

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

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$607.42	\$2,099.44
MLA Parking Cap - \$	\$900.00	\$45.29	\$88.21
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$13.24	\$89.33
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$206.62	\$1,336.77
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,625.00	\$11,250.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
<b>Other</b>			
Hosting - \$		\$272.03	\$1,126.26
Event Tickets Disclosable - \$			
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (43.5 cents per km)</b>			
Constituency Travel MLA (KM) - NF	35,000.0	986.0	1,718.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.00	986.00	1,718.00
Special Trips (5 trips per year) - NF	5.0		
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52.0	3.0	9.0
<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



BFD290001

FLEET MANAGEMENT SERVICES DETAIL  
DETAI LS SERVICES DE GESTION DE PARC

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DE

## 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 08/01/18  
DATE DE LA FACTURE  
NVOICE NO. 0007161443  
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				000504242767 07/06/18	HUSKY OIL CALGARY AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	36.4	1.62	56.09	2.76 2.76	58.85 58.85 -36- 58.49
				0000777	000504097780 06/28/18	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	49.1	1.53	71.44	3.57 3.57	75.01 75.01
					000504097784 06/26/18	PETRO CANADA EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	42.2	1.50	60.29	3.01 3.01	63.30 63.30
					000504097781 06/20/18	PETRO CANADA AIRDRIE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.0	1.52	80.97	4.05 4.05	85.02 85.02
					000504097783 06/18/18	PETRO CANADA EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	32.7	1.53	47.62	2.38 2.38	50.00 50.00
					000504097782 06/17/18	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	59.0	1.55	87.10	4.35 4.35	91.45 91.45
					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	275.4		403.51	20.12	423.63 -36- 423.27
	BKDN TOTALS / TOTAUX CODIFICATION 01-07			UNITS / VEHIC	1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	275.4		403.51	20.12	
							BKDN TOTALS / TOTAUX COD FICATION					423.63

BLE871

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

FLEET MANAGEMENT SERVICES DETAIL  
DETA 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 - - - - - - - -

CLIENT NO.  
NO DU CLIENT  
NVOICE DATE 08/01/18  
DATE DE LA FACTURE  
NVOICE NO. 0007161443  
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
BKDN TOTALS / TOTAUX CODIFICATION							DISCOUNT / RABAIS TOTAL / TOTAL					.36- 423.27

# Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL  
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 122 OF 230  
DE

## 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 09/01/18  
DATE DE LA FACTURE  
INVOICE NO. 0007184348  
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			0000777	000507126264 08/13/18	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	47.0	1.49	66.67 3.33 70.00	3.33 3.33	70.00
					000507126263 07/28/18	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	49.4	1.58	74.29 3.71 78.00	3.71 3.71	78.00
					000507126262 07/16/18	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	43.2	1.53	62.95 3.15 66.10	3.15 3.15	66.10
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	139.6		203.91 10.19 214.10	10.19	214.10
					BKDN TOTALS / TOTALX CODIFICATION 01-07	UNITS / VEHIC 1	FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	139.6		203.91 10.19	10.19	
							BKDN TOTALS / TOTALX CODIFICATION					214.10

BLE871

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

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: \$2.86 + GST

Purpose:

Parking - Stampede

Plate: [REDACTED]  
Zone: **4802**

Valid through:

**THURSDAY**  
**05 JUL 18**  
**10:52 AM**

START TIME: 7/5/2018 9:32 AM  
AMOUNT: \$3.00 (GST Incl.)

Term No: 605b1f5a00a82d11  
Terminal: 1485  
Receipt No: 1352

W: parkplus.ca

*4th floor*

CALGARY PARKING AUTHORITY (403) 537-7000

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: \$ 11.00 + GST

Purpose:

Parking - Stampede Parade

Stampede Parade MLA

DISPLAY TICKET ON DASH

#\*Expiration Date/Time\*#

06:00 PM

JUL 06, 2018

Purchase Date/Time: 08:45am Jul 06, 2018

Total Parking: \$11.00

Total FEDERAL: \$0.55

Total Due: \$11.55

Total Paid: \$11.55

Rate: \$11 Expires @ 6PM

Pmt Type: CC (Swipe)

Ticket #: 90073901

N #: 300011480235

Setting: Lot 161

Each Name: Lot 161-1

Visa

Auth #:

GST REG #883115638

RECEIPT

\*Expiration Date/Time\*#: 06:00pm Jul 06, 2018

Purchase Date/Time: 08:45am Jul 06, 2018

Total Parking: \$11.00

Total FEDERAL: \$0.55

Total Due: \$11.55

Total Paid: \$11.55

Rate: \$11 Expires @ 6PM

Pmt Type: CC (Swipe)

Ticket #: 90073901

Setting: Lot 161

Each Name: Lot 161-1

Visa

Auth #:

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: \$24.76 + GST

Purpose:

Parking - Stampede

RY PARKING AUTHORITY (403) 537-7000

CALG.

Terminal: 857

Zone: Lot 28 : 9028

Valid through:

**TUESDAY 10 JUL 18**  
**5:00 AM**

AMOUNT PAID: \$26.00 (GST incl.)

START TIME: 7/9/2018 6:27 AM

for your parking online: [www.parkplus.ca](http://www.parkplus.ca)

Auth No:

RECEIPT NO: 953

P.

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:

ACAD Tour

\$ 6.67 + GST

ACAD meeting  
RECEIPT

Expiration Date/Time\*#  
06:00 AM  
AUG 31, 2018

Purchase Date/Time: 12:59pm Aug 30, 2018  
Total Due: \$7.00  
Total Paid: \$7.00  
Ticket #: 06994310  
S/N #: 520117220863  
Setting: Lot 27  
Mach Name: Lot 27 -8

Rate: \$7 - Summer Special  
Pmt Type: CC (Tap)

Visa

Auth #:

GST REG #887315638





# 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  
**July 16, 2018**

Page 1 of 2

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
0.00	0.00	13.90	13.90

Statement includes payments and charges received by July 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.

## Credit Limit Summary On July 16, 2018

Total Credit Limit \$

Available Credit Limit \$

## New Transactions for BRIAN MALKINSON

Amount \$

July 7	CALGARYUNITEDCABS#01 CALGARY Goods or Services	13.90
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<b>Total New Transactions for BRIAN MALKINSON</b>	<b>13.90</b>
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\$13.24 + 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 \$

13.90

Amount Paid \$

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





# 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:** June

**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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
4	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
5	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
6	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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 type="checkbox"/>	19.81	0.99	20.80
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
18	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
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						\$206.62	\$10.33	\$216.95

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.

*Brian Malkinson*  
Member Signature

*July 16, 2018*  
Date



## 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 Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

**Fiscal Year:** 2018-2019

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)**

\$ 1,875.00

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.

July 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



# 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 Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

**Fiscal Year:** 2018-2019

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☒ Yes

☐ No

**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.

August 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 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 Allowance in Edmonton - Claimed Annually

## Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

**Fiscal Year:** 2018-2019

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)**

\$ 1,875.00

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.

September 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 March 2018

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, July 8, 2018

Purpose:

\$ 11.97

Ketchup for Stampede breakfast

**CO-OP**

CALGARY CO-OP  
RICHMOND ROAD #6  
GST : 100730894  
PHONE : (403) 299-4490

FRENCHS KETCHUP \$3.99  
FRENCHS KETCHUP \$3.99  
FRENCHS KETCHUP \$3.99

3 BALANCE DUE \$11.97

TYPE: Purchase

ACCT: VISA \$ 11.97

CARD NUMBER: [REDACTED]  
DATE/TIME: 06/30/2018 09:51:19  
REFERENCE #: 0010013690 H  
TERM: 66216699

AID: A0000000031010

VISA CREDIT  
01 APPROVED - THANK YOU 027

IMPORTANT:  
retain this copy for your records

CUSTOMER COPY

\*\*\*\*\*

VISA \$11.97  
Auth Code = [REDACTED]  
CHANGE \$0.00  
TOTAL TAX \$0.00

Member Number [REDACTED]

CASHIER NAME: ELIZA  
C0124 #4924 9:51:00 30JUN2018  
S00006 R001

\*\*\*\*\*

Your Opinion Matters!  
Share your feedback at  
[www.calgarycoop.com/feedback](http://www.calgarycoop.com/feedback)

\*\*\*\*\*

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: \$100.00

Purpose:

Coffee purchased from Tim Horton's for the July 8, 2018 MLA  
Stampede Breakfast.

*Tim Hortons*

Always Fresh.  
3955 17th Ave SW, Calgary, AB  
Always There. Since 1964

Take Out  
128

1 Tin Card Load \$100.00

Subtotal: \$100.00

GST: \$0.00 PST: \$0.00

~~Amount~~ \$100.00

Visa: \$100.00

Change Due: \$0.00

Take Out # 128 Cashier 300

Thanks for stopping by!

Tell us how we did at

www.telltinhortons.com 1-888-601-1616

Wed Jul 4, 2018 11:20:27

Receipt #: 17734241

GST #

VISA  
Card Entry:CHIP Sequence:000138  
Trans Type:Purchase \$100.00  
Term #: 201  
Ref #: 00000138  
Application Label: VISA CREDIT  
AID #: A0000000031010  
TUR #: 8080008000  
TSI #: 7800  
Auth #: [REDACTED] APPROVED

Tin Card  
Card Entry:SWIPE  
Previous Balance:CAD \$0.00  
Trans Type:Add Value \$100.00  
Term #: 0201  
Remaining Balance:CAD \$100.00  
Auth #: [REDACTED] APPROVED - THANK YOU

By entering a verified PIN, cardholder agrees  
to pay issuer such total in accordance with issuers  
agreement with CardHolder.

Guest Copy

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: Stampede Breakfast July 8, 2018

Purpose:

\$ 5.85

For Stampede breakfast, 2018.

# HOW DID WE DO TODAY?

Complete our short customer survey  
at [SURVEY.WALMART.CA](http://SURVEY.WALMART.CA) for a

monthly chance to

# WIN \$1000

Rules and regulations apply. See contest rules for details.

**Walmart**  
Supercentre

WE SELL FOR LESS

STORE # 3009

403-242-2205

1212 37TH STREET SW

CALGARY, ALBERTA T3C 1S3

ST# 03009 DP# 006650 TE# 04 TR# 06077

GV 24X500ML 060538887928 \$2.97 D

AB BEV CRF 000030635235 \$0.48 H

AB DEPOSIT 068113171083 \$2.40 H

SUBTOTAL \$5.85

VOIDED BANKCARD TRANSACTION

TERMINAL # WMTGJ018922

TRANSACTION NOT COMPLETE

07/08/18 08:36:37

TOTAL \$5.85

DEBIT TEND \$5.85

CHANGE DUE \$0.00

GST/HST 137466199 RT 0001

QST 1016651356 TQ 0001

TRANSACTION RECORD PURCHASE

5.85

CHEQUING

BRN # 00100155\*

TERMINAL ID WMTGJ018922

00 APPROVED-THANK YOU

Interac

AID A0000002771010

TC 8EF77D7CBCF5129D

\*PIN VERIFIED

07/08/18 08:36:54

# # ITEMS SOLD 3

TC# 9861 4976 4568 7367 1036



New Thursday flyer start date

Circulaire maintenant en vigueur Jeudi

07/08/18 08:37:00



**GRAND&TOY** ®MOAn **Office DEPOT**®, Inc. Company  
une société d'**Office DEPOT**®, Inc

## COST CENTRE BILLING REPORT

## REQUISITION REPORT

SOLD TO ACCOUNT NO. [REDACTED]

AB LEGISLATIVE ASSEMBLY (ML  
FINANCIAL MGMT & ADMIN SERV  
9820 107 ST NW  
4TH FLR  
EDMONTON, AB T5K 1E7

G.S.T.

R894032192

Q.S.T.

1001640701TQ0009

PERIOD ENDING

06/30/2018

ACCT MGR NO.

INVOICE NO.  
COST CENTRE

M487813

SHIP TO ACCOUNT NO. [REDACTED]

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

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
REQ NO.	G332166	DATE	06/08/2018	ATTENTION	Calgary Currie	P.O.#	MLA204926	G&T ORDER NO	883529-00	
1	1	0	BX	SBK11018193	COFFEE BRKFAST BLND18 BAGS/BX Approved By: Diana de Ocampo * For balance of order see ref 883528	138.21	NET	138.21	138.21	

Hosting \$138.21

REQ TOTAL	138.21
HST TOTAL	0.00
PST TOTAL	0.00
SUB-TOTAL	138.21
GST TOTAL	0.00
TOTAL THIS ORDER	138.21

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: \_\_\_\_\_

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose: \$8.00

Water for the constituency office



**better water. pure and simple.™**

H.S.T. # 813808607 RT 0001

## INVOICE

**Remit Payment to:**

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

**Invoice #:** 22912TH  
**Invoice Date:** 07/17/2018  
**Shipped:** 07/17/2018  
**PO No:**  
**Customer No:** [REDACTED]  
**Due Date:** 08/16/2018

**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-1836245

Service Date	Description	Comments	Reference	Qty.	Price	Amount
07/17/2018	18L RO Delivered			1	8.00	8.00
07/17/2018	Bottle Deposit	Dp: 1 Rt:1		0	0.00	0.00

recommended by Brian Malkinson

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

Page 1 of 1

**Sub-Total:** [REDACTED]

**Tax:** [REDACTED]

**Total:** [REDACTED]

**Customer No:** [REDACTED]

**Invoice No:** 22912TH

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Brian Malkinson

Claimant Name: Brian Malkinson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Culligan water for constituents in the constituency office

You could give your people

Culligan Water

H.S.T. # 813808607 RT 0001

## INVOICE

**Remit Payment to:**

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

**Invoice #:** 1124232  
**Invoice Date:** 06/18/2018  
**Shipped:** 06/18/2018  
**PO No:**  
**Customer No:** [REDACTED]  
**Due Date:** 07/18/2018

**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-1809742 D-97302

Service Date	Description	Comments	Reference	Qty.	Price	Amount
06/18/2018	18L RO Delivered			1	8.00	8.00
06/18/2018	Bottle Deposit	Dp: 1 Rt:1		0	0.00	0.00

recommended by Erin McKinnon

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

Page 1 of 1

**Sub-Total:** [REDACTED]

**Tax:** [REDACTED]

**Total:** [REDACTED]

**Customer No:** [REDACTED]

**Invoice No:** 1124232