## LEGISLATIVE ASSEMBLY OF ALBERTA

Member EDR 2018-19

054 - Chestermere-Rocky View - Aheer, Leela For Expenses Processed July 1 - Sep 30 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation Fuel and Minor Maintenance - \$ MLA Parking Cap - \$ Other Travel - Parking - \$ Member Travel (overnight stay in constituency) - \$ Taxi, Bus Travel - \$ Vehicle Leace (Pontal (Edmonton or Calgan (uplicated)) - \$	\$900.00	\$1,053.30	\$2,963.41
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ Member Travel (Meal Per Diems) - \$		\$602.38	\$998.14
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max) Travel Accommodations Allowance	\$23,160.00	\$11,580.00	\$11,580.00
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other Hosting - \$ Event Tickets Disclosable - \$ Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km) Constituency Travel MLA (KM) - NF Constituency Travel Staff (KM) - NF Total Constituency Travel (KM) - NF	80,000.00	4,078.00	4,680.00
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	4.0	8.5
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
DETA LS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-54-L AHEER

BFDF290001

CLIENT NO.

NO DU CLIENT

NVOICE DATE

DATE DE LA FACTURE

NVOICE NO.

NO DE LA FACTURE

08/01/18 0007161443

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 DATE DATE DE LA TRANS.	SUPPLER NAI SUPPLER LOCA NOM DU FOURNIS POINT DE VEN	TION  SEUR	CHARGE DESCRIPTION DESCR PTION DES FRAIS	QTY  QTE	UNIT COST	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	AHEER				000504097091 07/01/18	PETRO CANADA CALGARY	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	34.3	1.46	47.62 47.62	2.38 2.38 2.38	50.00 50.00
						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	68.5	1.39	95.17 95.17	4.76 4.76 4.76	99.93 99.93
						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	66.7	1.40	93.42 93.42	4.67 4.67 4.67	98.09 98.09
						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.1	1.28	83.02 83.02	4.15 4.15 4.15	87.17 87.17
						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	37.1	1.28	47.75 47.75	2.39 2.39 2.39	50.14 50.14
			UNIT TOTAL	L / TOT UNI	ITE			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	271.8		366.98	18.35	385.33
	KDN TOTALS / TOTAUX ( 1-54	CODIFICATION	UNITS / \	VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	271.8		366.98	18.35	
								BKDN TOTALS / TOTAUX COD FICAT	ΓΙΟΝ				385.33

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

# Element Fleet Management

FLEET MANAGEMENT SERVICES DETAIL
DETA LS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

CLIENT NO.

NO DU CLIENT

NVOICE DATE

DATE DE LA FACTURE

NVOICE NO.

NO DE LA FACTURE

09/01/18 0007184348

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	KM AUTHORIZE 	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLER NAM SUPPLER LOCAT NOM DU FOURNISS POINT DE VEN'	TION  SEUR	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
	AHEER				000506730643 08/11/18	SHELL CANADA INC CALGARY	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	66.4	1.42	89.71 89.71	4.49 4.49 4.49	94.20 94.20
					000505767416 07/31/18	SHELL CANADA INC CALGARY	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH MISCELLANEOUS REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.5 1.0-	1.53 2.62-	95.44 2.62- 92.82	4.77 4.77 4.77	97.59 97.59
					000505037712 07/23/18	SHELL CANADA INC CALGARY	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	67.9	1.42	91.69 91.69	4.58 4.58 4.58	96.27 96.27
						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	66.6	1.36	90.70	4.54 4.54 4.54	95.24 95.24
						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	52.7	1.41	74.30 74.30	3.71 3.71 3.71	78.01 78.01
					000507325727 07/07/18	IMPERIAL OIL CALGARY	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.6	1.55	57.14 57.14	2.86 2.86 2.86	60.00 60.00
						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	68.5	1.44	98.48 98.48	4.92 4.92 4.92	103.40 103.40
BLE871						CENTEX CHESTERMERE CHESTERMERE	AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH UNLEADED REGULAR GASOLINE REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF **	67.6	1.35	91.48	4.57	96.05 TVH R104164223

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

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## Element Fleet Management Celement

FLEET MANAGEMENT SERVICES DETAIL
DETA LS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-54-L AHEER

CLIENT NO.

NO DU CLIENT

NVOICE DATE

DATE DE LA FACTURE

NVOICE NO.

NO DE LA FACTURE 09/01/18

BFDF290001

0007184348

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	SUPPLER NAME SUPPLER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	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
	AHEER						TOTAL / TOTAL			91.48	4.57	96.05
			UNIT TOTAL	_ / TOT UNI	ITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	494.0		686.32	34.44	720.76
	KDN TOTALS / TOTAUX ( 11-54	CODIFICATION	UNITS / \	/EHIC	1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	494.0		686.32	34.44	
							BKDN TOTALS / TOTAUX COD FIC	ATION				720.76

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



## 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:	Aheer, Leela	Constituence	y: Chestermere-Rock	v View

For the Mo	onth of: May	Year: 2018	Year: 2018 Employ				yee #:					
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Meal	D	Subtotal	G.S.T.	Total				
1	Travel to/from Capital	Edmonton			$\boxtimes$	39.57	1.98	41.55				
2	Travel to/from Capital	Edmonton	$\boxtimes$		$\boxtimes$	28.52	1.43	29.95				
3	Travel to/from Capital	Edmonton	$\boxtimes$			19.81	0.99	20.80				
4	60 km from Perm. Res.	Red Deer			$\boxtimes$	19.76	0.99	20.75				
5												
6												
7	Travel to/from Capital	Edmonton	$\boxtimes$	$\boxtimes$		19.81	0.99	20.80				
8	Travel to/from Capital	Edmonton	$\boxtimes$	$\boxtimes$		19.81	0.99	20.80				
9	Travel to/from Capital	Edmonton	$\boxtimes$			39.57	1.98	41.55				
10	Travel to/from Capital	Edmonton				19.81	0.99	20.80				
11		70.0						110000 100				
12												
13	Travel to/from Capital	Edmonton				19.76	0.99	20.75				
14	Travel to/from Capital	Edmonton	$\boxtimes$			39.57	1.98	41.55				
15	Travel to/from Capital	Edmonton	$\boxtimes$			39.57	1.98	41.55				
16	Travel to/from Capital	Edmonton	$\boxtimes$		$\boxtimes$	28.52	1.43	29.95				
17	Travel to/from Capital	Edmonton	$\boxtimes$			19.81	0.99	20.80				
18												
19						2000.0000		5.8				
20												
21		100					19-11-1-11-11-11-11-11-11-11-11-11-11-11					
22								50				
23		25 1 Sec. 200										
24												
25						y 20 00000						
26												
27	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.75				
28	Travel to/from Capital	Edmonton	$\boxtimes$		$\boxtimes$	39.57	1.98	41.55				
29	Travel to/from Capital	Edmonton				19.81	0.99	20.80				
30	Travel to/from Capital	Edmonton	$\boxtimes$			39.57	1.98	41.55				
31	Travel to/from Capital	Edmonton	$\boxtimes$			19.81	0.99	20.80				
	I have met the requirements of Ilowances Order, RMSC 1992, c.		Gran	d Tota	al	\$492.43	\$24.62	\$517.05				
IVICIIIDEIS A	HUMUNICO DIUCI, NIVIOL 1332. C.	W A, as alliellueu,						4.5				

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

July 16.2018

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 N	ame: Aheer, Leela	Consti	tuency:	Che	ster	mere-Rocky Vi	ew	
For the Mo	onth of: June	Year: 2018	E	nplo	yee	#:		
Day of Month	Reason for Travel	Meal Purchase Location(s)	В	Mea L	D	Subtotal	G.S.T.	Total
1		300						
2								
3	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.75
4	Travel to/from Capital	Edmonton			$\boxtimes$	39.57	1.98	41.55
5	Travel to/from Capital	Edmonton		X	$\boxtimes$	39.57	1.98	41.55
6								
7								700 NO
8								hin d
9		360						
10								Course
11		3000000						
12								
13		1889 18						
14								
15								
16								
17								
18								
19						0.11.50.		
20								
21								
22								
23		200000000000000000000000000000000000000						
24	60 km from Perm. Res.	Redwood Meadows Alberta				11.05	0.55	11.60
25								
26								
27								
28								
29								
30								¥.
31		2 200				essin 9		
	t I have met the requirements of		Gran	d To	tal	\$109.95	\$5.50	\$115.45
	Allowances Order, RMSC 1992, or ed meal expenses on the dates						Tuly 16.	18
	sly claimed or been paid for the					Da		



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

Constituency: Chestermere-Rocky View						
Date:	5/2/2018					
Allowance in Edmonton - (	laimed Annually					
Edmonton - Claimed Ann	ually					
ach. ✓ Yes	No					
\$ 1,930.00	<b>x 12</b> = \$ 23,160.00	* = =				
all records which support	the annual amount identified above.					
✓ 12 Monthly Pa	ments					
	Date:  Allowance in Edmonton - Co  Edmonton - Claimed Anno  porary  ach. Yes  \$ 1,930.00  all records which support    12 Monthly Pay   1 authorize 12 m	Date: 5/2/2018  Allowance in Edmonton - Claimed Annually  Edmonton - Claimed Annually  porary  ach.  Yes  No				

**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 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.

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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: Aheer, Leela	Constituency: Chestermere-Rocky View						
Employee #:	Date: 5/2/2018						
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claimed Annually						
Temporary Residence Accommodation Allowance in Maximum of \$23,160 per fiscal year.	Edmonton - Claimed Annually						
Fiscal Year: 2018-2019							
Have you provided documents evidencing your Tem Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please att	ach. ✓ Yes No	3					
Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00						
Please Note: The Member is responsible for retaining	all records which support the annual amount identified above.						
Claim Payment Authorization (please check)	✓ 12 Monthly Payments I authorize 12 monthly payments in the amount specific entire fiscal year. This monthly amount is static for 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 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.

Sh



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	ncy: Chestermere-Rocky View	
Date:	5/2/2018	
llowance in Edmonton - Clair	ned Annually	
Edmonton - Claimed Annual	у	
orary ch. ✓ Yes	□ No	
<b>\$</b> 1,930.00	<b>x 12</b> = \$ 23,160.00	38
ıll records which support the	annual amount identified above.	
	illowance in Edmonton - Clair idmonton - Claimed Annuall orary ch.  Yes \$ 1,930.00	idmonton - Claimed Annually  cdmonton - Claimed Annually  corary  ch. Yes No

**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 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.

Sh



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: Aheer, Leela	Constitue	ency: Chesterme	re-Rocky View	
Employee #:	Date:	5/2/2018		
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Clai	med Annually		
Temporary Residence Accommodation Allowance in	n Edmonton - Claimed Annual	ly		
Maximum of \$23,160 per fiscal year.				
Fiscal Year: 2018-2019				
Certificate of Title (Own) to FMAS? If not, please at Monthly Amount (maximum \$1,930 or less)	tach. ✓ Yes \$ 1,930.00	No × 12 =	<b>\$</b> 23,160.00	×
Please Note: The Member is responsible for retaining		AVECTORISM	COMPANY TO A STATE OF THE PARTY	
Claim Payment Authorization (please check)	12 Monthly Payme			
		71. 71. 12.	the amount specific ount is static for the	
Discon Nation The Member would add to the Classic to	witing of any shanges to their	normanent or to-	anorary residence s	at the time it
Please Note: The Member must advise the Clerk in v	virtuing of any changes to their	permanent or ten	iporary residence a	it the time it

occurs.

**JULY 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.



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	ncy: Chestermere-Rocky View	
Date:	5/2/2018	
llowance in Edmonton - Clair	ned Annually	
Edmonton - Claimed Annual	у	
orary ch. ✓ Yes	□ No	
<b>\$</b> 1,930.00	<b>x 12</b> = \$ 23,160.00	38
ıll records which support the	annual amount identified above.	
	illowance in Edmonton - Clair idmonton - Claimed Annuall orary ch.  Yes \$ 1,930.00	idmonton - Claimed Annually  cdmonton - Claimed Annually  corary  ch. Yes No

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

#### **AUGUST 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.

Sh



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: Aheer, Leela	Constituency: Chestermere-Rocky View		
Employee #:	Date: 5/	/2/2018	
Claim Type: Temporary Residence Accommodation	Allowance in Edmonton - Claim	ed Annually	
Temporary Residence Accommodation Allowance in	n Edmonton - Claimed Annually		
Maximum of \$23,160 per fiscal year.			
Fiscal Year: 2018-2019			
Certificate of Title (Own) to FMAS? If not, please at: Monthly Amount (maximum \$1,930 or less)	\$ 1,930.00	No x 12 = \$ 23,160.00	29
Please Note: The Member is responsible for retaining		CHECKET LITE TO THE PROPERTY OF THE PROPERTY O	
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.		
		CH.	- 440

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

September 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.

the