LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2017-18

072 - Medicine Hat - Wanner, Robert For Expenses Processed Jan 1 - Mar 31, 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting -\$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$694.76	\$2,176.45
MLA Parking Cap - \$	\$900.00	\$3.81	\$7.61
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			1975 197021 1970
Taxi, Bus Travel - \$		\$260.96	\$1,148.41
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$1,776.00	\$5,328.00
Member Travel (Meal Per Diems) - \$		\$501.20	\$756.06
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$23,160.00
Travel Accommodations Allowance	Street Action and the Total Control of the Control		
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$314.67	\$1,545.34
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		0.0	2.0
Travel by Air, Bus or Train (Unlimited Trips) - NF	52.0	2.0	3.0
Use of a Private Automobile (52 trips per year) - NF	32.0		
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 - 208 OF 241 DE CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

- -

- -

CLIENT NO.

NO DU CLIENT
INVOICE DATE

DATE DE LA FACTURE
INVOICE NO.

NO DE LA FACTURE

01/01/18 0006993645

BFDF290001

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 NAME SUPPLIER LOCATI NOM DU FOURNISSI POINT DE VENT	ON EUR	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
	WANNER						ES LIMITED AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.1	1.04	55.52 55.52	2.78 2.78 2.78	58.30 58.30
					000484237010 12/08/17		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	46.9	.95	42.44 42.44 .47- 41.97	2.06 2.06 2.06	44.50 44.50 .47- 44.03
						FEDERATED COOPERATIVI MEDICINE HAT	ES LIMITEC AB	DUNLEADED REGULAR GASOLINE OST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0	1.14 9.01	9.01 74.72	3.29 .45 3.74 3.74	78.46 78.46
					000481458809 11/17/17	SHELL CANADA INC RED DEER	AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	56.0	1.18	62.86 62.86	3.14 3.14 3.14	66.00 66.00
						CENTEX CHESTERMERE CHESTERMERE	АВ	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	28.8	1.10	31.61 31.61	1.58 1.58 1.58	33.19 33.19
							ES LIMITED AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	48.4	1.24	57.14 57.14	2.86 2.86 2.86	60.00 60.00
					120015104923 09/20/17		AB	LUBRICATE-CHANGE OIL & FILTER GST-HST / TPS-TVH LABOR - LUBRICATE-CHANGE OIL REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0	48.80 61.50	48.80 61.50 110.30	5.52 5.52 5.52	115.82 115.82
BLE871			UNIT TOTAL	/ TOT UNI	ΓE				296.7		434.59	21.68	TVH R104164223

21.68

GST-HST REG. NO / NO ENRG TPS-TVH R104164223

QST ID. NO / NO ID TVQ 1001439118

BLE871

Element Fleet Management Celement

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 209 OF 241 DE CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

- - - - -

BFDF290001

CLIENT NO.

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

NO DE LA FACTURE

01/01/18 0006993645

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 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
	WANNER						UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL					456.27 .47- 455.80
	KDN TOTALS / TOTAUX C 1-72	CODIFICATION	UNITS /	VEHIC	1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	296.7		434.59	21.68	
							BKDN TOTALS / TOTAUX CODIFICA DISCOUNT / RABAIS TOTAL / TOTAL	ATION				456.27 .47- 455.80

Element Fleet Management Celement

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 198 OF 230 DE BFDF290001

CLIENT NO.

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

NO DE LA FACTURE

02/01/18 0007019898

								BKDN TOTALS / TOTAUX CODIFICATION	TION				136.48
	SKDN TOTALS / TOTAUX (01-72	CODIFICATION	UNITS / \	/EHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	121.8		129.98	6.50	
			UNIT TOTAL	. / TOT UNI	TE				121.8		129.98	6.50	136.48
						FEDERATED COOPERA MEDICINE HAT	ATIVES LIMITED AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	63.7	1.13	68.57 68.57	3.43 3.43 3.43	72.00 72.00
	WANNER					FEDERATED COOPERA MEDICINE HAT	ATIVES LIMITED AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.1	1.11	61.41 61.41	3.07 3.07 3.07	64.48 64.48
T NO O. NITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	NO. DE CARTE		ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER N SUPPLIER LOG NOM DU FOURN POINT DE V	CATION IISSEUR	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL MONT TOTAL

_E871 GST-HST REG. NO / NO ENRG TPS-TVH R104164223
QST ID. NO / NO ID TVQ 1001439118

Element Fleet Management Celement

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 205 OF 238 DE CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

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

- - - - -

BFDF290001

CLIENT NO.

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

NO DE LA FACTURE

03/01/18 0007042854

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	NO. DE REFERENCE	SUPPLIER NAM	ION EUR	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
	WANNER					FEDERATED COOPERATIV STRATHMORE	ES LIMITEI AB	O UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	32.7	1.13	35.24 35.24	1.76 1.76 1.76	37.00 37.00
						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	35.9	1.09	37.16 37.16	1.86 1.86 1.86	39.02 39.02
						FEDERATED COOPERATIV MEDICINE HAT	ES LIMITEI AB	O UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	27.6	1.11	29.21	1.46 1.46 1.46	30.67 30.67
			UNIT TOTAL	L / TOT UNI	TE			FUEL OTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	96.2		101.61	5.08	106.69
	KDN TOTALS / TOTAUX (1-72	CODIFICATION	UNITS / \	VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	96.2		101.61	5.08	
								BKDN TOTALS / TOTAUX CODIFICAT	ΓΙΟΝ				106.69

BLE871 GST-HST REG. NO / NO ENRG TPS-TVH R104164223 QST ID. NO / NO ID TVQ 1001439118



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Amex Bank of Canada Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6

Prepared For ROBERT E. WANNER LEGIS ASSEMBLY OF AB

Membership Number

March 18, 2018

7 9-1

Page 1 of 2
New Balance \$

Previous Balance Payments and Credits Research, if any

Statement includes payments and charges received by March 18, 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.

Credit Limit Summary On March 18, 2018 Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

March 8

Payment Received Thank You

New Transactions for ROBERT E. WANNER

Amount \$

March 4

Shell Canada C10626 RED DEER SERVICE STATIONS 30.00

Total New Transactions for ROBERT E. WANNER

Fuel \$28.58 +GST

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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

000133

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ROBERT E. WANNER 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



2060

Member Name: Robert Wanner	
Claimant Name: Robert Wanner	
Expense Category: Member Parking	
For hosting, select one:	
Individual Constituent(s)	
Individual Stakeholder(s)	
Group:	
Purpose:	
Conference Parking - Medicine Hat College	
	\$3.81+GST

Medicine Hat
College

Machine #: 6
Transaction:
Date: FEB/14/18
Time: 06:47 AM
Paid: \$4,00
Ticket Expires:
FEB/14/18
11:59 PM

THIS SIDE UP ON DASH

THIS

The American Express® Corporate Card

Statement of Account

www.americanexpress.ca Amex Bank of Canada Corporate Service Centre POBox7000 Station B Willowdale (Ontario) M2K2R6

Prepared For ROBERT E. WANNER LEGIS ASSEMBLY OF AB

Date January 16, 2018

63.00

Page 1 of 2 New Charges including Delinquency Assessment, if any Previous Balance Payments and Credits New Balance \$ Statement includes payments and charges received by January 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. Total Credit Limit \$ Available Credit Limit \$ Credit Limit Summary On January 16, 2018 Listing of Charges and Credits Amount \$ January 3 Payment Received Thank You CR Amount \$ for ROBERT E. WANNER AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES 63.00 December 11

Taxi, Bus Travel \$60.00 + GST

† Please detach here †

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Total New Transactions for ROBERT E. WANNER



ROBERT E. WANNER 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

New Charges

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Amex Bank of Canada Corporate Service Centre PO Box 7000 Station B Willowdale (Ontario) M2K 2R6

Prepared For ROBERT E. WANNER LEGIS ASSEMBLY OF AB

Manharahia Mumbar Data

Page 1 of 3

Previous Balance Payments and Credits Assessment, if any New Balance \$

Statement includes payments and charges received by February 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.

	it Summary ary 16, 2018	Total Credit Limit \$	Available Credit Limit \$	
Listing of Charges and	Credits			Amount \$
January 29	Payment Received Thank	You		20000
New Transa	ctions for ROBERT E. W	ANNER		Amount \$
January 28	AIRPORT TAXI SERVICE E TAXICABS AND LIMOUSINI			65.00
January 31	GREATER EDMONTON TA TAXICABS AND LIMOUSINI			65.00
February 2	AIRPORT TAXI SERVICE E TAXICABS AND LIMOUSINI			16.00

Taxi, Bus Travel

1 Please detach here 1

\$139.05 + GST

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Your local bank branch

· Automatic banking machines Do Not Enclose Cash



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

www.americanexpress.ca Amex Bank of Canada Corporate Service Centre PO Box 7000 Station B

Willowdale (Ontario) M2K 2R6

Prepared For ROBERT E. WANNER LEGIS ASSEMBLY OF AB

Date March 18, 2018

New Charges including Delinquency

New Balance \$

Page 1 of 2

Previous Balance

Payments and Credits

Assessment, if any

Statement includes payments and charges received by March 18, 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.

Credit Limit Summary On March 18, 2018

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

March 8

Payment Received Thank You

New Transactions for ROBERT E. WANNER

February 22

AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES

65.00

Total New Transactions for ROBERT E. WANNER

Taxi, Bus Travel \$61.91 +GST

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Phone and Internet banking arranged through your financial institution

Your local bank branch

Automatic banking machines Do Not Enclose Čash

000133

† Please detach here †

ROBERT E. WANNER 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



Government of Alberta 🖩

Payable to: Government of Alberta

Please Remit To: Service Alberta

PO BOX 1041 STN MAIN **EDMONTON AB T5J 2M1** RECEIVED

DEC 22 2017

0019070

Page: Invoice: Invoice Date: 1 of 1

288LA016767

December/22/2017

Payment Terms: Period Covered:

Due Date:

30 Days

December/01/2017 - December/31/2017

January/21/2018

Bill To:

LEGISLATIVE ASSEMBLY OF ALBERTA FINANCIAL MANAGEMENT AND ADMINISTRATIVE SERVICES FB4103-9820 107 ST NW **EDMONTON AB T5K 1E7** Canada

FMAS-

AMOUNT DUE:

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
288LA016767	December/22/2017	00300	30 Days	December/01/2017 - December/31/2017	January/21/2018

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	0.00	

Subtotal:

Total (GST):

AMOUNT DUE:

Last Name	First Name		Coding						
WANNER	ROBERT	29	072	320	4030	\$444.00			

Government of Alberta

Payable to: Sovernment of Alberta

Please Remit To:

Service Alberta

PO BOX 1041 STN MAIN **EDMONTON AB T5J 2M1**

Bill To:

LEGISLATIVE ASSEMBLY OF ALBERTA

FINANCIAL MANAGEMENT AND

ADMINISTRATIVE SERVICES FB4103-9820 107 ST NW

EDMONTON AB T5K 1E7

Canada

Page:

1 of 1

Invoice:

288LA016799

Invoice Date: Customer No: February/01/2018

Payment Terms:

30 Days

Period Covered:

January/01/2018 - January/31/2018

Original

Due Date:

March/03/2018

AMOUNT DUE:

Amount Remitted

FMAS-

RECEIVED

FEB 0 2 2018

SERVICES - LAU

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
288LA016799	February/01/2018		30 Days	January/01/2018 - January/31/2018	March/03/2018

Line	Description		Quantity U	OM	Unit Amt	GST Amt	Extended Amoun	
	Contract No.	Order No.	Order Date		PO Refer	ence No.		
1	EVF RENT		1.00 E	Α		0.00		
			Su	ubtotal:			2	
	Total (GST):			MOUNT DU				

Last Name	First Name		Coding			Basic Rent
WANNER	ROBERT	29	072	320	4030	\$444.00
						7

Government of Alberta 🔳

Payable to: Government of Alberta

Please Remit To: Service Alberta

PO BOX 1041 STN MAIN **EDMONTON AB T5J 2M1** SERVICES - LAD

Page: 1 of 1 288LA016815 Invoice: March/01/2018 Invoice Date:

Customer No: Payment Terms:

30 Days

Period Covered:

February/01/2018 - February/28/2018

March/31/2018 Due Date:

Bill To:

LEGISLATIVE ASSEMBLY OF ALBERTA FINANCIAL MANAGEMENT AND ADMINISTRATIVE SERVICES FB4103-9820 107 ST NW

EDMONTON AB T5K 1E7

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

Total (GST):

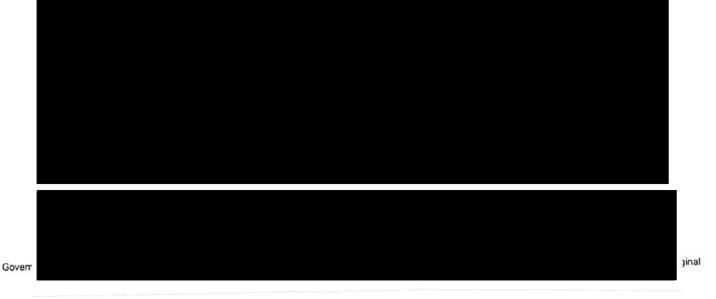
Invoice Number	Invoice Date	Customer Number	Payment Terms	Period Covered	Due Date
288LA016815	March/01/2018		30 Days	February/01/2018 - February/28/2018	March/31/2018

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

Subtotal:

AMOUNT DUE:





Government of Alberta ■

Payable to: Government of Alberta

Please Remit To: Service Alberta

PO BOX 1041 STN MAIN EDMONTON AB T5J 2M1

BIII To: LEGISLATIVE ASSEMBLY OF ALBERTA FINANCIAL MANAGEMENT AND ADMINISTRATIVE SERVICES FB4103-9820 107 ST NW EDMONTON AB T5K 1E7 Canada Page:

1 of 1 288LA016

Invoice: Invoice Date: 288LA016823 March/22/2018

Customer No:

: 30 Days

Payment Terms: Period Covered:

March/01/2018 - March/31/2018

Due Date:

April/21/2018

AMOUNT DUE:	
	and the second
9	

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

			I Samuel Tarms	Period Covered	Due Date
Invoice N	umber Invoice Date	Customer Number	Payment Terms		April/21/2018
288LA01	6823 March/22/2018		30 Days	March/01/2018 - March/31/2018	Aprilezitzete

Line	Description		Quantity	MOU	Unit Amt	GST Amt	Extended Amount
	Contract No.	Order No.	Order Da		PO Refer		
1	EVF RENT		1.00	EA		0.00	
				Subtotal:		_	

Total (GST): AMOUNT DUE:

	First Name		Coding	Basic Rent		
Last Name		20	320	320 4030		
WANNER	ROBERT	29	072	320		
		_				





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 Mo	nth of: June	Year: 2017	E	mplo	yee i	#:		,
Day	Reason for	Meal Purchase Location(s)	- 1	Mea	. 1	Subtotal	G.S.T.	Total
of Month	Travel		В	L	D	30010101	19/11/10/20/20/20/20/20/20/20/20/20/20/20/20/20	
1								
2	Travel to/from Capital	Drove Edm to MH			\boxtimes	19.76	0.99	20.75
3								
4								
5								
6								
. 7	Travel to/from Capital	Fly Edm to MH			\boxtimes	19.76	0.99	20.75
8							4.26	
9								
10								
11								
12								
13								
14								17 14 量
15								
16								
17								
18								
19								
20								
21								
22								
23								4.4
24								
25								
26								
27								
28		,		一				
29								
30								
31								
Members' A	I have met the requirements of s llowances Order, RMSC 1992, c. N	1-1, as amended,	Gran	d To	tal	\$39.52	\$1.98	\$41.50

not previously claimed or been paid for these expenses.

Member Signature



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.

	ame: Wanner, Robert	Year: 2017			yee :			
For the IVIO	onth or: July	Year: 2017	E.	mpic	yee :	# :		
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Mea L	D	Subtotal	G.S.T.	Total
1								
2								
3	Travel to/from Capital	Fly MH to Edm via Clgry			\boxtimes	19.76	0.99	20.75
4	Travel to/from Capital	Fly Edm to MH			\boxtimes	19.76	0.99	20.75
5								
6								
7								
8								
9								. 1.
10								
11								
12								
13								
14								
15	60 km from Perm. Res.	Drive MH to Clgry / Fly Clgry to Wnpg		\boxtimes	×	30.81	1.54	32.35
16								
17								
18								
19								
20							6	
21								
22	60 km from Perm. Res.	Fly Wnpg to Clgry			\boxtimes	19.76	0.99	20.75
23								
24								
25								
26								
27								
28								
29								
30								7,000
31						Villagia Z. A.		
I cortifu that	I have met the requirements of		Gran	4.7.	4.01	\$90.10	\$4.50	\$94.60

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.

R.Z. Wenner Member Signature

Jan 29/18



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	Consti	tuency: Medicine Hat	
For the Month of: August	Year: 2017	Employee #:	
l Daniel Danasan fair		1 841	1 1

For the IVIC	onth of: August	Year: 2017	E	npic	yee	#:		
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Meal L	D	Subtotal	G.S.T.	Total
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17			. -					
18						100 TO THE TOTAL THE TOTAL TO T		
19						•	N. O. R. Link	
20	Travel to/from Capital	Fly MH to Edm via Clgry		Ø		11.05	0.55	11.60
21	Travel to/from Capital	Fly Edm to Lthbr			\boxtimes	19.76	0.99	20.75
22								
23								
24			$\exists \bar{\exists}$	一				
25							713271337	
26					ī			
27					ī			
28								
29				Ī	Ī			
30								
31						F. C.		
124420000000	I have met the requirements of s	ection 7 of the	€ ran	d To	tal	\$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.

R. E. Wan

Jan 23/18

Member Signature



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 Month of: September		Year: 2017	tituency: Medicine Hat Employee #:						
		768 2017							
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Meal L	D	Subtotal	G.S.T.	Total	
1									
2									
3									
4									
5									
6							Section 1		
7									
8									
9									
10									
11									
12									
13									
14	Travel to/from Capital	Fly Edm to MH			\boxtimes	19.76	0.99	20.75	
15									
16									
17									
18									
19									
20									
21									
22									
23									
24						200 e 11			
25									
26									
27	Travel to/from Capital	Drive Edm to MH			\boxtimes	19.76	0.99	20.75	
28									
29									
30									
31				П					

have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature



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 Month of: October		October Year: 2017					Employee #:						
Day	Reason for			Meal									
of Month	Travel	Meal Purchase Location(s)	В	L	D	Subtotal	G.S.T.	Total					
1													
2													
3													
4													
5													
6													
7													
8													
9						7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7							
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18													
19	Travel to/from Capital	Drive Clgry to Edm	×			* 8.76	0.44	9.20					
20	Travel to/from Capital	Drive Edm to MH		\boxtimes		11.05	0.55	11.60					
21													
22													
23													
24													
25													
26													
27													
28	Travel to/from Capital	Drive MH to Edm		×		11.05	0.55	11.60					
29													
30													
31													
certify that	I have met the requirements of s	ection 7 of the	Gran	d To	tal	\$30.86	\$1.54	\$32.4					



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: 2017 Employee #: Day Reason for Meal G.S.T. Meal Purchase Location(s) Subtotal Total of Month Travel L D 2 3 4 5 6 7 8 ... Travel to/from Capital 9 \boxtimes 19.76 20.75 Drive Edm to MH 0.99 10 11 12 Travel to/from Capital \times 13 Drive MH to Edm 11.05 0.55 11.60 14 15 Travel to/from Capital 16 Drive Edm to MH \boxtimes 19.76 0.99 20.75 17 18 19 20 Travel to/from Capital \times 21 Drive Edm to MH 19.76 0.99 20.75 22 23 П 24 25 26 27 28 29 30 **Grand Total** \$70.33 \$3.52 \$73.85 I certify that I have met the requirements of section 7 of the Members' Allowances Order, RMSC 1992, c. M-1, as amended, Jan 29/18

have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature



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 Mo	onth of: December	December Year: 2017					Employee #:						
Day	Reason for			Meal			0.07						
of Month	Travel	Meal Purchase Location(s)	В	L	D	Subtotal	G.S.T.	Total					
1													
2													
3													
4													
5													
6													
7													
8	Travel to/from Capital	Drive Edm to MH		\boxtimes		11.05	0.55	11.60					
9													
10													
11													
12													
13													
14													
15	Travel to/from Capital	Fly Edm to MH	\boxtimes			8.76	0.44	9.20					
16													
17													
18													
19													
20													
21						20 PM B 7 PM PM B 10 PM S 10 PM B 10 PM S 10 P	em pari						
22													
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26													
27													
28													
29													
30													
31													

Member Signature

Date/



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 Month of: January		Year: 2018						
FOR THE INIC	onth Oi: January	rear: 2016		mpic	yee	m.		
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Mea L	I D	Subtotal	G.S.T.	Total
1						TAPPENERSHIPS TO THE STATE OF T	O"ECHAPTE PERSONNEL PRODUCTION PO T THE SELF-ROSE PERSONNEL PRODUCTION PO W. COLDENS AND PRESCRIPTION PO PRODUCTION PRODUCTION PO PRODUCTION PRODUCTION PO PRODUCTION PRODUCTION PRODUCTION PRODUCTION PO PRODUCTION PRODUCTION PRODUCTIO	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2						CONTRACTOR OF THE CONTRACT OF	C - PERIODE SPREAD RESIDENCE SERVICE S	第1.2-17 中の前間電子目は、一点が配 カニ・・・マールは出来ールは、一点が カニ・・・ストールは何から ニールの目がある。 ニールの目がある。 ・ストールのの目がある。 ・ストールのののののののののののののののののののののののののののののののののののの
3 7 27						APPLIES AND THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL THE TOTAL TOTAL TO THE TOTAL		GUESTA CALICA
4						C-PMACE.	PRILET CONTROL OF THE	STATE OF THE STATE
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6						1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
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9		FED 2 - 2310	= 0			2.000000000000000000000000000000000000		
10						A CONTROL OF THE CONT		
11			7 🗖				174. 35,5 154251 174. 35,6 37. 154251 174. 35,66 37. 37.	## 1
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13		(10 (00)				10 00 00 00 00 00 00 00 00 00 00 00 00 0	MESSAGE CRUID TAREST	
14			$\neg \neg$			100 C C C C C C C C C C C C C C C C C C		F 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
15								17.11.00.00 10.00 17.11.00.00 10.00 17.11.00.00 10.00 17.11.00.00 10.00 17.11.00.00 10.00 17.11.00.00 10.00 17.11.00.00 10.00
16	Travel to/from Capital	Drive from MH to Edmonton			\boxtimes	19.76	0.99	20.7
17						- In the second	ABOUNDER A BY TO SHARE A SHARE	
18						2000 M		
19						THE PERSON OF TH	11 10 10 10 10 10 10 10 10 10 10 10 10 1	10000000000000000000000000000000000000
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24						18 18 18 18 18 18 18 18 18 18 18 18 18 1	は、	
25								1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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.

Travel to/from Capital

Travel to/from Capital

26 27 28

29

30

R. E. Warne

7423,2018

0.99

0.99

\$2.96

20.75

20.75

\$62.25

Member Signature

Drive from Edm to MH

Flight MH to Edm via Calgary

Date

19.76

19.76

\$59.29

 \boxtimes

 \boxtimes



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	Constituence	cy: Medicine Hat
For the Month of	: February	Year: 2018	Employee #:

roi the wit	ntiroi: rebruary	Year. 2016		IIPIC	yee	π.		
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Mea L	l D	Subtotal	G.S.T.	Total
1								
2	Travel to/from Capital	Flight from Edm to MH			\boxtimes	19.76	0.99	20.75
3								
4								
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10								
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15						Mark I I I I I I I I I I I I I I I I I I I		
16								
17							72	
18								
19						* 4	4.04.500	
20								
21								
22	Travel to/from Capital	Flight from MH to Edm via Cgy			×	19.76	0.99	20.75
23	Travel to/from Capital	Drive from Edm to MH			\boxtimes	19.76	0.99	20.75
24								
25								
26								
27								
28								100
29								
30								
31								
certify that	I have met the requirements of	section 7 of the	Gran	d To	tal	\$59.29	\$2.96	\$62.25

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.

R.E. US.

March 6/2018

Member Signature

Date



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 Constitue

For the Month of: March Year: 2018 Employee #: Reason for Meal Day Meal Purchase Location(s) Subtotal G.S.T. Total of Month Travel Ll 2 3 Travel to/from Capital 4 \boxtimes Drive from MH to Edmonton 11.05 0.55 11.60 5 6 7 8 Travel to/from Capital 9 \times \times Drive from Edmonton to MH 19.81 0.99 20.80 10 Travel to/from Capital 11 Drive from MH to Edmonton \boxtimes 11.05 0.55 11.60 12 13 14 15 16 17 18 19 20 21 Travel to/from Capital \boxtimes 19.76 22 0.99 20.75 Drive from Edmonton to MH 23 24 25 26 27 28 29 30 31 Grand Total \$61.67 I certify that I have met the requirements of section 7 of the Members' Allowances Order, RMSC 1992, c. M-1, as amended.

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

April 4, 20 E



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: Wanner, Robert	Constitu	uency:	Medicine H	at 12/12/
Employee #:	Date:	4/1/20	017	10
Claim Type: Temporary Residence Accommodation Allow	ance in Edmonton - Cla	aimed A	nnually	STILL STATE OF THE
Temporary Residence Accommodation Allowance in Edmo Maximum of \$23,160 per fiscal year. Fiscal Year: 2017-2018	onton - Claimed Annu	ally	-	THE STATE OF THE S
Have you provided documents evidencing your Temporar Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.	y ✓ Yes		No	College Bar
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00		x 12 =	\$ 23,160.00
Please Note: The Member is responsible for retaining all re	cords which support th	ne annu	al amount id	dentified above.
Claim Payment Authorization (please check)	✓ 12 Monthly Payr			
				the amount specified above for the unt 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.

January 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.

P. E. D-.



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

Constitu	uency:	Medicine H	at 12/12/
Date:	4/1/2	017	To live the second
wance in Edmonton - Cla	aimed A	nnually	STILL STEET
nonton - Claimed Annu	ally	9	THE STATE OF THE S
Yes √		No	Colon Bas El La La
\$ 1,930.00		x 12 =	\$ 23,160.00
ecords which support th	ne annu	al amount id	dentified above.
✓ 12 Monthly Payr	nents		
			the amount specified above for the unt is static for the entire fiscal year.
	Pate: vance in Edmonton - Claimed Annual ry Yes \$ 1,930.00 ecords which support the content of the content o	Date: 4/1/20 vance in Edmonton - Claimed A nonton - Claimed Annually Ty Yes \$ 1,930.00 ecords which support the annually 12 Monthly Payments authorize 12 monthly p	ry Yes No \$ 1,930.00 \$ 1,930.00 \$ 12 = ecords which support the annual amount is lauthorize 12 monthly payments in the support in the su

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

February 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.

P. E. D-.



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

Constituen	ncy: Medicine Ha	t 12/12/12
Date: 4/	/1/2017	TO JULIAN STATE OF THE PARTY OF
llowance in Edmonton - Claim	ned Annually	Sill A K
Edmonton - Claimed Annually	100 00	MA 2017
ch. Yes	☐ No	Collin 10 68 EL TIL
\$ 1,930.00	x 12 =	\$ 23,160.00
all records which support the a	annual amount id	entified above.
		ne amount specified above for the
-	Date: 4	ellowance in Edmonton - Claimed Annually Edmonton - Claimed Annually orary ch.

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

March 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.

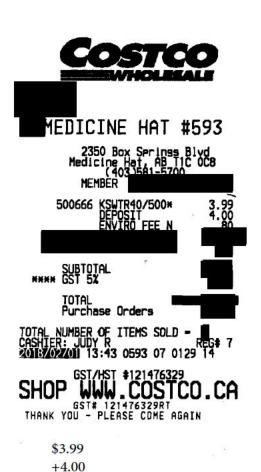
P. E. D-.

Member Name: Robert E Wanner	
Claimant Name: Robert E Wanner	
Expense Category: Hosting	
For hosting, select one:	
☐ Individual Constituent(s)	
Individual Stakeholder(s)	
Group: MH Constituents	
Purpose:	
Meetings with constituents	
	£0 99



MEDICINE HAT #593 2350 Box Springs Blvd Medicine Hat, AB TiC OC8 (403)581-5700 **Seasons Greetings & Happy Holidays** MEMBER 874659 MJB COFFEL 9.99 VF Interac 9.99 CHANGE .00 TOTAL NUMBER OF ITEMS SOLD = 1 CASHIER: SUSAN S CASHIER: SUSAN S GST/HST #121476329 CHANK YOU - PLEASE COME AGAIN

Member Name: Robert Wann	ner				
Claimant Name: Costco (Medicine Hat)					
Expense Category: Hosting					
For hosting, select one:					
☐ Individual Constituent(s)					
☐ Individual Stakeholder(s)					
Group:					
Purpose:					
Water for office					
e					
8					
	\$8.79				



+0.80=\$8.79

Member Name: Robert Wanner				
Claimant Name: Robert Wanner				
Expense Category: Hosting				
For hosting, select one:				
☐ Individual Constituent(s)				
☐ Individual Stakeholder(s)				
Group:				
Purpose:				
Stakeholder meeting				
	\$17.95 +GST			

THE HEARTWOOD CAFE 403 North Railway Street S MEDICINE HAT AB T1A 2Z3 587-2892898

Thu 03/01/2018 9:06 AM

Order ID:#e2	3e5	1d2		
Order Number	:10	4		
ham breakfast	t		\$9.00	'n
muffin			\$3.25	
Coffee		(2	\$5.70	
Size-12oz		• -	,	•
Sub Total:			\$17.95	
Tax:			\$0.89	
Received:			\$22.00	
Change:			\$3.16	
ATT.			43.10	
Txn ID:		#38	666247	
Type:		"50	CASH	
	*		CASH	
Sale				

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 coming and going					
Purpose:					
Constituent and stakeholder meetings					
1					
\$247.94 + GST					



MEDICINE HAT #593

2350 Box Springs Blvd Medicine Hat, AB TIC OC8 (403)581-5700

500666	KSWTR40/500*	3.99 4.00
500666	ENVIRO FEE N KSWTR40/500*	.80 3.99 4.00
500666	ENVIRO FEE N/ KSWTR40/500*/ DEPOSIT	.80 3.99 4.00
500666	EÑVÍRÔ FEE A KSWTR40/500* DEPOSIT	.80 3.99 4.00
1447447 1447447	ENVIRO FEE N TH DECAFE 72 TH DECAFE 72	.80 38.99 38.99

324143 PMRE PROTEIN 19.89 G
1139698 MIND VARIETY 21.99 G
387647 PRANA TRL MX 12.99 G
15071 K.S. COFFEE 11.99
17996 KS DECAF 12.99
15071 K.S. COFFEE 11.99
5288 KS NUTS UNSL 23.99 G
15077 K.S. COFFEE 11.99
34806 TRAIL MIX 12.99 G
5288 KS NUTS UNSL 23.99 G

SUBTOTAL

TOTAL Purchase Orders

TOTAL NUMBER OF ITEMS SOLD = REG# 2 2018/708/08 14:08 0593 02 0102 20

SHOP WWW.COSTCO.CA

GST# 121476329RT THANK YOU - PLEASE COME AGAIN