

LEGISLATIVE ASSEMBLY OF ALBERTA - 29th LEG
Member EDR 2015-16 - 29th Leg
072 - Medicine Hat - Wanner, Robert
For Expenses Processed Oct 1 - Dec 31, 2015

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$747.16	\$915.01
MLA Parking Cap - \$	\$900.00	\$38.10	\$38.10
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Member Travel (Extraordinary Accommodation) - \$			
Taxi, Bus Travel - \$		\$66.10	\$503.60
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$4,604.00	\$4,604.00
Member Travel (Meal Per Diems) - \$		\$494.81	\$1,176.24
Other			
Hosting - \$		\$108.16	\$108.16
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	20	69
Travel Accommodations Allowance (days; 10 max)	10		
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000		
Special Trips (5 trips per year) - NF	5		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		1	1
Use of a Private Automobile (52 trips per year) - NF	52		5
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		

\$ - 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

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-72-R WANNER
- -
- -
- -
- -

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
	R WANNER				000423631724 10/07/15	FEDERATED COOPERATIVES L MITED MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	25.5	1.08	26.23	1.31 1.31	27.54 27.54
					000423017877 09/26/15	FEDERATED COOPERATIVES L MITED MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	30.4	.97	28.10	1.41 1.41	29.51 29.51
					000423510262 09/24/15	IMPERIAL OIL STRATHMORE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	31.9	1.02	30.95	1.55 1.55	32.50 32.50
					000423510261 09/22/15	IMPERIAL OIL CROSSF ELD AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	24.2	1.03	23.81	1.19 1.19	25.00 25.00
					000422737529 09/20/15	FEDERATED COOPERATIVES L MITED MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	46.4	.97	42.87	2.14 2.14	45.01 45.01
					000423510260 09/16/15	IMPERIAL OIL STRATHMORE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	32.0	.94	28.57	1.43 1.43	30.00 30.00
					000423510259 09/13/15	IMPERIAL OIL STRATHMORE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	26.6	.97	24.53	1.23 1.23	25.76 25.76
					000423510258 09/09/15	IMPERIAL OIL STRATHMORE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.8	.97	53.32	2.67 2.67	55.99 55.99
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH	274.8		258.38	12.93	

BLG871

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-72-R WANNER - - - - - - - -



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 AUTHORISE 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
R	WANNER				000424857223 11/01/15	SHELL CANADA INC CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	42.3	1.03	41.48	2.07 2.07	43.55 43.55
					000425680321 10/21/15	HUSKY OIL EDMONTON AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	56.5	.95	51.14	2.48 2.48	53.62 53.62 .57- 53.05
					000424464345 10/17/15	FEDERATED COOPERATIVES L MITED MEDICINE HAT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	47.2	1.06	47.63	2.38 2.38	50.01 50.01
					000425573593 10/15/15	IMPERIAL OIL RED DEER COUN AB	ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	45.3	1.10	47.63	2.38 2.38	50.01 50.01
					000425573592 10/08/15	IMPERIAL OIL RED DEER AB	ETHANOL REGULAR GRADE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	44.2	1.15	48.40	2.42 2.42	50.82 50.82
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	235.5		236.28	11.73	248.01 .57- 247.44
					BKDN TOTALS / TOTAUX CODIFICATION 01-72		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	235.5		236.28	11.73	248.01 .57- 247.44

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-72-R WANNER - - - - - - - -



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 AUTHORISE ----- 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
							UNIT TOTAL / TOT UNITE	271.31				
BKN TOTALS / TOTAUX CODIFICATION UNITS / VEHIC 1 01-72							FUEL QTY / QTE CARB 274.8 TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	258.38 12.93				
							BKN TOTALS / TOTAUX CODIFICATION	271.31				

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

PETRO-CANADA
1922-20TH AVE
COALDALE
ALBERTA T0K 0L0
40334527440

GST 119335453A
PC0500604:8423301
TERMINAL: 028423351
PAYPOINT: 028423301

2015-07-29 16:02

PUMP 01
REGULAR
LITRES L 60.786
PRICE/L \$ 1.079
FUEL SALES \$ 65.59*

TOTAL OWED \$ 65.59

TOTAL PAID
CREDIT CARD \$ 65.59

* GST INCL. \$ 3.12

CAPITAL ONE
A00000000041010
0000008000
E800
INVOICE 505100

VERIFIED BY PIN

00 APPROVED
THANK YOU 027

-- IMPORTANT --
RETAIN THIS COPY
FOR YOUR RECORDS

SURVEY! EARN POINTS
& CHANCE TO WIN GAS!
1-866-826-7779 OR
PETRO-CANADA.CA/HERO

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Highway #2 North
Crossfield AB T0M0S0

ESSO EXPRESS PAY

CROSSFIELD ESSO
00302537
HWY 2 N
CROSSFIELD, AB T0M
URN:R121461107
05/23/2015 773031457
06:33:40 PM

PUMP# 5
REGLR 24.392L
PRICE/L 0.984
FUEL TOTAL \$ 24.00

GST in fuel \$ 1.14
CREDIT \$ 24.00

SEE OVER. VOI

ESSO. SEE

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

E88002125
9515 149 ST
EDMONTON, AB

ESSO EXPRESS PAY

CRESTVIEW ESSO
00302359
9515-149 STREET
EDMONTON, AB T5P 1J
URN:R121461107
06/02/2015 566638405
07:32:10 PM

PUMP# 7
EREG 54.255L
PRICE/L 1.069
FUEL TOTAL \$ 58.00

GST in fuel \$ 2.76
CREDIT \$ 58.00

THANK YOU

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Medicine Hat COOP
13th Ave SE
Medicine Hat
(403) 528-6626
GST# R103619193

Pump Litres Price/L
15 56.367 \$1.029

Product Amount
Regular \$58.00

Total \$58.00

GST (Inc Pumps) \$2.76

Purchase
MASTERCARD

* DATE: 06/08/2015
TIME: 15:50:53
REF: 0014360610 C
TERM: 35801 INV
AUTH:
RESP: 027 ISO:01

Approved - Thank you

IMPORTANT:
retain this copy
for your records

CUSTOMER COPY

Store # 169106
Receipt # 74619

Thank You !!!

Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

DELBURNE
FAS GAS PLUS

1801 28AVE. BOX 190

DELBURNE, AB, T0M0V0

GST# : 104442959RT0001

TEL/FAX : 403-749-2101/403-749-2120

TERMINAL ID : 01

TRANSACTION NO : 201508060256

PUMP:02 GRADE:REGULAR=> 52.719L @59.52

52.719L X \$1.129

REGULAR (INC. TAX)

59.52 T

FUEL GST(INCLUDED PUMP)

2.83)

THANK YOU ! SEE YOU AGAIN.
2015 08 06 Thursday at 06:16 PM HEATHER.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

CALGARY PARKING AUTHORITY (403) 537-7000

Terminal: 858

Zone: Lot 28 : 9028

Valid through:

WEDNESDAY 19 AUG 15

6:00 PM

22.86

AMOUNT PAID: \$24.00 (GST incl.)

START TIME: 8/19/2015 9:21 AM

RECEIPT NO: 65848

LEE Battery Boosting & Tire Inflation Services (403) 537-7006

FF

Calgary
meeting
at Chi.
Hors

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking

Edmonton City Centre West
Managed by Advanced Parking
Rcpt# 1210
06/01/15 08:49 L# 1 A# 5 Txn# 12767
05/31/15 20:03 In 06/01/15 08:49 Out
Regular Rate \$ 15.24
Total Tax \$ 0.76
Total Fee \$ 16.00
CASH PAID \$ 16.00-
Cash Tender \$ 20.00
Change Due \$ 4.00
GST: 122014491RT0003

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

YELLOW CAB

780.462.3456

GST#

Date:

June 22, 2015

Amount:

25.00

Driver:

Car#:

From:

Downtown

10135-31 Avenue, Edmonton, AB T6N 1C2



Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Taxi, Bus Travel

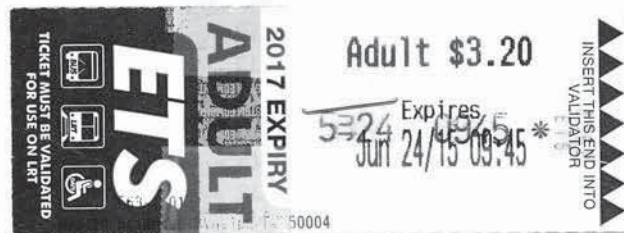
For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:



Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Taxi, Bus Travel

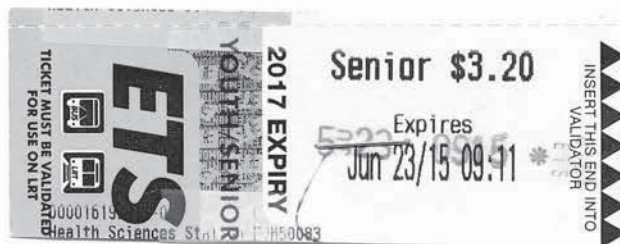
For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Co-op Taxi Line
(780) 425-2525
www.co-optaxi.com

CASH RECEIPT

TERMINAL: 197/66234837
DRIVER : 2251
TRIP #: 6046489
2015/06/22 13:58:38

FARE : \$ 10.00

TOTAL: \$ 10.00

Thank you for choosing
Co-op Taxi

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Co-op Taxi Line

(780) 425-2525

www.co-optaxi.com

Terminal 280/66233601

Driver 4877

15/06/10 07:39:25

CHIP CARD

AID : A0000000041010

TVR : 0000008000

Ref # 0010015680 C

PURCHASE

FARE : \$ 20.00

TOTAL : \$ 20.00

APPROVED - THANK YOU
(01-027)

IMPORTANT: Retain a
copy for your records

Customer Copy

Personal Expense Claim Receipt Description

Member Name: Robert E WannerClaimant Name: Robert E WannerExpense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

116 MCKINLEY ROAD SE
CALGARY, AB T2C 1X2

TERMINAL ID:	314 652 101
VEHICLE ID:	0664
DRIVER ID:	6002
GST ACCOUNT ID:	89733077
TRIP NUMBER:	4592816
PASSENGERS:	1

09/24/2015	
START: 07:00	END: 07:14
DISTANCE: 12.00	RATE: 1

FARE AMOUNT:	\$ 7.62
--------------	---------

TAX AMOUNT:	\$ 0.38
-------------	---------

TOTAL:	\$ 8.00
--------	---------

TIP AMOUNT:	\$ _____
-------------	----------

GRAND TOTAL:	\$ _____
--------------	----------

CASH RECEIPT

THANK YOU
C4034295-9359
WWW.THECHECKERGROUP.COM**CHECKER**
YELLOW
CABS

Government of Alberta

Payable to: Government of Alberta
Please Remit To:
Service Alberta
IMAGIS VENDOR 000259711
4TH FL, 10030-107 ST
EDMONTON AB T5J 3E4

INVOICE

Page: 1 of 1
Invoice: 288LA015936
Invoice Date: December/04/2015
Payment Terms: 30 Days
Period Covered: November/01/2015 - November/30/2015
Due Date: January/03/2016

Bill To:
LEGISLATIVE ASSEMBLY OF ALBERTA

AMOUNT DUE: 3,185.00 CAD

Amount Remitted

Please cut along line and return top portion with payment

For billing questions, please call: 780-427-7411

For a Toll Free Connection, Dial 310-0000

Invoice Number	Invoice Date	Customer Number	Payment Terms	Period Covered	Due Date
288LA015936	December/04/2015		30 Days	November/01/2015 - November/30/2015	January/03/2016

Line	Description	Quantity	UOM	Unit Amt	GST Amt	Extended Amount
Contract No.		Order No.		Order Date		PO Reference No.
1	EVO RENT	1.00	EA	3,185.00	0.00	3,185.00

Subtotal: 3,185.00

Total (GST):

AMOUNT DUE: 3,185.00

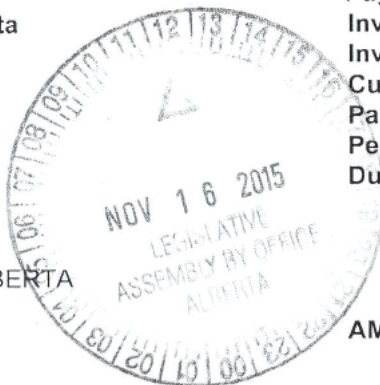
INVOICE

Government of Alberta

Payable to: Government of Alberta
Please Remit To:
Service Alberta
IMAGIS VENDOR 000259711
4TH FL, 10030-107 ST
EDMONTON AB T5J 3E4

Bill To:

LEGISLATIVE ASSEMBLY OF ALBERTA
LEGISLATURE ANNEX
FLR 8-9718 109 ST NW
EDMONTON AB T5K 2B6
Canada



Page: 1 of 1
Invoice: 288LA015893
Invoice Date: November/09/2015
Customer No: [REDACTED]
Payment Terms: 30 Days
Period Covered: October/01/2015 - October/31/2015
Due Date: December/09/2015

AMOUNT DUE: 1,016.12 CAD

Amount Remitted

Please cut along line and return top portion with payment

For billing questions, please call: 780-422-6571
For a Toll Free Connection, Dial 310-0000

Invoice Number	Invoice Date	Customer Number	Payment Terms	Period Covered	Due Date
288LA015893	November/09/2015	[REDACTED]	30 Days	October/01/2015 - October/31/2015	December/09/2015

Line	Description	Quantity	UOM	Unit Amt	GST Amt	Extended Amount
	Contract No.	Order No.	Order Date	PO Reference No.		
1	EVO RENT		1.00 EA			

Subtotal:

Total (GST):

AMOUNT DUE

\$473.00

INVOICE

Government of Alberta

Payable to: Government of Alberta
Please Remit To:
Service Alberta
IMAGIS VENDOR 000259711
4TH FL, 10030-107 ST
EDMONTON AB T5J 3E4

Page: 1 of 1
Invoice: 288LA015817
Invoice Date: September/08/2015

Period Covered: August/01/2015 - August/31/2015
Due Date: October/08/2015

Bill To:
LEGISLATIVE ASSEMBLY OF ALBERTA
LEGISLATURE ANNEX
FLR 8-9718 109 ST NW
EDMONTON AB T5K 2B6
Canada

AMOUNT DUE:

Amount Remitted

Please cut along line and return top portion with payment

For billing questions, please call: 780-422-6571
For a Toll Free Connection, Dial 310-0000

Invoice Number	Invoice Date	Customer Number	Payment Terms	Period Covered	Due Date
288LA015817	September/08/2015		30 Days	August/01/2015 - August/31/2015	October/08/2015

Line	Description	Quantity	UOM	Unit Amt	GST Amt	Extended Amount
Contract No.		Order No.		PO Reference No.		
1	EVO RENT	1.00	EA			

Subtotal:

Total (GST):

473.00

AMOUNT DUE

Government of Alberta

Payable to: Government of Alberta

Please Remit To:

Service Alberta

IMAGIS VENDOR 000259711

4TH FL, 10030-107 ST

EDMONTON AB T5J 3E4

Bill To:

LEGISLATIVE ASSEMBLY OF ALBERTA

LEGISLATURE ANNEX

FLR 8-9718 109 ST NW

EDMONTON AB T5K 2B6

Canada

INVOICE

Page:

1 of 1

Invoice:

288LA015853

Invoice Date:

October/07/2015

Period Covered:

September/01/2015 - September/30/2015

Due Date:

November/06/2015

Amount Remitted

Please cut along line and return top portion with payment

For billing questions, please call: 780-422-7810

For a Toll Free Connection, Dial 310-0000

Invoice Number	Invoice Date	Customer Number	Payment Terms	Period Covered	Due Date
288LA015853	October/07/2015		30 Days	September/01/2015 - September/30/2015	November/06/2015

Line	Description	Quantity	UOM	Unit Amt	GST Amt	Extended Amount
	Contract No.	Order No.	Order Date	PO Reference No.		
1	EVO RENT	1.00	EA			

Subtotal:

Total (GST):

AMOUNT D

473.00



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: Wanner, Robert

Constituency: Medicine Hat

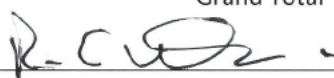
For the Month of: October

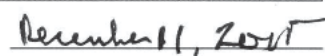
Year: 2015

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	Travel to/from Capital		☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
5			☐	☐	☐			
6	Travel to/from Capital	Edmonton	☐	☒	☒	30.81	1.54	32.35
7	Travel to/from Capital	Calgary	☐	☐	☒	19.76	0.99	20.75
8	Travel to/from Capital	Edmonton	☒	☐	☐	8.76	0.44	9.20
9			☐	☐	☐			
10			☐	☐	☐			
11			☐	☐	☐			
12			☐	☐	☐			
13			☐	☐	☐			
14			☐	☐	☐			
15	Travel to/from Capital	Calgary	☐	☐	☒	19.76	0.99	20.75
16			☐	☐	☐			
17			☐	☐	☐			
18	Travel to/from Capital	Edmonton	☐	☒	☐	11.05	0.55	11.60
19			☐	☐	☐			
20			☐	☐	☐			
21			☐	☐	☐			
22			☐	☐	☐			
23	Travel to/from Capital	Quebec	☐	☒	☒	30.81	1.54	32.35
24	Travel to/from Capital	Edmonton	☒	☒	☒	39.57	1.98	41.55
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29	Travel to/from Capital	Edmonton	☐	☒	☐	11.05	0.55	11.60
30	Travel to/from Capital	Calgary	☐	☒	☐	11.05	0.55	11.60
31	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
Grand Total						\$222.14	\$11.11	\$233.25

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.


Member Signature


Date



Members' Travel Expenses Per-Diems Claim Form

5

D

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: Wanner, Robert

Constituency: Medicine Hat

For the Month of: August

Year: 2015

Employee #: [REDACTED]

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

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.

Member Signature

Sept 30, 2015
Date



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: Wanner, Robert

Constituency: Medicine Hat

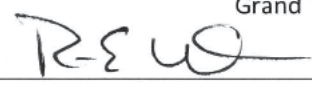
For the Month of: November

Year: 2015

Employee #: [REDACTED]

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


Member Signature

Dec 11, 2015
Date



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: Wanner, Robert

Constituency: Medicine Hat

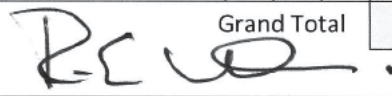
For the Month of: September

Year: 2015

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			☐	☐	☐			
2			☐	☐	☐			
3			☐	☐	☐			
4			☐	☐	☐			
5			☐	☐	☐			
6			☐	☐	☐			
7	Travel to/from Capital	Edmonton	☐	☒	☒	30.81	1.54	32.35
8			☐	☐	☐			
9			☐	☐	☐			
10	Travel to/from Capital	Banff	☐	☐	☒	19.76	0.99	20.75
11			☐	☐	☐			
12			☐	☐	☐			
13	Travel to/from Capital	Edmonton	☐	☒	☒	30.81	1.54	32.35
14			☐	☐	☐			
15			☐	☐	☐			
16			☐	☐	☐			
17			☐	☐	☐			
18			☐	☐	☐			
19			☐	☐	☐			
20			☐	☐	☐			
21	Travel to/from Capital	Edmonton	☐	☐	☒	19.76	0.99	20.75
22			☐	☐	☐			
23	Travel to/from Capital	Calgary	☐	☐	☒	19.76	0.99	20.75
24	Travel to/from Capital	Calgary	☐	☐	☒	19.76	0.99	20.75
25			☐	☐	☐			
26			☐	☐	☐			
27			☐	☐	☐			
28			☐	☐	☐			
29	Travel to/from Capital	Edmonton	☒	☐	☐	8.76	0.44	9.20
30			☐	☐	☐			
31			☐	☐	☐			
Grand Total						\$149.43	\$7.47	\$156.90

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.


Member Signature

December 11, 2015
Date

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert Wanner

Claimant Name: Robert Wanner

Expense Category: Hosting

For hosting, select one:

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

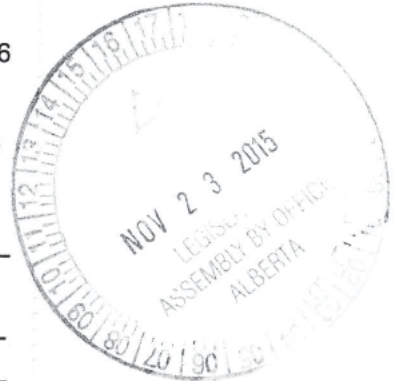
Purpose:

Water for office



1001 Foundry Street S.E.
Medicine Hat, AB T1A 1X6
403-526-3806

Invoice # 32936



Rep BS Date Dec 9/15

Name: Medicine Hat
Constituency Office

OS: F: E:

PO#

Bottles Del: 3 \$ 15-
Empties Ret: 3 \$
Bottle Deposits: \$
Rings of Tokens: \$
Ice Bags: \$
\$
\$
\$
\$
\$
\$
\$
\$
\$

Sub Total \$ 15-

Gst \$

Total Due \$ 15-

Payment \$

Charge ☒ Cheque ☐ Cash ☐

Visa ☐ MC ☐

[]

Expiry 1/

A. Deschamps
Signature

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☒ Group: people in and out of office

Purpose:

Office Use - coffee

SAFeway

Safeway Division Avenue
615 Division Avenue S. Medicine Hat AB
Phone: 403.504.2920
GST# 817093735

Served by: Ana A

Colombian Med KCup \$18.99 C
French Van KCup 6215153790 \$9.19 C
Coffee Mate Lt 5000019845 \$5.99 C
AIR MILES Base Offer
=> 1 AIR MILES
SUBTOTAL \$34.17
TOTAL TAX \$0.00
TOTAL \$34.17
Master Card TENDER \$34.17
Cash CHANGE \$0.00
NUMBER OF ITEMS 3

CLIENT ID 9803
TERMINAL ID 003

INSERTED

** \$ 34.17
RCPT 1643000
RESP 000
TIME 12:26:20
REF # 00000035

TSI EC00

APPROVED

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

Term	Tran	Store	Oper	06/20/15
3	1643	8915	147	12:26:34

Thank you for shopping at Our Store
Come Again Soon

How was your shopping experience?
Please share your thoughts online.
safewaycanada.survey.marketforce.com

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Robert E Wanner

Claimant Name: Robert E Wanner

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☒ Group: people in and out of office

Purpose:

Office Use - coffee



MEDICINE HAT #593

2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8
(403)581-5700

424785 CERTIFIED 43.99

43.99
43.99

COSTCO WHOLESALE #593
2350 BOX SPRINGS BLVD
MEDICINE HAT, AB T1C 0C8

AMOUNT: \$43.99

0593 002 0000000041 0245

IMPORTANT - retain this copy for your record.

*** CARDHOLDER COPY ***

CHANGE .00

TOTAL NUMBER OF ITEMS SOLD - 1
CASHIER: KAREN F REG# 2
01/20/20 18:49 0593 02 0245 41

GST/HST #121476329
SHOP WWW.COSTCO.CA

GST# 121476329RT
THANK YOU - PLEASE COME AGAIN

Personal Expense Claim Receipt Description

Member Name: Robert Wanner

Claimant Name: Robert Wanner

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: _____

Purpose:

Water for office

Icy Mountain Water Co. Ltd.

1001 Foundry Street S.E.
MEDICINE HAT, AB T1A 1X6
Canada

INVOICE

MLA 151920

Invoice No.: 30690
Date: 10/09/2015
Ship Date:
Page: 1
Re: Order No.

Sold to:

MEDICINE HAT CONSTITUENCY OFFICE
537 - 4th Street S.E.
MEDICINE HAT, AB T1A 0K7
CANADA

Ship to:

MEDICINE HAT CONSTITUENCY OFFICE

Business No.: 880423124 RT 0001

Item No.	Unit	Quantity	Description	Tax	Unit Price	Amount		
650	Each	3	Delivered Bottled Water		5.00	15.00		
			GST Exempt					
Shipped By: Tracking Number:					Total Amount	15.00		
Terms: Net 30. Due 10/10/2015.								
Comment: 23								
Sold By:								