LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2016-17
085 - West Yellowhead - Rosendahl, Eric
For Expenses Processed Oct 1 - Dec 31, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - $ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - $		$1,351.83	$2,943.52
MLA Parking Cap - $	$900.00		
Other Travel - Parking - $			
Member Travel (overnight stay in constituency) - $		$309.70	$309.70
Taxi, Bus Travel - $			$70.48
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - $			
Member Travel (Meal Per Diems) - $		$508.10	$668.58
Accommodation			
Edmonton Accommodation Allowance ($23,160.00/yr max)	$23,160.00	$5,790.00	$17,370.00
Travel Accommodations Allowance			$1,556.25
Travel Accommodations Allowance (days; 10 max) - NF	10.0		10.0
Other			
Hosting - $			$42.81
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000.0	7,652.0	11,455.0
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	16.5	26.0
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

element

BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
[redacted]

CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE [redacted]
INVOICE NO.
NO DE LA FACTURE 0006467039

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]	ROSENDAHL		[redacted]		000442717492 09/17/16	SHELL CANADA INC WABAMUN AB	UNLEADED REGULAR GASOLINE	51.3	.90	43.90		
							GST-HST / TPS-TVH				2.20	
							REF GST-HST / TPS-TVH REF				2.20	
							** REF NO TOT / TOT NO REF **					46.10
							TOTAL / TOTAL			43.90	2.20	46.10
					000442607496 08/24/16	IMPERIAL OIL GRANDE CACHE AB	ETHANOL REGULAR GRADE	30.1	1.02	29.19		
							GST-HST / TPS-TVH				1.46	
							REF GST-HST / TPS-TVH REF				1.46	
							** REF NO TOT / TOT NO REF **					30.65
							TOTAL / TOTAL			29.19	1.46	30.65
					000442607494 08/23/16	IMPERIAL OIL RED DEER AB	ETHANOL REGULAR GRADE	41.2	1.02	40.00		
							GST-HST / TPS-TVH				2.00	
							REF GST-HST / TPS-TVH REF				2.00	
							** REF NO TOT / TOT NO REF **					42.00
							TOTAL / TOTAL			40.00	2.00	42.00
					000442607495 08/23/16	IMPERIAL OIL NITON JUNCTIO AB	ETHANOL REGULAR GRADE	30.6	.98	28.62		
							GST-HST / TPS-TVH				1.43	
							REF GST-HST / TPS-TVH REF				1.43	
							** REF NO TOT / TOT NO REF **					30.05
							TOTAL / TOTAL			28.62	1.43	30.05
					000442607493 08/21/16	IMPERIAL OIL EDMONTON AB	ETHANOL REGULAR GRADE	41.2	.84	33.10		
							GST-HST / TPS-TVH				1.65	
							REF GST-HST / TPS-TVH REF				1.65	
							** REF NO TOT / TOT NO REF **					34.75
							TOTAL / TOTAL			33.10	1.65	34.75
					000442607492 08/20/16	IMPERIAL OIL EDMONTON AB	ETHANOL REGULAR GRADE	34.5	.87	28.57		
							GST-HST / TPS-TVH				1.43	
							REF GST-HST / TPS-TVH REF				1.43	
							** REF NO TOT / TOT NO REF **					30.00
							TOTAL / TOTAL			28.57	1.43	30.00
					000442607491 08/16/16	IMPERIAL OIL HINTON AB	ETHANOL REGULAR GRADE	55.6	.99	52.38		
							GST-HST / TPS-TVH				2.62	
							REF GST-HST / TPS-TVH REF				2.62	
							** REF NO TOT / TOT NO REF **					55.00
							TOTAL / TOTAL			52.38	2.62	55.00
		UNIT TOTAL / TOT UNITE					FUEL QTY / QTE CARB	284.5				
							TOT CHARGES / TOT FRAIS			255.76		
							TOT GST-HST / TOT TPS-TVH				12.79	
							UNIT TOTAL / TOT UNITE					268.55
	BKDN TOTALS / TOTAUX CODIFICATION 01-85	UNITS / VEHIC 1					FUEL QTY / QTE CARB	284.5				
							TOT CHARGES / TOT FRAIS			255.76		
							GST-HST/TPS-TVH				12.79	

BLG871

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

Element Fleet Management

element

BFDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-85-E ROSENDAHL
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 10/01/16
INVOICE NO.
NO DE LA FACTURE 0006467039

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					268.55

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

Element Fleet Management

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FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
[redacted]

CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE [redacted]
INVOICE NO.
NO DE LA FACTURE 0006478695

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]	ROSENDAHL		[redacted]		000444551774	SHELL CANADA INC	UNLEADED REGULAR GASOLINE	54.7	.97	50.48		
					10/18/16	WABAMUN AB	GST-HST / TPS-TVH				2.52	
							REF GST-HST / TPS-TVH REF				2.52	
							** REF NO TOT / TOT NO REF **					53.00
							TOTAL / TOTAL			50.48	2.52	53.00
					000444107517	IMPERIAL OIL	ETHANOL REGULAR GRADE	44.3	.96	40.48		
					10/03/16	HINTON AB	GST-HST / TPS-TVH				2.02	
							REF GST-HST / TPS-TVH REF				2.02	
							** REF NO TOT / TOT NO REF **					42.50
							TOTAL / TOTAL			40.48	2.02	42.50
					000444107516	IMPERIAL OIL	ETHANOL REGULAR GRADE	47.5	.96	43.33		
					09/30/16	HINTON AB	GST-HST / TPS-TVH				2.17	
							REF GST-HST / TPS-TVH REF				2.17	
							** REF NO TOT / TOT NO REF **					45.50
							TOTAL / TOTAL			43.33	2.17	45.50
					000444107515	IMPERIAL OIL	ETHANOL REGULAR GRADE	35.3	.88	29.52		
					09/28/16	EDMONTON AB	GST-HST / TPS-TVH				1.48	
							REF GST-HST / TPS-TVH REF				1.48	
							** REF NO TOT / TOT NO REF **					31.00
							TOTAL / TOTAL			29.52	1.48	31.00
					000444107514	IMPERIAL OIL	ETHANOL REGULAR GRADE	42.2	.96	38.52		
					09/27/16	HINTON AB	GST-HST / TPS-TVH				1.93	
							REF GST-HST / TPS-TVH REF				1.93	
							** REF NO TOT / TOT NO REF **					40.45
							TOTAL / TOTAL			38.52	1.93	40.45
					000444107513	IMPERIAL OIL	ETHANOL REGULAR GRADE	51.1	.96	46.67		
					09/22/16	HINTON AB	GST-HST / TPS-TVH				2.33	
							REF GST-HST / TPS-TVH REF				2.33	
							** REF NO TOT / TOT NO REF **					49.00
							TOTAL / TOTAL			46.67	2.33	49.00
					000444107512	IMPERIAL OIL	ETHANOL REGULAR GRADE	59.5	.95	53.81		
					09/20/16	NITON JUNCTIO AB	GST-HST / TPS-TVH				2.69	
							REF GST-HST / TPS-TVH REF				2.69	
							** REF NO TOT / TOT NO REF **					56.50
							TOTAL / TOTAL			53.81	2.69	56.50
					000444227399	PETRO CANADA	UNLEADED REGULAR GASOLINE	30.2	.96	27.62		
					09/19/16	RED DEER AB	GST-HST / TPS-TVH				1.38	
							REF GST-HST / TPS-TVH REF				1.38	
							** REF NO TOT / TOT NO REF **					29.00
							TOTAL / TOTAL			27.62	1.38	29.00
					000444107511	IMPERIAL OIL	ETHANOL REGULAR GRADE	55.8	.95	50.48		
					09/15/16	NITON JUNCTIO AB	GST-HST / TPS-TVH				2.52	
							REF GST-HST / TPS-TVH REF				2.52	

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

Element Fleet Management

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FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
[redacted]
- -
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- -

CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE [redacted]16
INVOICE NO. 0006478695
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]	ROSENDAHL		[redacted]				** REF NO TOT / TOT NO REF **					53.00
							TOTAL / TOTAL			50.48	2.52	53.00
					000444107510	IMPERIAL OIL	ETHANOL REGULAR GRADE	49.0	.98	45.71		
					09/13/16	HINTON AB	GST-HST / TPS-TVH				2.29	
							REF GST-HST / TPS-TVH REF				2.29	
							** REF NO TOT / TOT NO REF **					48.00
							TOTAL / TOTAL			45.71	2.29	48.00
					000444107509	IMPERIAL OIL	ETHANOL REGULAR GRADE	43.5	.95	39.38		
					09/11/16	NITON JUNCTIO AB	GST-HST / TPS-TVH				1.97	
							REF GST-HST / TPS-TVH REF				1.97	
							** REF NO TOT / TOT NO REF **					41.35
							TOTAL / TOTAL			39.38	1.97	41.35
		UNIT TOTAL / TOT UNITE					FUEL QTY / QTE CARB	513.1				
							TOT CHARGES / TOT FRAIS			466.00		
							TOT GST-HST / TOT TPS-TVH				23.30	
							UNIT TOTAL / TOT UNITE					489.30
	BKDN TOTALS / TOTAUX CODIFICATION 01-85	UNITS / VEHIC 1					FUEL QTY / QTE CARB	513.1				
							TOT CHARGES / TOT FRAIS			466.00		
							GST-HST/TPS-TVH				23.30	
							BKDN TOTALS / TOTAUX CODIFICATION					489.30

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

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element

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FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-85-E ROSENDAHL
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CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 12/01/16
INVOICE NO.
NO DE LA FACTURE 0006490543

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]	ROSENDAHL		[redacted]		000445658344	IMPERIAL OIL		ETHANOL REGULAR GRADE	50.1	1.00	47.62		
					10/30/16	HINTON	AB	GST-HST / TPS-TVH				2.38	
								REF GST-HST / TPS-TVH REF				2.38	
								** REF NO TOT / TOT NO REF **					50.00
								TOTAL / TOTAL			47.62	2.38	50.00
					000445658343	IMPERIAL OIL		ETHANOL REGULAR GRADE	50.8	.98	47.62		
					10/28/16	RED DEER	AB	GST-HST / TPS-TVH				2.38	
								REF GST-HST / TPS-TVH REF				2.38	
								** REF NO TOT / TOT NO REF **					50.00
								TOTAL / TOTAL			47.62	2.38	50.00
					000445658342	IMPERIAL OIL		ETHANOL REGULAR GRADE	52.2	.96	47.67		
					10/27/16	ENTWISTLE	AB	GST-HST / TPS-TVH				2.38	
								REF GST-HST / TPS-TVH REF				2.38	
								** REF NO TOT / TOT NO REF **					50.05
								TOTAL / TOTAL			47.67	2.38	50.05
					000445658341	IMPERIAL OIL		ETHANOL REGULAR GRADE	52.8	1.01	50.76		
					10/24/16	EDSON	AB	GST-HST / TPS-TVH				2.54	
								REF GST-HST / TPS-TVH REF				2.54	
								** REF NO TOT / TOT NO REF **					53.30
								TOTAL / TOTAL			50.76	2.54	53.30
					000445658340	IMPERIAL OIL		ETHANOL REGULAR GRADE	61.2	1.03	60.00		
					10/23/16	HINTON	AB	GST-HST / TPS-TVH				3.00	
								REF GST-HST / TPS-TVH REF				3.00	
								** REF NO TOT / TOT NO REF **					63.00
								TOTAL / TOTAL			60.00	3.00	63.00
					000445658339	IMPERIAL OIL		ETHANOL REGULAR GRADE	52.7	1.03	51.67		
					10/20/16	HINTON	AB	GST-HST / TPS-TVH				2.58	
								REF GST-HST / TPS-TVH REF				2.58	
								** REF NO TOT / TOT NO REF **					54.25
								TOTAL / TOTAL			51.67	2.58	54.25
					000445658338	IMPERIAL OIL		ETHANOL REGULAR GRADE	51.2	1.01	49.24		
					10/14/16	NITON JUNCTIO	AB	GST-HST / TPS-TVH				2.46	
								REF GST-HST / TPS-TVH REF				2.46	
								** REF NO TOT / TOT NO REF **					51.70
								TOTAL / TOTAL			49.24	2.46	51.70
					000445658337	IMPERIAL OIL		ETHANOL REGULAR GRADE	51.6	.95	46.67		
					10/06/16	NITON JUNCTIO	AB	GST-HST / TPS-TVH				2.33	
								REF GST-HST / TPS-TVH REF				2.33	
								** REF NO TOT / TOT NO REF **					49.00
								TOTAL / TOTAL			46.67	2.33	49.00
	UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB	422.6				
								TOT CHARGES / TOT FRAIS			401.25		
								TOT GST-HST / TOT TPS-TVH				20.05	

BLG871

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

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DETAILS SERVICES DE GESTION DE PARC

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-85-E ROSENDAHL
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CLIENT NO.
NO DU CLIENT [redacted]
INVOICE DATE
DATE DE LA FACTURE 12/01/16
INVOICE NO.
NO DE LA FACTURE 0006490543

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]	ROSENDAHL		[redacted]				UNIT TOTAL / TOT UNITE					421.30
	BKDN TOTALS / TOTAUX CODIFICATION 01-85	UNITS / VEHIC 1					FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	422.6		401.25	20.05	
							BKDN TOTALS / TOTAUX CODIFICATION					421.30

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

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Eric Rosendahl

Claimant Name: Eric Rosendahl

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☐ Group: _____

Purpose:

Oil change on MLA Rosendahls vehicle

No Appointment Necessary

DATE 8/16/2016
INVOICE NO. **2171233** 12:07 PM
EMPLOYEES N/A N/A N/A

GST # R812960987

CUSTOMER INFORMATION

ROSENDAHL
[redacted]

VEHICLE INFORMATION

[redacted]

FLEETS

SERVICE HISTORY

8/16/2016	11000	SFS1
5/6/2016	1000	SFS1
12/15/2015	179383	SFS1
10/9/2015	169220	SFS1
8/17/2015	16922	SFS1 AF
3/3/2015	145407	SFS1

SERVICE CHECKLIST

1.Engine Oil	Replaced
2.Oil Filter	Replaced
3.Chassis Lubrication	Completed
4.Trans/Axle Fluid	Full
5.Front Diff/Final Drive	Full
6.Transfer Case Fluid	Full
7.Rear Diff Fluid	Full
8.Air Filter	Checked O.K.
9.Cabin Air Filter	Checked O.K.
10.Breather Filter	Checked O.K.
11.PCV Valve	Checked O.K.
12.Radiator Fluid	Full/Chkd
13.Radiator Cap Test	N/A
14.Power Steering Fluid	Full
15.Battery Tested	N/A
16.Washer Fluid	Filled
17.Serpentine/V Belt	Checked O.K.
18.Wiper Blades	Checked O.K.
19.Light Check	N/A
20.Tire Pressure	N/A
21.Tire Condition	N/A

DESCRIPTION	QTY	PRICE
Mobil 5w30 Full Synthetic	1.00	98.99
Oil Filter # PZ-173	1.00	0.00
Mobil 1 5W30 Bulk (5.70 L.)	5.70	8.93
Coolant good to -40 °C.	1.00	0.00
Oil Level on Arrival: Level O.K.	1.00	0.00
Environmental Fee	1.00	3.99

Subtotal	111.91
Sale	111.91
GST	5.60
Total	117.51
Interac	117.51

MESSAGES

Recommend next service on **November 14, 16** or

X

OUTBACK EXPRESS LUBE & WASH
102 JOBLIN ST
HINTON AB

[redacted]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/08/16
TIME 3642 12:07:48
RECEIPT NUMBER
C82014456-001-326-011-0

PURCHASE
TOTAL $117.51

Interac
A0000002771010
6F8495153E931BAE
0080008000-E800
0BECCEA5587B316B

APPROVED 00-001
[redacted]
THANK YOU

CARDHOLDER COPY

d/or services in the amount of the total shown herein and
wledge that if I am responsible for any damages that may
d then driving my vehicle after the engine light has illuminated.

ve been shown the oil level and approve of

Rosendahl

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Eric Rosnedahl

Claimant Name: Eric Rosendahl

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☐ Group: _____

Purpose:

Oil change

No Appointment Necessary

GST # R812960987

DATE 10/3/2016
INVOICE NO. 2171820 09:09 AM
EMPLOYEES N/A N/A N/A

CUSTOMER INFORMATION

ROSENDAHL

[redacted]

VEHICLE INFORMATION

[redacted]

FLEETS

SERVICE HISTORY

10/3/2016	20000	SFS1
8/16/2016	11000	SFS1
5/6/2016	1000	SFS1
12/15/2015	179383	SFS1
10/9/2015	169220	SFS1
8/17/2015	16922	SFS1 AF

SERVICE CHECKLIST

1.Engine Oil	Replaced
2.Oil Filter	Replaced
3.Chassis Lubrication	Completed
4.Trans/Axle Fluid	Full
5.Front Diff/Final Drive	Full
6.Transfer Case Fluid	Full
7.Rear Diff Fluid	Full
8.Air Filter	Checked O.K.
9.Cabin Air Filter	N/A
10.Breather Filter	Checked O.K.
11.PCV Valve	Checked O.K.
12.Radiator Fluid	Full/Chkd
13.Radiator Cap Test	N/A
14.Power Steering Fluid	Full
15.Battery Tested	N/A
16.Washer Fluid	Filled
17.Serpentine/V Belt	Checked O.K.
18.Wiper Blades	Checked O.K.
19.Light Check	N/A
20.Tire Pressure	N/A
21.Tire Condition	N/A

DESCRIPTION	QTY	PRICE
Mobil 5w30 Full Synthetic	1.00	98.99
Mobil 1 5W30 Bulk (5.70 L.)	5.70	8.93
WW Fluid Jug	1.00	5.00
Environmental Fee	1.00	3.99

Subtotal	116.91
Sale	116.91
GST	5.85
Total	122.76
Interac	122.76

MESSAGES

Recommend next service on January 1, 17 or

X

OUTBACK EXPRESS LUBE & WASH
102 JOBLIN ST
HINTON AB
[redacted]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/10/03
TIME 0477 09:08:27
RECEIPT NUMBER
C82014456-001-368-002-0

PURCHASE
TOTAL $122.76

Interac
A0000002771010
E52AEF9A83F381B9
0080008000-E800
5928D04B22F56FC0

APPROVED [redacted]

THANK YOU

CARDHOLDER COPY

...e amount of the total shown herein and ...m responsible for any damages that may ...ny vehicle after the engine light has illuminated

...UBE &

...n shown the oil level and approve of

_____

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
ERIC B. ROSENDAHL
LEGIS ASSEMBLY OF AB

[redacted]

Date
November 16, 2016

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

Statement includes payments and charges received by November 16, 2016

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.

1245

Credit Limit Summary
On November 16, 2016

Total Credit Limit $ [redacted] **Available Credit Limit $**

Listing of Charges and Credits

Amount $

November 4	**Payment Received Thank You**	[redacted]

New Transactions for ERIC B. ROSENDAHL

Amount $

[redacted]

October 22	**FAIRMONT JASPER PARK JASPER** MEETINGS/CONVENTIONS	**162.59**
October 24	**FAIRMONT JASPER PARK JASPER** MEETINGS/CONVENTIONS	**162.59**

[redacted]

[redacted]

↑ 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

Membership Number [redacted]

000127

ERIC B. ROSENDAHL
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

[redacted]

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: Rosendahl, Eric **Constituency:** West Yellowhead

For the Month of: May **Year:** 2016 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
6	60 km from Perm. Res.	Jasper	☐	☒	☐	11.05	0.55	11.60
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
20	60 km from Perm. Res.	Grande Cache	☐	☒	☐	11.05	0.55	11.60
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
27			☐	☐	☐			
28		[redacted]	☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
				Grand Total		$101.14	$5.06	$106.20

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.

E Rosendahl
Member Signature

Oct 11/16
Date

Members' Travel Expenses Per-Diems Claim Form

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

Member Name: Rosendahl, Eric **Constituency:** West Yellowhead

For the Month of: June **Year:** 2016 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
3			☐	☐	☐			
4	60 km from Perm. Res.	Edson	☐	☒	☐	11.05	0.55	11.60
5	Travel to/from Capital	Edmonton	☐	☒	☐	11.05	0.55	11.60
6			☐	☐	☐			
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10	Travel to/from Capital	Edmonton	☐	☒	☐	11.05	0.55	11.60
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14	60 km from Perm. Res.	Edson	☐	☒	☐	11.05	0.55	11.60
15	60 km from Perm. Res.	Edson	☐	☐	☒	19.76	0.99	20.75
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20	60 km from Perm. Res.	Jasper	☐	☐	☒	19.76	0.99	20.75
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
					Grand Total	$103.48	$5.17	$108.65

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.

E Rosendahl
Member Signature

Oct 11/16
Date

Members' Travel Expenses Per-Diems Claim Form

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

Member Name: Rosendahl, Eric **Constituency:** West Yellowhead

For the Month of: July **Year:** 2016 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10	Travel to/from Capital	Edmonton	☐	☒	☒	30.81	1.54	32.35
11	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
12	Travel to/from Capital	Calgary	☒	☐	☒	28.52	1.43	29.95
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
					Grand Total	$98.86	$4.94	$103.80

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.

E Rosendahl
Member Signature

Oct 11/16
Date

Members' Travel Expenses Per-Diems Claim Form

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

Member Name: Rosendahl, Eric **Constituency:** West Yellowhead

For the Month of: August **Year:** 2016 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23	Travel to/from Capital	Lethbridge	☐	☒	☒	30.81	1.54	32.35
24	Travel to/from Capital	Grande Prairie	☐	☒	☐	11.05	0.55	11.60
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
				Grand Total		$41.86	$2.09	$43.95

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.

E Rosendahl — Oct 11/16

Member Signature **Date**

Members' Travel Expenses Per-Diems Claim Form

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

Member Name: Rosendahl, Eric **Constituency:** West Yellowhead

For the Month of: September **Year:** 2016 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12	60 km from Perm. Res.	Grande Cache	☐	☒	☒	30.81	1.54	32.35
13	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17	Travel to/from Capital	Edmonton	☐	☒	☐	11.05	0.55	11.60
18			☐	☐	☐			
19	Travel to/from Capital	Calgary	☐	☒	☐	11.05	0.55	11.60
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
		Grand Total				$92.43	$4.62	$97.05

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.

E Rosendahl
Member Signature

Dec 11/16
Date

Members' Travel Expenses Per-Diems Claim Form

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

Member Name: Rosendahl, Eric **Constituency:** West Yellowhead

For the Month of: November **Year:** 2016 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
8	60 km from Perm. Res.	Edmonton	☐	☒	☐	11.05	0.55	11.60
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23			☐	☐	☐			
24	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
					Grand Total	$50.57	$2.53	$53.10

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.

E Rosendahl
Member Signature

Dec 09/16
Date

Members' Travel Expenses Per-Diems Claim Form

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

Member Name: Rosendahl, Eric **Constituency:** West Yellowhead

For the Month of: October **Year:** 2016 **Employee #:** [redacted]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal B	Meal L	Meal D	Subtotal	G.S.T.	Total
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7			☐	☐	☐			
8			☐	☐	☐			
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22	60 km from Perm. Res.	Jasper	☐	☐	☒	19.76	0.99	20.75
23			☐	☐	☐			
24			☐	☐	☐			
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29			☐	☐	☐			
30			☐	☐	☐			
31			☐	☐	☐			
					Grand Total	$19.76	$0.99	$20.75

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.

E Rosendahl
Member Signature

Dec 09/16
Date

Members' Temporary Accommodation Allowance Claim Form

[redacted]

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: Rosendahl, Eric **Constituency:** West Yellowhead

[redacted] **Date:** June 2, 2016

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:

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 [redacted]

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.

OCT 2016

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.

E Rosendahl

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: Rosendahl, Eric [redacted] **Constituency:** West Yellowhead

Date: June 2, 2016

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:

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 [redacted]

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.

NOV 2016

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.

E Rosendahl

Member Signature

85

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: Rosendahl, Eric [redacted] **Constituency:** West Yellowhead

Date: June 2, 2016

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: DEC. 2016

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 [redacted]

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.

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.

E Rosendahl

Member Signature