
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.

June 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.

Maltingen inn

Member Signature

Updated March 2018

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Hosting

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: Constituents

\$ 153.38 + GST

Purpose:

Constituent lunch w/ Sarah Hoff. - 11 people total

DUPLICATE

SPIROS PIZZA & SPAGETTI HOUSE 1902 33RD ST S W CALGARY AB

DUPLICATE

CARD TYPE											٧	1	S	A	1
DATE					2	0	1	8	1	0	5	1	2	4	
TIME		3	5	7	7		1	3	:	2	2	:	3	6	
RECEIPT N	UN	1B	E	R											
C8414315	5 -	0	0	1	1	2	2	5	-	0	0	6	-	0	
		-	-	-	-	-	-	-	-	-	-	-	-	-	
PURCHASE															
AMOUNT								\$	1	3	5		4	5	
TIP									\$	2	4		3	8	
TOTAL															

\$159.83

VISA CREDIT A000000031010 1C55A56A6FE73441 0080008000-E800 B293C17D77BE9B23 0080008000-F800

APPROVED

01-027

THANK YOU

CARDHOLDER COPY

#:16

Spiros Pizza &

Spaghetti House Ltd.

1902-33 Street SW Calgary Canada Tel:685-4444 GST#

Guest Check

Table :16 Check #00003

Cover:1 Date : 24/5/18 Time :13:11:46 Open By: Annah

	Total(\$):		135.45
	Tax(\$):		6.45
	<pre>Item Total(\$):</pre>		129.00
	+ Pineapple	+2.50	
1	L- B		31.50
2	Soft Drinks		4.50
1	Caesar Salad(Sml)		13.00
1	Village Salad(Lgr)		20.00
	HALF #2		29.00
1	L #23		
1	L-Anjelika's Greek		31.00

135.45

No. of Print : 1

--- Print Time : 13:11:46 Thank You

Member Name: Brian Malkinson

Claimant Name: Signe Spence

Expense Category: Hosting

For hosting, select one:

	Individual	Constituent(s	;)
--	------------	---------------	----

Individual Stakeholder(s)

Group: Stampede Breakfast attendees 4639.60

Purpose:

Turkey sausages for constituents who attend the MLA Stampede Breakfast on July 8, 2018

NW CALGARY, ALBERTA #543 11588 SARCEE TRAIL NW CALGARY, AB /_T3R 0A1 MEMBE 40 @ 15.99 403322 TURK SAUSAGE 639.60 ACCI: CHEQUING 6231114 0010016980 05/16/18 10:50:45 0761 Invoice#: COSTCO WHOLESALE #543 11588 SARCEE TRAIL NW CALGARY, AB TAR OA1 PURCHASE - INTERAC Interac A0000002771010 0080008000 F800 61 TRANSACTION NOT APPROVED 095 AMOUNT: \$639.60 0543 017 0000000268 0005 *** CARDHOLDER COPY *** 639.60 200.00 TOTAL Cash VF Interac 439.60 ACCI: CHEQUING REFERENCE#: 66 31114-0010016990 662 05/16/18 10:51:47 07624 Involce#: COSTCO WHOLESALE #543 11588 SARCEE TRAIL NW CALGARY, AB T3R 0A1 PURCHHaL Interac A0000002771010 0080008000 F800 00 APPROVED - THANK YOU 001 AMOUNT: \$439.60 PURCHASE - INTERAC *** CARDHOLDER COPY *** CHANGE .00 TOTAL NUMBER OF ITEMS SOLD = 40 CASHIER: KEVIN B REG# 201:700776 10:51 0543 17 0005 268 REG# 17 GST/HST #121476329 GST #121476329

THANK YOU - COME AGAIN

Member Name: Brian Malkinson

Claimant Name: Signe Spence

Expense Category: Hosting

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

\$ 40.25 + GST

Purpose:

Snacks for community stakeholders meeting on May 24, 2018 in the constituency

SAFEWAY ()

Safeway Glamorgan 3737-37 Street SW Calgary AB Phone: 403.698.8222 GST# 895588788RT0001

Served by: Sebastian F

Welcome to Safeway

GROCER Spr Water 5 +EHC +Deposit Cranberry C 1 @ 2	00ML 24Pk ocktail / \$7.00	\$4.49 \$0.48 \$2.40 \$3.50	R
YOU SAVED +EHC +Deposit Ckis Chc Var PRODUCI	\$1.79	\$0.12 \$0.60 \$7.29	RRC
Celebration BAKERY	Veg	\$9.99	GC
Chocolate Ch Gingersnap C BONUS EARNE	kies 12s	\$5.69 \$5.69 8 Miles	C C
AIR MILES B	ase Offer	2 Miles	
TOTAL Visa Cash	SUBTOTAL 5% GST TENDER CHANGE	\$40.25 \$0.50 \$40.75 \$40.75 \$0.00	-
iscounts & Sp our Total Sav ********	ings ***********	\$1.79 \$1.79	
Member numb Total Miles	AIR MILES er: Earned		
Your Cash Miles Dream Miles	ATR MILES Ba	ances	
	RES	T 4407000 P 001	
PL. VISA CRED D A00000003	REF# 001	15:43:14 274116	
APPRO	OVED - THANK	Y0U	
AGREE TO PAY I CORDING TO THE ERCHANT AGREEM	LARI ISSIED	ACDEEMENT	

Member Name: Brian Malkinson	<u>1</u>
Claimant Name: Culligan	2
Expense Category: Hosting	

\$10.50

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

🔀 Group: _____

Purpose:

Culigan oetter 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@culliganwate	Invoice #: Invoice Date: Shipped: PO No: Customer No: Due Date:	1068449 04/20/2018 04/20/2018 05/20/2018
Billing Address: LEGISLATIVE ASSEMBLY OFFICE 9820 107 ST 4TH FLOOR EDMONTON AB T5K 1E7	CALGA 2108 B	Balance: n Address: RY CURRIE LEGISLATIV 33 AVE SW AB T2T 1Z6	\$10.50 CAD
Comments: R-1756308 D-45274	Ter Ter Land Barrison of		

Service Date	Description	Comments	Reference	Qty.	Price	Amount
04/20/2018	18L RO Delivered			1	8.00	8.00
04/20/2018	Bottle Deposit	Dp: 1 Rt:1		0	0.00	0.00
04/20/2018	Delivery Fee			1	2.50	2.50

Prian Kindon



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

Page 1 of 1

Sub-Total:		\$10.50	CAD
Tax:		\$0.00	CAD
Total:	5	\$10.50	CAD

Customer No: Invoice No:

1068449

Member Name: Brian Malkinson

Claimant Name: Culligan

Expense Category: Hosting

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

Purpose:

Water for Contituents

Cullígan.

INVOICE

Remit Payment to:

better water. pure and simple." Culligan Water

H.S.T. # 813808607 RT 0001

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

Invoice #: Invoice Date: Shipped: PO No: Customer No: Due Date:

1096248 05/22/2018

05/22/2018

06/21/2018

\$10.50 CAD

Billing Address: LEGISLATIVE ASSEMBLY OFFICE 9820 107 ST 4TH FLOOR EDMONTON AB T5K 1E7 Balance: Location Address:

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

Comments:

R-1781725 D-70243

Service Date	Description	Comments		Reference	Qty.	Price	Amount
05/22/2018	18L RO Delivered		· ·		1	8.00	8.00
05/22/2018	Bottle Deposit	Dp: 1 Rt:1			0	0.00	0.00
05/22/2018	Delivery Fee				1	2.50	2.50

ing Maltinson

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

Page 1 of 1

Sub-Total:	\$10.50 CAD
Tax:	\$0.00 CAD
Total:	\$10.50 CAD

Customer No: Invoice No:

1096248