

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2017-18
063 - Highwood - Anderson, Wayne
For Expenses Processed Oct 1 - Dec 31, 2017

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$1,236.76	\$3,676.18
MLA Parking Cap - \$	\$900.00		\$99.04
Other Travel - Parking - \$		\$385.34	\$385.34
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$391.89	\$391.89
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$1,134.62	\$2,827.81
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,085.00	\$15,753.99
Travel Accommodations Allowance			\$159.61
Travel Accommodations Allowance (days; 10 max) - NF	10.0		1.0
Other			
Hosting - \$		\$580.73	\$862.71
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000.0	13,325.0	26,191.0
Special Trips (5 trips per year) - NF	5.0		2.0
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		4.0	4.0
Use of a Private Automobile (52 trips per year) - NF	52.0	3.0	13.0
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



BDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS SERVICES DE GESTION DE PARC

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DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-63-W ANDERSON
- -
- -
- -
- -

CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
NVOICE DATE 10/01/17
DATE DE LA FACTURE
NVOICE NO. 0006922798
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCR PTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
[REDACTED]	ANDERSON	[REDACTED]	[REDACTED]	[REDACTED]	000474722539 09/17/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	57.6 1.0	1.15 13.99	62.97 13.99	3.15 3.85 .70 3.85	80.81 80.81
					000474043174 09/11/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	63.0 1.0	1.16 13.99	69.52 13.99	3.48 4.18 .70 4.18	87.69 87.69
					000473380425 09/02/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	78.3	1.11	82.71	4.14 4.14 4.14	86.85 86.85
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	198.9		243.18	12.17	255.35
	BKDN TOTALS / TOTAUX CODIFICATION 01-63		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	198.9		243.18	12.17	
							BKDN TOTALS / TOTAUX COD FICATION					255.35

Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI 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-63-W ANDERSON
- -
- -
- -
- -

CLIENT NO.
NO DU CLIENT
NVOICE DATE 11/01/17
DATE DE LA FACTURE
NVOICE NO. 0006948261
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCR PTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	ANDERSON				000477521572 10/12/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.8 1.0	1.21 13.99	69.97 13.99	3.50 4.20 .70 4.20	88.16 88.16
					000477089557 10/06/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	83.9 1.0	1.17 13.99	93.35 13.99	4.67 .70 5.37	112.71 112.71
					000475606435 09/23/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	78.1 1.0	1.15 13.99	85.43 13.99	4.27 .70 4.97	104.39 104.39
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	222.8		290.72	14.54	305.26
	BKDN TOTALS / TOTAUX CODIFICATION 01-63				1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	222.8		290.72	14.54	
							BKDN TOTALS / TOTAUX CODIFICATION					305.26

Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 201 OF 239
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-63-W ANDERSON
- -
- -
- -
- -

CLIENT NO. [REDACTED]
NO DU CLIENT [REDACTED]
NVOICE DATE 12/01/17
DATE DE LA FACTURE
NVOICE NO. 0006971879
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
[REDACTED]	ANDERSON	[REDACTED]	[REDACTED]	[REDACTED]	000480529357 11/12/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	78.1 1.0	1.29 13.99	95.92 13.99	4.80 5.50 7.0 5.50 115.41 115.41	
					000481189171 11/01/17	IMPERIAL OIL EDMONTON AB	AVIATION TURBO B GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	70.9	1.09	73.60	3.68 3.68 77.28 77.28	
					000478976165 10/26/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	68.2 1.0	1.23 13.99	79.79 13.99	3.99 7.0 4.69 98.47 98.47	
					000478311811 10/19/17	SHELL CANADA INC OKOTOKS AB	REGULAR DIESEL GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	80.8 1.0	1.21 13.99	93.05 13.99	4.65 7.0 5.35 112.39 112.39	
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	298.0		384.33	19.22	403.55
	BKDN TOTALS / TOTAUX CODIFICATION 01-63				UNITS / VEHIC 1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	298.0		384.33	19.22	
							BKDN TOTALS / TOTAUX CODIFICATION					403.55

Aviation Turbo is actually vehicle fuel

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

Diesel Exhaust Fluid (2)
 Antifreeze

 \$18.75

RA. ACTION RECORD

NAPA OKOTOKS (2011)
 82 FISHER PLACE T1S1B2
 OKOTOKS AB
 21295659
 QC2129565902

SALE

08-11-2017 12:49:28

Account Chequing Card Type DP
 A0000002771010
 Interac

Trace # 230038
 Inv. # 8389

RRN 001124038

Sale \$19.69

TOTAL \$19.69



STORE	050001159	Time: 12:49	Invoice Number 159-726530
	NAPA OKOTOKS	Date: 08/11/2017	
	82 FISHER PLACE	Page: 1/1	
	PO BOX 1148		
	OKOTOKS, AB T1S 1B2		
	(403) 938-7157		
	GST #: 863381265		

SOLD TO	0	Employee: 5, Chad	
	Valued Customer	Sales Rep: 0, Salesman	
	Thank You for Your Patronage!	Accounting Day: 9	
	Okotoks, AB		

Part Number	Line	Description	Quantity	Price	Net	Total	
71175	PRN	PREMIX A F ALL MAKES	1.00	17.19	15.0200	15.02	T
49302	RCO	NAPA W W FLUID -40	1.00	3.99	3.7300	3.73	T

Delivery: Attention: Tax Exemption: PO#: Terms: SVC CHG	Subtotal 18.75 GST 863381265 5.0000% 0.94 Total 19.69 PINDebit 19.69
---	--

Customer Signature
 ALL GOODS RETURNED MUST BE ACCOMPANIED BY THIS INVOICE
 I agree to pay total amount according to card issuer agreement.
 Returns may be subject to a restocking fee.
 Have a good weekend!

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Diesel Exhaust Fluid (2)
Antifreeze

\$14.91

TRANSACTION RECORD

NAPA OKOTOKS (2011)
82 FISHER PLACE T1S1B2
OKOTOKS AB
21295659
QC2129565902

SALE

09-26-2017

10:38:45

Account Chequing Card Type DP
A0000002771010
Interac

Trace # 610016
Inv. # 10969

RRN 001162016

Sale \$15.66

TOTAL \$15.66



050001159
NAPA OKOTOKS
82 FISHER PLACE
PO BOX 1148
OKOTOKS, AB T1S 1B2
(403) 938-7157
GST #: 863381265

Time: 10:38

Invoice Number . 159-733364

Date: 09/26/2017

Page: 1/1

SOLD TO

0
Valued Customer
Thank You for Your Patronage!
Okotoks, AB

Employee: 3 , Krista
Sales Rep: 0 , Salesman
Accounting Day: 21

Part Number	Line	Description	Quantity	Price	Net	Total	
55-125AIRX48	RCO	DIESEL EXHAUST FLUID	1.00	17.79	14.9100	14.91	T

Delivery:
Attention:
Tax Exemption:
PO#:
Terms: SVC CHG

Subtotal 14.91
GST 863381265 5.0000% 0.75

Total 15.66

PINDebit 15.66

Customer Signature

ALL GOODS RETURNED MUST BE ACCOMPANIED BY THIS INVOICE
I agree to pay total amount
according to card issuer agreement.

Returns must have a
receipt. May be subject
to a restocking fee.

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Diesel Exhaust Fluid
Windshield Fluid

\$ 23.27

TRANSACTION RECORD

NAPA OKOTOKS (2011)
82 FISHER PLACE T1S1B2
OKOTOKS AB
21295659
QC2129565902

SALE

11-10-2017 12:57:10
Acct [REDACTED] C
Account Chequing Card Type DP
A0000002771010
Interac

Trace # 990038
Inv. # 13384
Auth # [REDACTED] RRN 001200037

Sale \$24.43
TOTAL \$24.43

+++++
00 APPROVED-THANK YOU
+++++

Retain this copy for your
records
Customer copy



050001159
NAPA OKOTOKS
82 FISHER PLACE
PO BOX 1148
OKOTOKS, AB T1S 1B2
(403) 938-7157
GST #: 863381265

Date: 11/10/2017

Page: 1/1

Invoice Number 159-739963

SOLD TO

0
Valued Customer
Thank You for Your Patronage!
Okotoks, AB

Employee: 1 , Randy
Sales Rep: 0 , Salesman
Accounting Day: 9

Part Number	Line	Description	Quantity	Price	Net	Total	
55-12SAIRX48	RCO	DIESEL EXHAUST FLUID	1.00	17.79	16.2900	16.29	T
49302	RCO	NAPA W W FLUID -40	2.00	3.99	3.4900	6.98	T

Delivery:
Attention:
Tax Exemption:
PO#:
Terms: SVC CHG

Subtotal 23.27
GST 863381265 5.0000% 1.16

Total 24.43

Discover 24.43

Customer Signature

ALL GOODS RETURNED MUST BE ACCOMPANIED BY THIS INVOICE
I agree to pay total amount
according to card issuer agreement.

Returns may be subject
to a restocking fee.
Have a good weekend!

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Oil change
\$261.60



12 Southridge Drive, Okotoks, AB T1S 1N1
Phone: 403-938-8632 • Fax: 403-938-8635
Toll Free: 1-877-938-3636
www.southridgechrysler.com
service@southridgechrysler.com

Promised: 11/20/2017 1:00:00 PM



Page 1

Fleet:

Tag #:

*** Service Invoice Customer Copy ***

SO #: 785193

Customer No:

WAYNE
ANDERSON

Advisor: DUSTIN

Invoice Date: 11/20/2017 Term: CASH

Request/Concern

			Type	CSR#	TU	Amount
1	MAINT1D	MAINTENANCE DIESEL SERVICE PACKAGE #1				
	MAINT1D	MAINTENANCE DIESEL SERVICE PACKAGE #1	C	9628	0.60	54.95
1	68229402AA	OIL FILTER	CRO			44.00
1	ECO003	ECO FILTER ENVIRO FEE (UNDER 203MM)	CRO			0.55
2	68171006CB	ROTELLA T6 5W-40 OIL	CRO			160.60
2	ECO005	5 LITRE OIL JUG	CRO			1.50

Technician 9629 BILL

Cause: lof

Correction: oil and filter changed, (diesel), top up washer fluid a/f-50.
tire psi 35, air filter ok, note needs tire rotation

Request Total

261.60 \$
261.60

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

(DATE)

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to undertake responsibility for any liability in connection with the sale of this item/items.

Customer Signature _____ Date _____



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
WAYNE ANDERSON
LEGIS ASSEMBLY OF AB

Membership Number

November 16, 2017

Date

Page 1 of 3

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

Statement includes payments and charges received by November 16, 2017

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.

0976

Credit Limit Summary
On November 16, 2017

Total Credit Limit \$

Available Credit Limit \$

New Transactions for WAYNE ANDERSON

Amount \$

November 9

CALGARY AIRPORT EXIT CALGARY
GOVERNMENT SERVICES

Other Travel - Parking = \$119.95

125.95

† Please detach here †

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash



WAYNE ANDERSON
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

000134

Membership Number

Amount Due \$

Amount Paid \$

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
WAYNE ANDERSON
LEGIS ASSEMBLY OF AB

Membership Number

Date
December 16, 2017

Page 1 of 3

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

Statement includes payments and charges received by December 16, 2017

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 December 16, 2017

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

New Transactions for WAYNE ANDERSON

Amount \$

November 17

CALGARY AIRPORT EXIT CALGARY
GOVERNMENT SERVICES

125.95

↑ Please detach here ↑

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash

000131



WAYNE ANDERSON
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

Membership Number

Amount Due \$

Amount Paid \$

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

Date: December 16, 2017

Page 2 of 3

New Transactions for WAYNE ANDERSON Continued

Amount \$

November 30	CALGARY AIRPORT EXIT CALGARY GOVERNMENT SERVICES	125.95
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Other Travel-Parking - \$239.91

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking at the Airport Hotel for ALSC Luncheon

Other Travel - Parking

\$25.48

RECEIPT
GST NO. R22556194

TKT NO:90080193
EXIT No. A10
IN: 10/17/17 11:50
OUT: 10/17/17 13:42
DURATION: 0 01: 52
PAID: \$ 26.75
(GST INCLUDED)
VISA

REF. 64

THANK YOU FOR
YOUR VISIT

 FlyYYC

YYC CALGARY
INTERNATIONAL
AIRPORT



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
WAYNE ANDERSON
LEGIS ASSEMBLY OF AB

Membership Number

Date
November 16, 2017



Page 1 of 3

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

Statement includes payments and charges received by November 16, 2017

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.

0976

Credit Limit Summary
On November 16, 2017

Total Credit Limit \$

Available Credit Limit \$

New Transactions for WAYNE ANDERSON

Amount \$

November 13	UBER *47WUA HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	10.27
November 13	UBER *BKLGD HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	11.15
November 13	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES		55.00
November 14	UBER *EAHP5 HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	10.15

↑ Please detach here ↑

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash



WAYNE ANDERSON
LEGIS ASSEMBLY OF AB
4TH FLR 9820 107 ST
EDMONTON AB
T5K 1E9

000134

Membership Number

	Amount Due \$	Amount Paid \$

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

Date: November 16, 2017

Page 2 of 3

New Transactions for WAYNE ANDERSON Continued

Amount \$

Card XXXX-XXXXX3-41009

November 14	UBER *5DU34 HELP.UBER.COM CA TAXICABS AND LIMOUSINES	10.16
November 16	UBER *TRIP RQQWR HELP.UBER.COM CA TAXICABS AND LIMOUSINES	8.76
November 16	UBER *TRIP O4H73 HELP.UBER.COM CA TAXICABS AND LIMOUSINES	9.21

Total New Transactions for WAYNE ANDERSON

Taxi, Bus Travel = \$109.24

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Airport to Edmonton Residence
Uber in Edmonton

\$52.38

GREATER EDMONTON TAXI
SERVICE
10135 31 AVE NW
EDMONTON AB

CARD [REDACTED]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2017/11/05
TIME 5596 14:21:42
INVOICE # 438402
RECEIPT NUMBER
C85002295-001-001-614-0

PURCHASE
TOTAL

\$55.00

Interac
A0000002771010
5D5C505CF70D5D58
8080008000-6800
C680A9F5D2B5BC81
8080008000-7800

APPROVED

00-001

THANK YOU

CARDHOLDER COPY

CAPITAL 780.423.2425
24.7 TAXI 780.442.4444
EDMTAXI.COM
GST 100403070

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

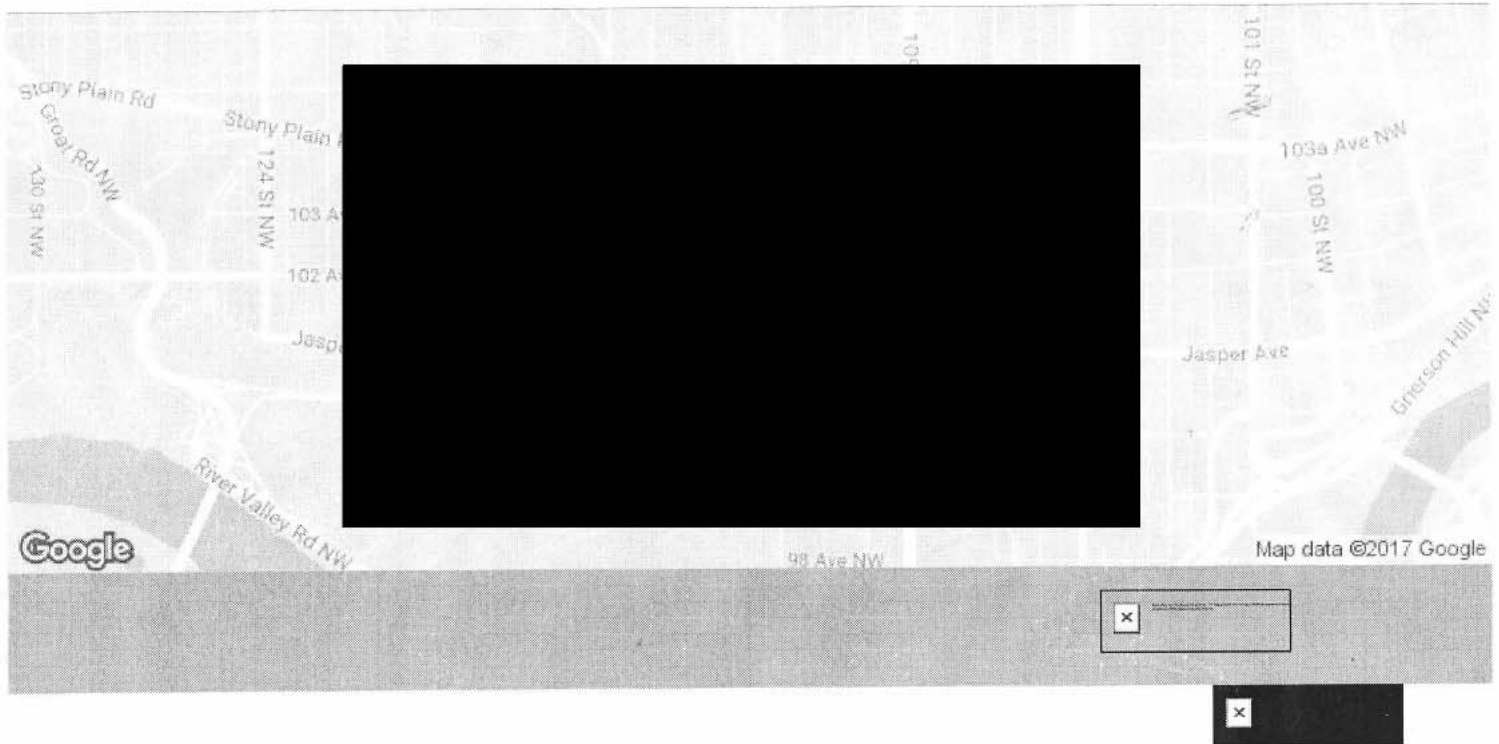
Airport to Edmonton Residence
Uber in Edmonton

\$10.31

Wayne Anderson

expense.

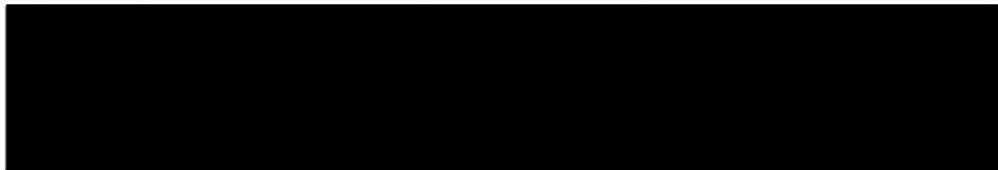
From: Uber Receipts <uber.canada@uber.com>
Sent: Sunday, November 5, 2017 2:58 PM
To: Wayne Anderson
Subject: Your Sunday afternoon trip with Uber



\$10.31

Thanks for choosing Uber, Wayne

November 5, 2017 | uberX



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

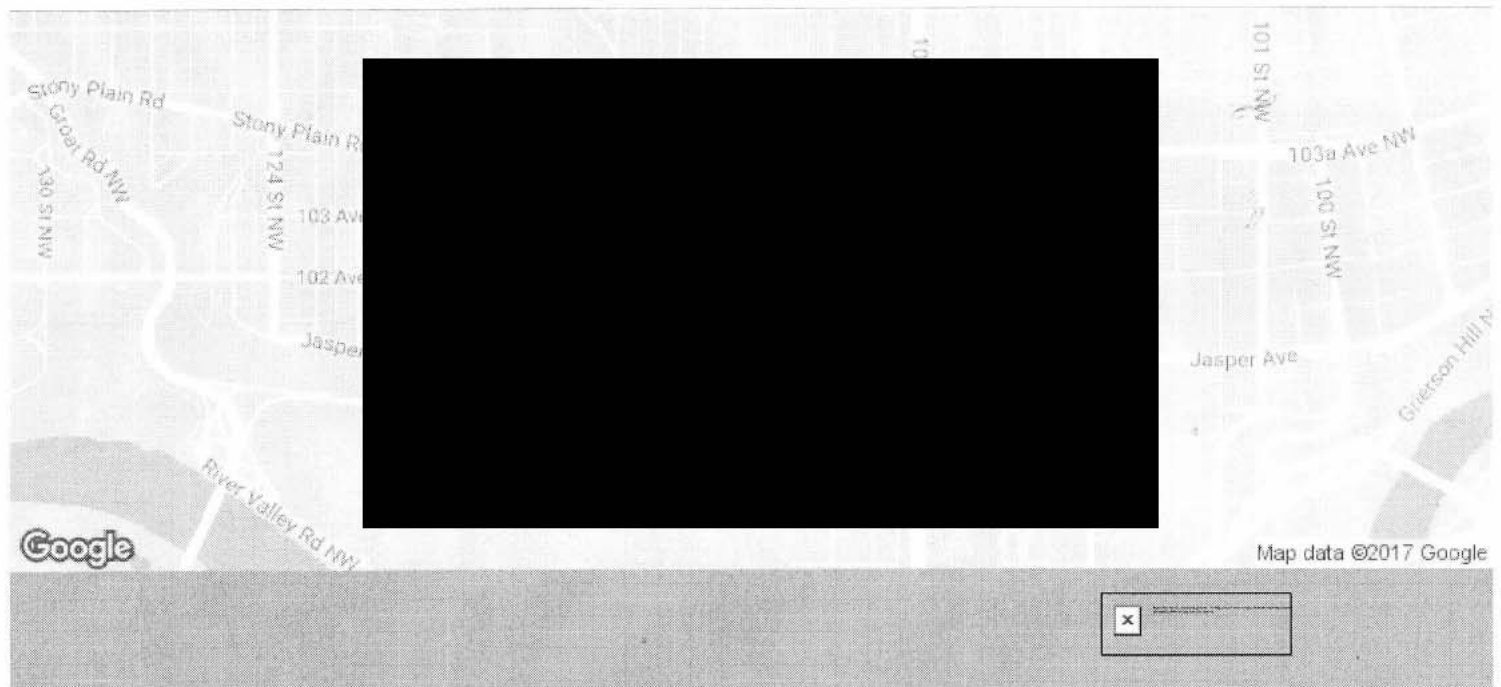
- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☐ Group: _____

Purpose:

Airport to Edmonton Residence Uber in Edmonton <div>\$11.97</div>

Wayne Anderson

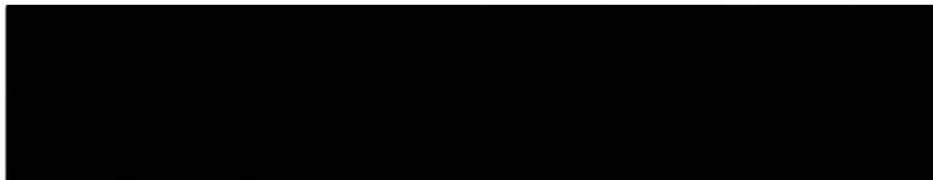
From: Uber Receipts <uber.canada@uber.com>
Sent: Sunday, November 5, 2017 3:38 PM
To: Wayne Anderson
Subject: Your Sunday afternoon trip with Uber



\$11.97

Thanks for choosing Uber, Wayne

November 5, 2017 | uberX





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
WAYNE ANDERSON
LEGIS ASSEMBLY OF AB

Membership Number

Date
December 16, 2017



Page 1 of 3

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

Statement includes payments and charges received by December 16, 2017

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 December 16, 2017

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

New Transactions for WAYNE ANDERSON

Amount \$

November 17	UBER *TRIP PJJIW HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	12.50
November 17	UBER *TRIP PXRHZ HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	41.71

November 26	GREATER EDMONTON TAX EDMONTON TAXICABS AND LIMOUSINES		55.00
November 26	UBER *TRIP LNKYY HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	8.35
November 26	UBER *TRIP G3U6J HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	10.66
November 26	UBER *TRIP QFJYA HELP.UBER.COM TAXICABS AND LIMOUSINES	CA	10.93

† Please detach here †

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT
TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND
SENT TO US. See the About Your Payment Section.

- Phone and Internet banking arranged through your financial institution
- Your local bank branch
- Automatic banking machines

Do Not Enclose Cash

Membership Number

Amount Due \$

Amount Paid \$

000131



WAYNE ANDERSON
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



1015

The American Express® Corporate Card Statement of Account

www.americanexpress.ca

Date: December 16, 2017

Page 2 of 3

New Transactions for WAYNE ANDERSON Continued

Card XXXX-XXXXX3-41009

Amount \$

November 27	UBER *TRIP EKTRA HELP.UBER.COM CA	9.26
	TAXICABS AND LIMOUSINES	

December 1	UBER *TRIP Z4B7J HELP.UBER.COM CA	45.83
	TAXICABS AND LIMOUSINES	

December 14	UBER *TRIP L7NAM HELP.UBER.COM CA	12.01
	TAXICABS AND LIMOUSINES	

December 14	UBER *TRIP 76LH4 HELP.UBER.COM CA	12.13
	TAXICABS AND LIMOUSINES	

Total New Transactions for WAYNE ANDERSON

\$207.99



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: Anderson, Wayne

Constituency: Highwood

For the Month of: October

Year: 2017

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
30	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
Grand Total						\$109.95	\$5.50	\$115.45

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

Nov 6/17



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: Anderson, Wayne

Constituency: Highwood

For the Month of: November

Year: 2017

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T. / 80	Total
			B	L	D			
1	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
2	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
3	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
6	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
9	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
15	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
16	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
27	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
28	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
29	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$646.48	\$32.32	\$678.80

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date

Nov 30/17



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: Anderson, Wayne

Constituency: Highwood

For the Month of: December

Year: 2017

Employee #: [REDACTED]

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
4	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
5	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
6	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
11	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
13	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$378.19	\$18.91	\$397.10

I certify that I have met the requirements of section 7 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.

Member Signature

Date

Dec 14/17



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: Anderson, Wayne

Constituency: Highwood

Employee #: [REDACTED]

Date: 9/29/2017

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month		Year	Monthly Claim Amount
October		2017	1,695.00
29- -325-8831 (NF)	29-063320-2706	Grand Total	\$1,695.00

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Please Note:

- (1) The Member is responsible for retaining all records which support the payment identified above.
- (2) The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

I certify that I have met the requirements of sections 5, 6, 7, and/or 8 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred accommodations expenses on the dates or months selected, and have not previously claimed or been paid for these expenses.

Member Signature

Updated April 2016



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: Anderson, Wayne

Constituency: Highwood

Employee #: [REDACTED]

Date: 10/25/2017

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month		Year	Monthly Claim Amount
November		2017	1,695.00
29- -325-8831 (NF)	29- -320-2706	Grand Total	\$1,695.00

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Please Note:

- (1) The Member is responsible for retaining all records which support the payment identified above.
- (2) The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

I certify that I have met the requirements of sections 5, 6, 7, and/or 8 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred accommodations expenses on the dates or months selected, and have not previously claimed or been paid for these expenses.


Member Signature

Updated April 2016



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: Anderson, Wayne **Constituency:** Highwood

Employee #: [REDACTED] **Date:** 12/1/2017

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month				Year	Monthly Claim Amount
December				2017	1,695.00
29-	-325-8831 (NF)	29-	-320-2706	Grand Total	\$1,695.00

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

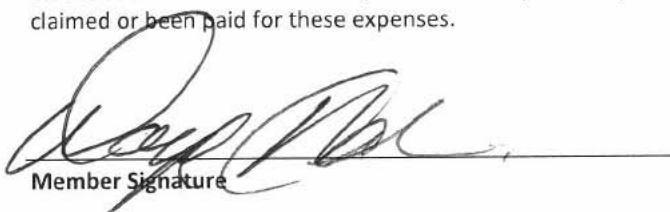
☒ Yes

☐ No

Please Note:

- (1) The Member is responsible for retaining all records which support the payment identified above.
- (2) The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

I certify that I have met the requirements of sections 5, 6, 7, and/or 8 of the *Members' Allowances Order*, RMSC 1992, c. M-1, as amended, have incurred accommodations expenses on the dates or months selected, and have not previously claimed or been paid for these expenses.


Member Signature

Updated April 2016

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: Melissa Whitney

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee for hosting meetings in Mr. Adnerson's Okotoks, High River, and Edmonton offices.

\$269.94

Highwood

From: orderstatus@costco.ca
Sent: Tuesday, September 26, 2017 2:39 PM
To: Highwood
Subject: Your Costco.ca Order Number 665721874 Was Received.

Categories: Melissa

Order Received

Thank you for ordering from Costco.ca.

Order Details

Order Placed	Order Number
09/26/2017	665721874

[View Order Details](#)

Shipping Details



McCafe Medium Dark Premium Roast Coffee 72- count
Item #1126350

\$ 44.99

Quantity

6

Total

\$ 269.94

Ship To

Melissa Whitney

Legislative Assembly of Alberta - Highwood

163 WESTRIDGE CLOSE

OKOTOKS, AB T1S 1N4

403-995-5488

highwood@assembly.ab.ca

Ground: Included

Shipping Status: In Process

Shipping & Terms

Standard shipping via UPS is included in the quoted price. **The estimated delivery time will be approximately 7 - 10 business days from the time of order. For more information regarding UPS delivery, [click here](#).**

Order Summary

Subtotal (6 Items)	\$ 269.94
Shipping	\$ 0.00
GST :	\$ 0.00
HST :	\$ 0.00
PST :	\$ 0.00
QST :	\$ 0.00

Order Total	\$ 269.94
-------------	-----------

Membership Number



View Order Details to track orders. Tracking information may not be updated immediately.

GST/HST|PST Numbers for Costco.ca

GST/HST [121476329 RT 0001]

Quebec [1018199561 TQ 0001]

Manitoba [261561-4]

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Breakfast with Constituent
Lunch with Constituent

\$28.31

TRANSACTION RECORD
RICKY'S ALL DAY GRILL
747-201 SOUTHRIDGE T1S1E2
OKOTOKS AB
22996942
++++ PURCHASE ++++
09-05-2017 09:25:08
Acct # [REDACTED]
Account Chequing Card Type DP
A0000002771010 Interac
Trace # 860003
FS2299694201
Inv # 106744
[REDACTED] RRN 001525003
Purchase \$25.68
Tip \$3.85
Total \$29.53

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

Thank You!

CHECK # 462052 DATE 9/05/17
TABLE # 74 TIME 8:47AM
=====

-- RICKY'S : CHARLYN --

ITEMS ORDERED	AMOUNT
1 DBL EGG TST BACN	10.49
1 QUICK COMMUTE	7.59
2 COFFEE	6.38

SUBTOTAL	24.46
TAX	1.22

TOTAL DUE 25.68

RICKY'S ALL DAY GRILL
Okotoks, Alberta
GST# 896334109

** Please pay cash to your server **

THANK-YOU!!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Breakfast with Constituent
Lunch with Constituent

\$39.89

Thank you!

Stockmans Restaurant
412 Pine Creek Rd.Stockman's Restaurant and Lounge
(403) 254-6113STOCKMANS RESTAURANT
Table #20Trans #: 186412 Serv: Meredith 4
9/22/2017 12:39 PM # Cust: 2

Quan	Descript	Cost
1	Tea	\$2.49
1	Pepsi	\$2.49
1	Chicken Caesar Salad	\$14.99
1	Quesadilla	\$12.99
1	Small Guacamole	\$1.50

Net Total: \$34.46
GST \$1.72

TOTAL: \$36.18

Amount Due: \$36.18

Food: \$29.48

Beverage: \$4.98

Join us for Friday
Prime Rib Dinner!

GST #851873489RT0001

STOCKMAN'S RESTAURANT &
LOUNGE300 PINE CREEK ROAD
HERITAGE POINAB

CARD

CARD TYPE INTERAC

ACCOUNT TYPE CHEQUING

DATE 2017/09/22

TIME 4201 12:42:00

CLERK ID 4

RECEIPT NUMBER

C82022333-001-155-007-0

PURCHASE

AMOUNT \$36.18

TIP \$5.43

TOTAL

\$41.61

Interac

A0000002771010

DDB7C89C50A5C0B8

8080008000-6800

9E9EF82D3E639D49

8080008000-7800

APPROVED

00-001

THANK YOU

CARDHOLDER COPY

ASSEMBLY OF ALBERTA
Expense Claim Receipt Description

Server Name: wayne Anderson

Client Name: _____

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Breakfast Meeting

\$23.79

SMILLY'S
HIGH RIVER
0004 Table 2 #Party 2
MAYAH D SvrCk: 4 8:30 10/03/17

2 COFFEE 4.68
2 EARLY BIRD 14.98

Sub Total: 19.66
GST : 0.98
10/03 09:03 TOTAL: 20.64

THANK YOU!!
PLEASE PAY SERVER
GST#884772187

0004

Server: MAYAH D (#7) Rec: 4
10/03/17 09:30, Swiped T: 2 Term: 1

Duplicate Copy

TRANSACTION RECORD

Tran. #: 2750

Check #: 0004

Interac Purchase
From Chequing

AID: A000000271010

Amount: \$20.64
Tip: \$4.13
=====

TOTAL CAD\$24.77

APPROVED

Invoice #: 4
2017/10/03 09:30:49

TVR: 8080008000
TSI: 7800

ASSEMBLY OF ALBERTA
Expense Claim Receipt Description

Name: Wayne Anderson

Ant Name: Melissa Whitney

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

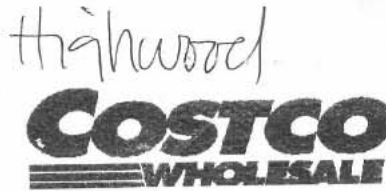
☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Christmas open house

\$131.02



OKOTOKS, AB #1069

2 @ 12.99 525 CARN HC1.9KG 25.98
2 @ 11.99 4743 MINI TARTS 23.98
2 @ 12.99 31062 NANAIMO BARS 25.98
2 @ 8.79 4579 GINGERSNAPS 17.58
2 @ 9.99 5000195 WHIT CHOC SB 19.98
3 @ 1.89 10551 ICING SUGAR 5.67
3 @ 3.95 448 BUTTER 454G 11.85

SUBTOTAL
**** GST 5%

TOTAL
VF MasterCard

REFERENCE#: 65231182-0010016870 T
AUTH#: 998735 11/16/17 10:53:29
Invoice#: 34638

COSTCO WHOLESALE #1069
202-104 SOUTHBANK BLVD
OKOTOKS AB T1S 0K4

PURCHASE - MasterCard
01 APPROVED - THANK YOU 027
AMOUNT: _____

1069 007 0000000052 0047

IMPORTANT - retain this copy for your record.

*** CARDHOLDER COPY ***

CHANGE .00

TOTAL NUMBER OF ITEMS SOLD = 17
CASHIER: WENDY T REG# 7
10:53 1069 07 0047 52

GST/HST #121476329
THANK YOU!
PLEASE COME AGAIN

ASSEMBLY OF ALBERTA
Expense Claim Receipt Description

Customer Name: Wayne Anderson

Cardholder Name: Melissa Whitney

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

Christmas open house

\$87.78

Highwood

Bulk Barn

Bulk Barn 519
105 Southbank Blvd.,
Okotoks, Alberta
(403) 938-1380

GST# 835289711RT0001

Lane: 002 Cashier: 161

Date: 11/09/2017 Time: 15:13

Transaction: 61910613942

MEDIUM GINGERBREAD MAN \$87.78D
22 @ /\$3.99/288g

Sub-Total:	\$87.78
Total Amount:	\$87.78
VISA	\$87.78
Total Tendered:	\$87.78

Items Sold: 22

G=GST B=BOTH TAXES

Have you heard about our Christmas
digital flyer? Download
the Flipp app or visit
bulkbar.ca for exclusive
digital only content, recipes and
coupons! Until November 15 only