LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2017-18

058 - Fort McMurray-Conklin - Jean, Brian For Expenses Processed Apr 1 to Jun 30, 2017

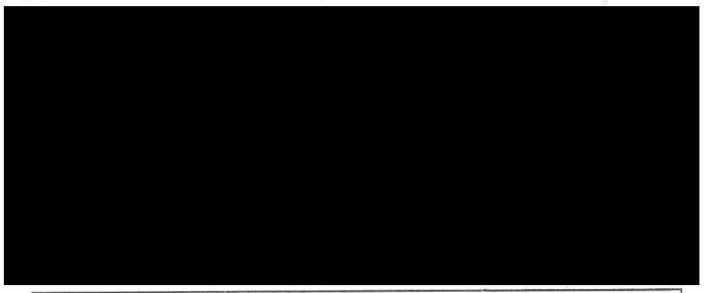
	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		¢1 050 00	¢1 050 00
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ Member Travel (Meal Per Diems) - \$		\$1,052.00	\$1,052.00
Member Traver (Mear Per Diems) - \$			
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$5,790.00
Travel Accommodations Allowance	+ ,	+-,	+=,:=====
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$14.24	\$14.24
Non-Financial Reporting			
Has of Drivets Automobile (42 F sents non-line)			
Use of Private Automobile (43.5 cents per km) Constituency Travel (Kilometres) - NF	80,000.0		
Special Trips (5 trips per year) - NF	80,000.0		
Special Trips (3 trips per year) - Ni			
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		
· · · · · / · · · · · · · · · · · · · ·			
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



Executive Fleet Operations Invoice April 2017



Lease: Operator:	902795 Jean, Brian		Typ Sta		Permane Active	ent	Rate: Billing Method: Remarks: Ch	\$526.00 Monthly anging from annual b	Lease Date: Return Date: oilling to monthly billing	Apr 01 2017	Program:	
Туре	Start	End	Mths	Ref.	No.	CVO Unit	Vendor	Remarks				Amoun
Rent	Apr 01 2017	Apr 30 2017	1.000	L902	795							\$526.00
		-0 1-	-1							Lease 90279	95 Total:	\$526.00
20	058 3.	ZU HE	151							Branch 19WR T	otal:	\$526.00

Date Printed: May 01 2017

Page 40 of 41

INVOICE

Government of Alberta ■

Payable to: Government 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: Invoice: 1 of 1 288LA016573 June/01/2017

Invoice Date: Customer No:

Payment Terms: Period Covered: 30 Days

May/01/2017 - May/31/2017

Due Date:

July/01/2017

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
288LA016573	June/01/2017		30 Days	May/01/2017 - May/31/2017	July/01/2017

Line	Description		Quantity UOM	Unit Amt GST Amt	Extended Amount
	Contract No.	Order No.	Order Date	PO Reference No.	
1	EVF Revenue - Rent				
			· 2		

Total (GST):

First Name	Last Name		Coding	3	Ar	mount
Brian	Jean	29	058	320	4030	526.00





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: Jean, Brian	Constituency: Fort McMurray-Conklin
Employee #:	Date: 4/1/2017
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claimed Annually
Temporary Residence Accommodation Allowance in Maximum of \$23,160 per fiscal year.	n Edmonton - Claimed Annually
Fiscal Year: 2017-2018	
Have you provided documents evidencing your Ten Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please at	□ Na
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00
Please Note: The Member is responsible for retaining	g 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.

APRIL 2017

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





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

Constitue	ency: Fort McMurray-Conklin					
Date: 4/1/2017						
llowance in Edmonton - Clai	med Annually					
Edmonton - Claimed Annual	Ily					
orary ch. ✓ Yes	☐ No					
\$ 1,930.00	x 12 = \$ 23,160.00					
all records which support the	e annual amount identified above.					
12 Monthly Paym	nents onthly payments in the amount specified above for the					
-	Date: Illowance in Edmonton - Clai Idmonton - Claimed Annua Dorary Ch. Yes \$ 1,930.00 Ill records which support the					

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

MAY 2017

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

Member Signature



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: Jean, Brian	Constitue	ency: Fort McMurray-Conklin
Employee #:	Date:	4/1/2017
Claim Type: Temporary Residence Accommodation All	lowance in Edmonton - Clai	imed Annually
Temporary Residence Accommodation Allowance in Education of \$23,160 per fiscal year.	dmonton - Claimed Annua	lly
Fiscal Year: 2017-2018		
Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attac	[] Vas	No x 12 = \$ 23,160.00
Monthly Amount (maximum \$1,930 or less)		AGREEMENT & PROPERTY CONTRACTOR OF THE PROPERTY OF THE PROPERT
Please Note: The Member is responsible for retaining a	ii records which support th	e annual amount identified above.
Claim Payment Authorization (please check)	✓ 12 Monthly Paym I authorize 12 mo entire fiscal year.	nents onthly payments in the amount specified above for the . 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.

JUNE 2017

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





COST CENTRE BILLING REPORT

An Office pepor., Inc. Company une société d'Office papor., Inc

REQUISITION REPORT

SOLD TO ACCOUNT NO.

AB LEGISLATIVE ASSEMBLY (ML FINANCIAL MGMT & ADMIN SERV 9820 107 ST NW 4TH FLR

EDMONTON, AB T5K 1E7

G.S.T.

R894032192

Q.S.T

1001640701TQ0009

PERIOD ENDING ACCT MGR NO.

05/31/2017

INVOICE NO. COST CENTRE L012147

SHIP TO ACCOUNT NO.

ALTA LEGISLATIVE ASSEMBLY FORT MCMURRAY CONKLIN 102-9912 FRANKLIN AVE FORT MCMURRAY, AB T9H 2K4

SHIP

E/O

UM PRODUCTNO.

DESCRIPTION

REGULAR

DISCOUNT

NET AMOUNT TX

REQ NO. G305782

DATE 05/23/2017 ATTENTION Fort McMurray Conkli

P.O.# MLA161886

GAT ORDER NO 591874-00

83-21717 K-CUP LAURA SECORD HOT CHOCO CONTRACT 14.24 .