

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2018-19
026 - Calgary-Varsity - McLean, Stephanie
For Expenses Processed April 1 - June 30, 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$975.05	\$975.05
MLA Parking Cap - \$	\$900.00	\$46.29	\$46.29
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$			
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$5,790.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$46.65	\$46.65

Non-Financial Reporting

Use of Private Automobile (43.5 cents per km)	
Constituency Travel (Kilometres) - NF	35,000.0
Special Trips (5 trips per year) - NF	5.0
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
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
DETAILS 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-26-S MCLEAN
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
INVOICE DATE 05/01/18
DATE DE LA FACTURE
INVOICE NO. 0007089885
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	MCLEAN				000495103594 04/08/18	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	56.8	1.21	65.36 3.27 3.27 68.63 68.63		
					000495103595 04/04/18	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	51.2	1.22	59.49 2.97 2.97 62.46 62.46		
					000495309949 03/28/18	IMPERIAL OIL CROSSFIELD AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	41.5	1.23	48.45 2.42 2.42 50.87 50.87		
					000493775086 03/27/18	SHELL CANADA INC EDMONTON AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	40.8	1.17	45.44 2.27 2.27 47.71 47.71		
					000494921735 03/23/18	CENTEX MEMORIAL CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.3	1.17	67.17 3.36 3.36 70.53 70.53		
					000495309948 03/14/18	IMPERIAL OIL CROSSFIELD AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	45.3	1.17	50.48 2.52 2.52 53.00 53.00		
					000495309947 03/08/18	IMPERIAL OIL CROSSFIELD AB	MIDGRADE UNLEADED GASOLINE 1 GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	25.8	1.20	29.38 1.47 1.47 30.85 30.85		
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	318.7		365.77 18.28 384.05		
	BKDN TOTALS / TOTAUX CODIFICATION 01-26				UNITS / VEHIC 1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	318.7		365.77 18.28		

BLE871

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

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-26-S MCLEAN - - - - - - - -

CLIENT NO.
NO DU CLIENT
INVOICE DATE 05/01/18
DATE DE LA FACTURE
INVOICE NO. 0007089885
NO DE LA FACTURE

UNIT NO ----- NO. D'UNITE	DRIVER NAME DRIVER ID. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. ----- NO. DE SERIE	CARD NO. ----- NO. DE CARTE	KM AUTHORIZE ----- KM AUTORISE	REFERENCE NO ACTIVITY DATE ----- NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION ----- NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION ----- DESCRIPTION DES FRAIS	QTY ----- QTE	UNIT COST ----- COUT UNIT	EXTENDED PRICE ----- TOTAL	GST-HST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE ----- MONTANT TOTAL DU
BKDN TOTALS / TOTAUX CODIFICATION												
BKDN TOTALS / TOTAUX CODIFICATION											384.05	

Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-26-S MCLEAN
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- -
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- -

CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
INVOICE DATE 06/01/18
DATE DE LA FACTURE
INVOICE NO. 0007112548
NO DE LA FACTURE

UNIT NO ----- NO. D'UNITE	DRIVER NAME DRIVER I.D. ----- NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. ----- NO. DE SERIE	CARD NO. ----- NO. DE CARTE	KM AUTHORIZE ----- KM AUTORISE	REFERENCE NO ACTIVITY DATE ----- NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION ----- NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION ----- DESCRIPTION DES FRAIS	QTY ----- QTE	UNIT COST ----- COUT UNIT	EXTENDED PRICE ----- TOTAL	GST-HST PST/QST ----- TPS-TVH TVP/TVQ	TOTAL DUE ----- MONTANT TOTAL DU	
	MCLEAN				000497344273 05/03/18	SHELL CANADA INC EDMONTON	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	37.0	1.33	46.86 2.34 2.34 46.86	2.34 2.34 2.34	49.20 49.20
				0118000	000498479007 05/03/18	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	28.7	1.36	37.09 1.85 1.85 37.09	1.85 1.85 1.85	38.94 38.94
				0112000	000498479009 04/28/18	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	55.5	1.30	68.65 3.43 3.43 68.65	3.43 3.43 3.43	72.08 72.08
					000496481414 04/25/18	SHELL CANADA INC EDMONTON	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	41.5	1.31	51.77 2.59 2.59 51.77	2.59 2.59 2.59	54.36 54.36
				0012345	000498479008 04/22/18	PETRO CANADA JASPER	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.4	1.29	64.31 3.22 3.22 64.31	3.22 3.22 3.22	67.53 67.53
				0120000	000498479010 04/18/18	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	58.9	1.25	70.08 3.50 3.50 70.08	3.50 3.50 3.50	73.58 73.58
				UNIT TOTAL / TOT UNITE				FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	274.0		338.76 16.93	16.93	355.69
BKDN TOTALS / TOTAUX CODIFICATION 01-26				UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	274.0		338.76 16.93	16.93	
BKDN TOTALS / TOTAUX CODIFICATION												355.69	

BLE871

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

Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-26-S MCLEAN
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CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
INVOICE DATE 07/01/18
DATE DE LA FACTURE
INVOICE NO. 0007137902
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
[REDACTED]	MCLEAN	[REDACTED]	[REDACTED]	0123456	000501488477 06/17/18	SHELL CANADA INC GIBBONS AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.6	1.33	74.15	3.71 3.71	77.86 77.86
				000501580129	06/03/18	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	52.5	1.21	60.42	3.02 3.02	63.44 63.44
				000501219525	05/25/18	IMPERIAL OIL CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	53.4	1.28	64.90	3.24 3.24	68.14 68.14
				000501219524	05/22/18	IMPERIAL OIL EDMONTON AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.6	1.30	71.05	3.55 3.55	74.60 74.60
				UNIT TOTAL / TOT UNITE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	222.1		270.52	13.52	284.04
BKDN TOTALS / TOTAUX CODIFICATION 01-26			UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	222.1		270.52	13.52	
BKDN TOTALS / TOTAUX CODIFICATION												284.04

BLE871

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



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

STEPHANIE MCLEAN
LEGIS ASSEMBLY OF AB

Mer

XXXX-XXXX

Date

April 17, 2018



Page 1 of 2

Statement includes payments and charges received by April 17, 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.

0952

Listing of Charges and Credits

Amount \$

New Transactions for STEPHANIE MCLEAN

Amount \$

March 23	IMPARK00030313U CALGARY Goods or Services	37.00
March 27	CalgParkAuth 2589948 CALGARY GOVERNMENT SERVICES	0.60
Total New Transactions for STEPHANIE MCLEAN		37.60

\$35.81

† 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



STEPHANIE MCLEAN
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

000140

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
STEPHANIE MCLEAN
LEGIS ASSEMBLY OF AB

XXXX-XXXX

May 17, 2018

Page 1 of 2

Statement includes payments and charges received by May 17, 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.

Listing of Charges and Credits

Amount \$

New Transactions for STEPHANIE MCLEAN

Amount \$

April 27	CalgParkAuth 2616862 CALGARY GOVERNMENT SERVICES	9.00
April 28	CalgParkAuth 2617987 CALGARY GOVERNMENT SERVICES	2.00
Total New Transactions for STEPHANIE MCLEAN		11.00

\$10.48

† 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
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- Automatic banking machines

Do Not Enclose Cash



STEPHANIE MCLEAN
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

000139

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





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: McLean, Stephanie

Constituency: Calgary-Varsity

Employee #:

Date: 4/25/2018

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)

\$ 1,930.00

x 12 = \$ 23,160.00

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.

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.

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: McLean, Stephanie

Constituency: Calgary-Varsity

Employee #:

Date: 4/25/2018

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)

\$ 1,930.00

x 12 = \$ 23,160.00

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.

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.

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: McLean, Stephanie

Constituency: Calgary-Varsity

Employee #:

Date: 4/25/2018

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)

\$ 1,930.00

x 12 = \$ 23,160.00

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.

Member Signature

Updated March 2018

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Stephanie McLean

Claimant Name: Julia Hayter

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Cookies for seniors

SOBEYS TUSCANY
2020, 11300 Tuscany Blvd NW
403.375.0507
GST #818061582 RT0001

Served by: Mart P

Welcome to Sobeys

BAKERY

Tray Hlday Btr Ckie \$8.99 GC
YOU SAVED \$1.00
Tray Hlday Btr Ckie \$8.99 GC
YOU SAVED \$1.00

1 Reward for Every \$20 1 Miles

SUBTOTAL \$17.98
5% GST \$0.90
TOTAL \$18.88
Debit TENDER \$18.88
Cash CHANGE \$0.00

NUMBER OF ITEMS 2

***** YOUR SAVINGS *****
Discounts & Specials \$2.00
Your Total Savings \$2.00
Percentage Savings 10%

MERCHANT ID 040080040309 INSERTED
CLIENT ID 9803 RECEIPT# 7512000
TERMINAL ID 002 TRACE# 00397657

** PURCHASE ** \$ 18.88
DEBIT # *****
ACCOUNT Savings RESP 000
DATE 12/05/2017 TIME 08:36:58
REF # 00000022
APPL. Interac
AID A0000002771010
TVR 0080008000 TSI F800

APPROVED

BY ENTERING A VERIFIED PIN, CARDHOLDER
AGREES TO PAY ISSUER SUCH TOTAL IN
ACCORDANCE WITH ISSUER'S AGREEMENT WITH
CARDHOLDER

Term Tran Store Oper 12/06/17
2 7512 5085 141 08:37:02

Thank you for shopping Sobeys Tuscany
Proudly owned and operated by
Dayna and Kristine McNaughton
email customer.help@sobey.com

Sobeys West Customer Care
1-800-723-3929

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Stephanie McLean

Claimant Name: Julia Hayter

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee with constituent

EARTH CAFE #14
FOOT TERRACE NW
CALGARY AB



CARD *****
CARD TYPE VISA
DATE 2018/01/30
TIME 7650 13:06:57
RECEIPT NUMBER
H84018846-001-026-040-0

PURCHASE
TOTAL

\$5.25

VISA CREDIT
A0000000031010 \$5.00 + gst
703BA78F8AC8C13D
0000000000-

APPROVED

AUTH# 01-027
THANK YOU

NO SIGNATURE REQUIRED

CARDHOLDER COPY

IN THIS

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Stephanie McLean

Claimant Name: Julia Hayter

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee with constituent

Starbucks Coffee Canada #4381
301 - 3630 Brentwood Rd. NW
Calgary, AB T2L 1K8

CHK 724623

03/23/2018 01:39 PM

2441779 Drawer: 1 Reg: 1

Gr Black Tea Latte	4.65
Gr Pike Place	2.65
Sbux Card	7.67
XXXXXXXXXX [REDACTED]	

Subtotal	\$7.30
GST 5%	\$0.37
Total	\$7.67

Change Due \$0.00

----- Check Closed -----

03/23/2018 01:39 PM

[REDACTED]
Card is registered.

GST: 86585 3535

Join our loyalty program
Starbucks Rewards®
Sign up for promotional emails
Visit Starbucks.ca/rewards
Or download our app
At participating stores
Some restrictions apply

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Stephanie McLean

Claimant Name: William Gillies

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Snacks for meeting with seniors

SAFEWAY 

Safeway Montgomery
5048 16 Avenue NW Calgary AB
Phone: 403.288.3219
GST# 817093735

Served by: SC0 20

BAKERY

Bttr Toff Crnch 12Pk	\$5.69	C
Monster	\$5.69	C
Cupcakes Mini Gold F	\$4.99	C

SUBTOTAL	\$16.37
TOTAL TAX	\$0.00
TOTAL	\$16.37
Master Card	TENDER \$16.37
Cash	CHANGE \$0.00

NUMBER OF ITEMS 3

MERCHANT 22265892 RF
TERMINAL ID SB2226589220
** Purchase ** \$ 16.37
CARD MasterCard RCPT 476000
NO. ***** RESP 001
DATE 04/25/2018 TIME 08:51:32
REF# 001251003
APPL. MasterCard
AID A0000000041010

00 APPROVED - THANK YOU

I AGREE TO PAY THE ABOVE TOTAL AMOUNT
ACCORDING TO THE CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

Term	Tran	Store	Oper	04/25/18
20	476	8916	120	08:51:29

Thank you for shopping at Our Store
Come Again Soon