

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2017-18
069 - Lethbridge-West - Phillips, Shannon
For Expenses Processed Oct 1 - Dec 31, 2017

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$164.35	\$692.64
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$		\$28.58	\$28.58
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$541.64	\$1,194.51
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$			\$864.33
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$17,370.00
Travel Accommodations Allowance			(\$0.26)
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$275.81	\$1,464.25
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			15.5
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

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-69-S PHILLIPS
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
NVOICE DATE 10/01/17
DATE DE LA FACTURE
NVOICE NO. 0006922798
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
	PHILLIPS				000474718410 09/15/17	SHELL CANADA INC LETHBRIDGE AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	70.8	1.22	82.18 4.11 4.11 82.18 4.11	4.11 4.11	86.29 86.29
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	70.8		82.18 4.11	4.11	86.29
	BKDN TOTALS / TOTAUX CODIFICATION 01-69				UNITS / VEHIC 1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	70.8		82.18 4.11	4.11	
							BKDN TOTALS / TOTAUX COD FICATION					86.29

Element Fleet Management



BDFD290001

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-69-S PHILLIPS

- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
NVOICE DATE 11/01/17
DATE DE LA FACTURE
NVOICE NO. 0006948261
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
	PHILLIPS				000477613867 10/05/17	PETRO CANADA LETHBRIDGE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.6	.98	61.49	3.07 3.07	64.56 64.56
					000476230706 10/02/17	SHELL CANADA INC LETHBRIDGE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	66.3	1.04	65.61	3.28 3.28	68.89 68.89
					000477367774 09/22/17	IMPERIAL OIL NANTON AB	MARINE REGULAR UNLEADED GAS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	64.8	1.05	64.77	3.24 3.24	68.01 68.01
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	196.7		191.87	9.59	201.46
	BKDN TOTALS / TOTALS CODIFICATION 01-69				UNITS / VEHIC 1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	196.7		191.87	9.59	
							BKDN TOTALS / TOTALS CODIFICATION					201.46

Marine Fuel is actually vehicle fuel

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
SHANNON PHILLIPS
LEGIS ASSEMBLY OF AB

Membership Number [REDACTED] Date
November 16, 2017

Page 1 of 2

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

Statement includes payments and charges received by November 16, 2017

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 November 16, 2017

Total Credit Limit \$ [REDACTED]

Available Credit Limit \$ [REDACTED]

Listing of Charges and Credits

Amount \$

October 31 Payment Received Thank You

[REDACTED]
CH

New Transactions for SHANNON PHILLIPS

Amount \$

October 31 EXECFLIGHT CTR FUELQ EDMONTON
Goods or Services

36.00

Total New Transactions for SHANNON PHILLIPS

Fuel and Minor Maintenance = \$ 34.29

↑ Please detach here ↑

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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



SHANNON PHILLIPS
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

000133

Membership Number

d \$

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



0975

Shannon Phillips, MLA

The category Fuel and Minor Maintenance has been reduced by \$ 143.99 to reflect a repayment of a prior expense.



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LEGIS ASSEMBLY OF AB

Membership Number [REDACTED] Date
November 16, 2017



Page 1 of 2

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

Statement includes payments and charges received by November 16, 2017

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

0975

Credit Limit Summary On November 16, 2017	Total Credit Limit \$	Available Credit Limit \$
[REDACTED]	[REDACTED]	[REDACTED]

Listing of Charges and Credits Amount \$

October 31	Payment Received Thank You	[REDACTED] CR
------------	----------------------------	---------------

New Transactions for SHANNON PHILLIPS Amount \$

[REDACTED]	[REDACTED]	[REDACTED]
------------	------------	------------

October 30	3CPAYMENT*EDMONTON R EDMONTON Goods or Services	30.00
------------	--	-------

[REDACTED]	[REDACTED]	[REDACTED]
------------	------------	------------

Total New Transactions for SHANNON PHILLIPS	[REDACTED]
---	------------

Other Travel - Parking = \$ 28.58

[REDACTED]

† Please detach here †

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Membership Number	[REDACTED]
	[REDACTED] d \$



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Banque Amex du Canada
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Prepared For
SHANNON PHILLIPS
LEGIS ASSEMBLY OF AB

Membership Number

Date
October 16, 2017

Page 1 of 2

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

Statement includes payments and charges received by October 16, 2017

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

Credit Limit Summary On October 16, 2017

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

October 10 Payment Received Thank You

New Transactions for SHANNON PHILLIPS

October 10 AIRPORT TAXI SERVICE EDMONTON
TAXICABS AND LIMOUSINES

63.25

Total New Transactions for SHANNON PHILLIPS

63.25

Taxi, Bus Travel = \$ 60.24

↑ Please detach here ↑

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- Automatic banking machines

Do Not Enclose Cash

Membership Number



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SHANNON PHILLIPS
LEGIS ASSEMBLY OF AB

Membership Number [REDACTED] Date
November 16, 2017

Page 1 of 2

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

Statement includes payments and charges received by November 16, 2017

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.

0975

Credit Limit Summary On November 16, 2017	Total Credit Limit \$	Available Credit Limit \$
	[REDACTED]	[REDACTED]
Listing of Charges and Credits		Amount \$

October 31	Payment Received Thank You	[REDACTED] CR
------------	----------------------------	---------------

New Transactions for SHANNON PHILLIPS

October 17	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	63.25
October 23	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	63.25
October 26	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	52.36

November 6	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	63.25
------------	--	-------

Total New Transactions for SHANNON PHILLIPS

Taxi, Bus Travel = \$ 230.59

† Please detach here †

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Membership Number	[REDACTED]
	[REDACTED] d \$



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LEGIS ASSEMBLY OF AB
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Prepared For
**SHANNON PHILLIPS
LEGIS ASSEMBLY OF AB**

Membership Number [REDACTED] Date
December 16, 2017

Page 1 of 2

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

Statement includes payments and charges received by December 16, 2017

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 December 16, 2017

Total Credit Limit \$ [REDACTED]

Available Credit Limit \$ [REDACTED]

Listing of Charges and Credits

Amount \$

December 4 Payment Received Thank You

CR

New Transactions for SHANNON PHILLIPS

Amount \$

November 14	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	63.25
November 16	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	55.20
November 27	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES	12.65
November 27	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	69.00
December 11	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	63.25

Total New Transactions for SHANNON PHILLIPS [REDACTED]

Taxi & Bus Travel \$250.81 + GST

↑ Please detach here ↑

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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

Membership Number [REDACTED]

000129



SHANNON PHILLIPS
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



1013



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: Phillips, Shannon

Constituency: Lethbridge-West

Employee #:

Date: 4/1/2017

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

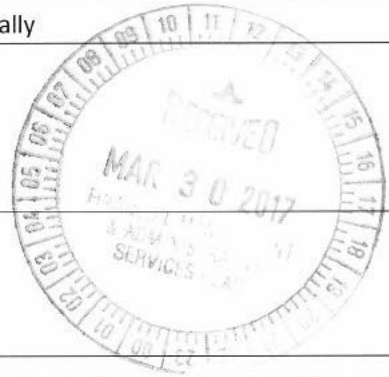
Fiscal Year: 2017-2018

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

October 2017

☒ 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.

OCTOBER 2017

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

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Phillips, Shannon

Constituency: Lethbridge-West

Employee #:

Date: 4/1/2017

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2017-2018

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

November 2017

☒ 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.

NOVEMBER 2017

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

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Phillips, Shannon

Constituency: Lethbridge-West

Employee #:

Date: 4/1/2017

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2017-2018

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No



Monthly Amount (maximum \$1,930 or less)

\$ 1,930.00

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.

December 2017

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

Member Signature

Updated April 2016

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Shannon Phillips

Claimant Name: Natasha Fairweather

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: Red Cross Volunteers

Purpose:

Red Cross volunteer meeting

\$ 40.97

hosting -
SAFeway

Safeway West Lethbridge
1-550 University Dr W Lethbridge AB
Phone: 403.29.6382
GST # 317093735

Served by: SC0 23

Welcome to Safeway

PRODUCE

Fruit Tray \$24.99 GC

BAKERY

Cheesecake Bites \$7.99 C

Cheesecake Bites \$7.99 C

AIR MILES Base Offer 2 Miles

SUBTOTAL \$40.97

5% GST \$1.25

TOTAL \$42.22

Debit TENDER \$42.22

Cash CHANGE \$0.00

NUMBER OF ITEMS 3

MERCHANT ID 040080036895 TAPPED
CLIENT ID 9603 RECEIPT# 3053000
TERMINAL ID 023 TRACE# 00980339

** PURCHASE ** \$ 42.22

ACCOUNT Checking RESP 000
DATE 07/17/2017 TIME 14:52:32
REF # 00000054

APPL. Interac
AID A0000002771010
TVR 8000008000 TSI

APPROVED

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

Term Tran Store Oper 07/17/17
23 3053 8520 123 14:52:33

Thank you for shopping at Our Store
Come Again Soon

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Shannon Phillips

Claimant Name: Lisa Lambert

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: Youth Advisory Council

Purpose:

pizza for Youth Meeting held October 5, 2017

\$ 82.76

Two Guys And A Pizza Place
316 - 11 street south
403-331-2222
www.twoguyspizza.ca
GSTH879803518RT0001

Ticket # 99
10/5/2017 3:34 pm DAVID M

*** DELIVERY ***

(403) 330-9530

402 8 ST S

Zone
South
Cash

16 " XL 26.00
Classic Donair

16 " XL 26.00
Greekus Veggies

16 " XL 26.00
Canuck

Subtotal 78.00
Delivery Charge 4.75
GST 4.14
Total 86.89
Tender Rounding 0.01
Balance Owning 86.90

Ticket # 99
(*0510016347)

IT'S PIZZA TIME!

Personal Expense Claim Receipt Description

Member Name: Shannon Phillips

Claimant Name: Bavaru Events

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee and tea hosting
\$ 50.00

BAVARU Events and Catering
129 Mt. Alderson Crescent
West
Lethbridge AB T1K 6N9
403-991-7560
info@bavaru.com
www.bavaru.com
GST Registration No.:
763693694RT0001



Invoice 1112

INVOICE TO

Lethbridge West Constituency
office

DATE
11/07/2017

PLEASE PAY
\$52.50

DUE DATE
11/22/2017

ACTIVITY	QTY	RATE	AMOUNT
Coffee And Tea Station 30 people	1	50.00	50.00
SUBTOTAL			50.00
GST @ 5%			2.50
TOTAL			52.50
TOTAL DUE			\$52.50

THANK YOU.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Shannon Phillips
Claimant Name: Lisa Lambert
Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☒ Group: Students at University

Purpose:

To meet with university students to discuss issues of concern

\$ 63.38

STUDENTS' UNION
4401 UNIVERSITY DR SUITE
LETHBRIDGE AB

CARD [REDACTED]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2017/10/31
TIME 4551 15:29:23
RECEIPT NUMBER
C82030569-001-470-019-0

PURCHASE
AMOUNT \$55.00
TIP \$11.00
TOTAL

\$66.00

Interac
A0000002771010
81B305F4F31DCC49
000000000000-E800
9F164A8C

APPROVED

AUTH# [REDACTED] 00-001
THANK YOU

CARDHOLDER COPY

#4

U of L Lou
4401 University Drive
Lethbridge, AB T1K 1N6
Phone (403)329-2222

Date: Oct 31, 2017 Time: 03:26PM
Server: Sally
Bill: 0349 Table: 4

1	LARGE Nachos	17.00
1	LARGE Assorted Platter	25.00
	LARGE Platter-Small	
1	Turkey Pesto Wrap	13.00

Total 55.00

857 Included 1.00

Open Time: Oct 31, 2017 02:24PM

Please Pay Server
Thank You!!

Personal Expense Claim Receipt Description

Member Name: Shannon Phillips

Claimant Name: Lisa Lambert

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)☐ Individual Stakeholder(s)☒ Group: Office volunteers

Purpose:

To thank students helping in constituency office
this term

\$ 38.70

Orders	11/01/2017 11:23 AM
#0	2007
Cafe Verde	
# Item	Price
2 1 Corn Enchilada	26.50
1 1 Enchilada	12.20
Subtotal	38.70
Tax	1.94
Total	\$ 40.65
Payment	Amount
Interac Debit	40.65
Paid	40.65
	Net Tax Gross
5.00%:	38.70 1.94 40.64
Tax total:	38.70 1.94 40.65

Thank you!

Motte's CAFE VERDE
Fresh Mexican Grill
Mayor Magrath Dr South
1503
T1K2R4 Lethbridge
403-942-7374
729438697RP0001
www.cafeverdemexicangr
ill.com

