LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2018-19

026 - Calgary-Varsity - McLean, Stephanie For Expenses Processed July 1 - Sep 30 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
			<u>,</u>
Transportation Fuel and Minor Maintenance - \$ MIA Parking Con. *	\$900.00	\$621.90 \$20.68	\$1,596.95 \$66.97
MLA Parking Cap - \$ Other Travel - Parking - \$ Member Travel (overnight stay in constituency) - \$	\$900.00	\$23.81	\$23.81
Taxi, Bus Travel - \$ Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$21.25	\$21.25
Member Travel (Meal Per Diems) - \$		\$732.95	\$732.95
Accommodation	#22.400.00	#F 700 00	£44 500 00
Edmonton Accommodation Allowance (\$23,160.00/yr max) Travel Accommodations Allowance	\$23,160.00	\$5,790.00	\$11,580.00
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$ Event Tickets Disclosable - \$			\$46.65
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km) Constituency Travel MLA (KM) - NF Constituency Travel Staff (KM) - NF	35,000.0		
Total Constituency Travel (KM) - NF	35,000.00		
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	1.0	1.0
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

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 157 OF 245 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
DATE DE LA FACTURE
INVOICE NO.

NO DE LA FACTURE 08/01/18

BFDF290001

0007161443

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		REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER N	CATION NISSEUR	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	MCLEAN	!		0112000	0 000504095714 07/10/18	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	54.9	1.34	70.02 70.02	3.50 3.50 3.50	73.52 73.52
						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	37.5	1.26	44.84 44.84	2.24 2.24 2.24	47.08 47.08
						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	48.6	1.21	56.12 56.12	2.81 2.81 2.81	58.93 58.93
						IMPERIAL OIL CROSSFIELD	АВ	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	41.2	1.23	48.46 48.46	2.42 2.42 2.42	50.88 50.88
Ma	rine fuel is actua	ally vehicle fuel				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	27.2	1.19	30.76 30.76	1.54 1.54 1.54	32.30 32.30
			UNIT TOTAL	. / TOT UNI	TE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	209.4		250.20	12.51	262.71
	KDN TOTALS / TOTAUX 0 1-26	ODIFICATION	UNITS / V	EHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	209.4		250.20	12.51	
								BKDN TOTALS / TOTAUX CODIFICAT	ΓΙΟΝ				262.71

Element Fleet Management Celement

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

BFDF290001

CLIENT NO.

NO DU CLIENT
INVOICE DATE
DATE DE LA FACTURE
INVOICE NO.

NO DE LA FACTURE

08/01/18 0007161443

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	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

Element Fleet Management

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 146 OF 230 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
DATE DE LA FACTURE
INVOICE NO.

NO DE LA FACTURE

09/01/18 0007184348

BFDF290001

IT NO NO. JNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N.	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA	SUPPLIER NV SUPPLIER LOC. NOM DU FOURNI POINT DE VE	ATION SSEUR	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST	EXTENDED PRICE	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL D MONTAN TOTAL I
	MCLEAN			0123456	TRANS. 000507124291 08/11/18		AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.4	1.25	45.69 45.69	2.28 2.28 2.28	47.97 47.97
					000506729147 08/10/18	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	44.3	1.23	51.83 51.83	2.59 2.59 2.59	54.42 54.42
				0112000	000507124292 08/08/18		AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.1	1.25	62.20 62.20	3.11 3.11 3.11	65.31 65.31
				0123456	000507124293 08/04/18		AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.7	1.28	71.45 71.45	3.57 3.57 3.57	75.02 75.02
						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	43.2	1.35	55.53 55.53	2.78 2.78 2.78	58.31 58.31
					000505464588 07/27/18	SHELL CANADA INC EDMONTON	AB	GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	17.2	1.33	21.76 21.76	1.09 1.09	22.85 22.85
				0123000	000507124294 07/24/18	PETRO CANADA STONY PLAIN	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	51.9	1.28	63.24 63.24	3.16 3.16 3.16	66.40 66.40
			UNIT TOTAL	. / TOT UNI	TE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	305.8		371.70	18.58	390.28
	KDN TOTALS / TOTAUX (1-26	CODIFICATION	UNITS / V	'EHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	305.8		371.70	18.58	

Element Fleet Management Celement

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 147 OF 230 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
DATE DE LA FACTURE
INVOICE NO.

NO DE LA FACTURE 09/01/18 0007184348

BFDF290001

NO. DE NO. DE	DESCRIPTION QTY UNIT COST EXTENDED PRICE TOTAL DUE COUT UNIT TOTAL GST-HST PST/QST PST/QST TOTAL DUE MONTANT TOTAL DU TOTAL DU TOTAL DU
---------------	--

BKDN TOTALS / TOTAUX CODIFICATION BKDN TOTALS / TOTAUX CODIFICATION 390.28

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Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6

Page 1 of 2

The American Express® Corporate Card Statement of Account

Prepared For STEPHANIE MCLEAN LEGIS ASSEMBLY OF AB



July 16, 2018

\$18.77

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.

 New Transactions for STEPHANIE MCLEAN

 June 18
 IMPARK00020032U Goods or Services
 EDMONTON
 14.00

 June 28
 EDM EPARK PAY MACHIN EDMONTON GOVERNMENT SERVICES
 5.70

↑ Please detach here ↑

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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

000139



STEPHANIE MCLEAN 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





Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6

Page 1 of 2

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The American Express® Corporate Card Statement of Account

Prepared For STEPHANIE MCLEAN LEGIS ASSEMBLY OF AB



August 16, 2018

\$1.91

Statement includes payments and charges received by August 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.

Listing of Charges and Credits

Amount \$

Now Trans	sactions for STEPHANIE MCLEAN		Amount \$
		grad I as "	
July 28	CalgParkAuth 2700246 CALGARY GOVERNMENT SERVICES		2.00
Total New	Transactions for STEPHANIE MCLEAN		2.00

† Please detach here †

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TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

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· Your local bank branch

Automatic banking machines

Do Not Enclose Cash

000127

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

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80



The American Express® Corporate Card Statement of Account

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Prepared For STEPHANIE MCLEAN LEGIS ASSEMBLY OF AB XXXX-XXX

September 16, 2018

Page 1 of 3

Statement includes payments and charges received by September 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.

Listing of Charges and Credits

Amount \$

New Transactions for STEPHANIE MCLEAN

Amount \$

September 13

3CPAYMENT*EDMONTON R EDMONTON Goods or Services

25.00

\$23.81

1 Please detach here 1

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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

000129

STEPHANIE MCLEAN 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

Prepared For STEPHANIE MCLEAN LEGIS ASSEMBLY OF AB



July 16, 2018

Page 1 of 2

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Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6

\$21.25

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.

New Transactions for STEPHANIE MCLEAN

Amount \$

June 29

CHECKER CABS LTD CALGARY TAXICABS AND LIMOUSINES

22.31

Total New Transactions for STEPHANIE MCLEAN

↑ 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

000139



STEPHANIE MCLEAN 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





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.

Member N	lame: McLean, Stephanie	Const	ituency:	Calg	gary-	Varsity		
For the Mo	onth of: March	Year: 2018	Er	nplo				
Day	Reason for	Meal Purchase Location(s)		Meal		Subtotal	G.S.T.	Total
of Month	Travel		В	L	D			
1								N. 45 (2.17 (4.17 (2.17))
2		the state of						<u> </u>
3		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
4								
5								
6	¥							
7				Ш	Ш			
8	60 km from Perm. Res.	Edmonton		\boxtimes		19.81	0.99	20:80
9								
10								
11								
12							2000	
13	feet of the particular and the second	Tests region control of the control						
14							i la menti de la	
15	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
16	a = # 1							12
17								mit a
18								
19	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
20	60 km from Perm. Res.	Edmonton		\boxtimes		19.81	0.99	20.80
21	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
22	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
23								
24								
25								
26								
27								
28								
29				П				
30								
31								
	I have met the requirements of s	ection 7 of the	Gran	d To	tal	\$118.86	\$5.94	\$124.80

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 / 18



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:	McLean, Stephanie	Constituency: Calgary-Varsity	

or the Mo	onth of: April	Year: 2018	Er	nplo	yee :	#:		
Day	Reason for	Meal Purchase Location(s)		Meal		Subtotal	G.S.T.	Total
of Month	Travel		В		D			
1			ᆜᆜ			4014 N VIII N		
2						40.04	0.00	20.00
3	60 km from Perm. Res.	Edmonton		\boxtimes		19.81	0.99	20.80
4	60 km from Perm. Res.	Edmonton		\boxtimes	Ш	19.81	0.99	20.80
5	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes	Ш	19.81	0.99	20.80
6	v.							
7								
8						7	#100 B 100 B	
9	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
10	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
11	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
12	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
13								
14						A Share		
15							1507785	
16	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
17	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80
18	60 km from Perm. Res.	Edmonton		\boxtimes		19.81	0.99	20.80
19	60 km from Perm. Res.	Edmonton		\boxtimes		19.81	0.99	20.80
20		,						
21					П			
22					П			
23								
24				П	П			
25					П			
26					П			
27								
28								
29								
	60 km from Perm. Res.	Edmonton				19.81	0.99	20.80
30	OU KIII II OIII FEITII. NES.	EUMONION				15.01	0.33	20.00
31			Gran	Ш	Ш	\$237.71	\$11.89	\$249.60

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

Aug 24/18



For the Month of: May

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.

Members' Travel Expenses Per-Diems Claim Form

Year: 2018

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.

Employee #:

B = Breakfast (\$9.20) | L = Lunch (\$11.60) | D = Dinner (\$20.75)

Member Name:	McLean, Stephanie	Constituency:	Calgary-V	arsity'
--------------	-------------------	---------------	-----------	---------

Meal Reason for Day Meal Purchase Location(s) Subtotal G.S.T. Total L D Travel of Month 60 km from Perm. Res. Edmonton \times \times 19.81 0.99 20.80 1 60 km from Perm. Res. 19.81 0.99 20.80 X \times 2 Edmonton 60 km from Perm. Res. X 0.99 20.80 3 Edmonton X 19.81 4 5 6 0.99 20.80 7 60 km from Perm. Res. \times \times 19.81 Edmonton 8 60 km from Perm. Res. Edmonton \times \times 19.81 0.99 20.80 \times 19.81 0.99 20.80 60 km from Perm. Res. \times 9 Edmonton 60 km from Perm. Res. X0.99 20.80 \times 19.81 Edmonton 10 11 12 13 0.99 20.80 14 60 km from Perm. Res. Edmonton X X19.81 60 km from Perm. Res. \times 19.81 0.99 20.80 15 Edmonton \boxtimes 20.80 60 km from Perm. Res. X X 19.81 0.99 16 Edmonton 60 km from Perm. Res. \times 19.81 0.99 20.80 \times 17 Edmonton 18 19 20 21 22 23 24 25 26 27 0.99 20.80 60 km from Perm. Res. X \times 19.81 28 Edmonton 60 km from Perm. Res. X 19.81 0.99 20.80 29 Edmonton X0.99 20.80 60 km from Perm. Res. 19.81 30 Edmonton X \boxtimes 0.99 20.80 60 km from Perm. Res. X \times 19.81 31 Edmonton \$297.14 \$14.86 \$312.00 **Grand Total** I certify that I have met the requirements of section 7 of the



not previously claimed or been paid for these expenses.

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.

For the Ma	onth of: June	Year: 2018	Employee #:								
TOI the lan	onth or. June	real. 2010		ı (p.o	yee,						
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Meal L	D	Subtotal	G.S.T.	Total			
1											
2		,									
3						20-10/25 154-63	in the law value				
4	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80			
5	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80			
6	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80			
7	60 km from Perm. Res.	Edmonton	\boxtimes	\boxtimes		19.81	0.99	20.80			
8						7		935 - w·			
9											
10						200200	ALCONOMIC CONTRACTOR				
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12											
13		transa la									
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29				П							
30											
31											
	l lave met the requirements of s		Gran	1.	1-1	\$79.24	\$3.96	\$83.20			

Member Signature

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: McLean, Stephanie	Const	ituency: Cal	gary-Var	rsity	
Employee #:	Date:	4/25/2018	3		
Claim Type: Temporary Residence Accommodation A	llowance in Edmonton -	Claimed Annu	ally	*	
Temporary Residence Accommodation Allowance In Maximum of \$23,160 per fiscal year.	Edmonton - Claimed Anr	nually			
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 atta		□ 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 ar	mount id	dentified above.	hide de d
Claim Payment Authorization (please check)		monthly paym			cified above for the 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.



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	Cons	stituency: Calgary-Varsity				
Employee #:	Date	e: 4/25/2018				
Claim Type: Temporary Residence Accommodation A	dlowance in Edmonton -	- Claimed Annually				
Temporary Residence Accommodation Allowance in Maximum of \$23,160 per fiscal year.	Edmonton - Claimed An	nnually				
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 atta	[] v	□ 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 suppor	ort 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.					
y was a second MA.		All and the second seco				

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.



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	Cons	tituency: C	algary-Va	rsity		
Employee #:	Date	: 4/25/20	018			
Claim Type: Temporary Residence Accommodation A	llowance in Edmonton -	Claimed An	nually			
Temporary Residence Accommodation Allowance in	Edmonton - Claimed An	nually				
Maximum of \$23,160 per fiscal year.						
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 atta	[] v	N	0			
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 suppor	t the annua	amount i	dentified above	e.	
Claim Payment Authorization (please check)	✓ 12 Monthly Payments I authorize 12 monthly payments in the amount specified above for the					
72.000.00	entire fiscal ye	ar. This mo	nthly amo	unt is static fo	r the entire f	iscal 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.