

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2017-18  
063 - Highwood - Anderson, Wayne  
For Expenses Processed Jan 1 - Mar 31, 2018

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
Transportation			
Fuel and Minor Maintenance - \$		\$1,170.24	\$4,846.42
MLA Parking Cap - \$	\$900.00	\$28.86	\$127.90
Other Travel - Parking - \$		\$119.95	\$505.29
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$229.82	\$621.71
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$624.38	\$3,452.19
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,085.00	\$20,838.99
Travel Accommodations Allowance			\$159.61
Travel Accommodations Allowance (days; 10 max) - NF	10.0		1.0
Other			
Hosting - \$		\$138.51	\$1,001.22
<b>Non-Financial Reporting</b>			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000.0	5,930.0	32,121.0
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		1.0	5.0
Use of a Private Automobile (52 trips per year) - NF	52.0	1.0	14.0
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



BFD290001

FLEET MANAGEMENT SERVICES DETAIL  
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 200 OF 241  
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 01/01/18  
DATE DE LA FACTURE  
NVOICE NO. 0006993645  
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]	000484224618 12/16/17	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	82.7	1.29	101.50	5.08 5.08	106.58 106.58
					000483256065 12/08/17	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	83.2 1.0	1.29 13.99	102.18 13.99	5.11 .70 5.81	121.98 121.98
					000482594611 12/02/17	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	68.7 1.0	1.29 13.99	84.29 13.99	4.21 .71 4.92	103.20 103.20
					000481727733 11/21/17	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	38.4 1.0	1.29 13.99	47.16 13.99	2.36 .70 3.06	64.21 64.21
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	273.0		377.10	18.87	395.97
	BKDN TOTALS / TOTAUX CODIFICATION 01-63		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	273.0		377.10	18.87	
							BKDN TOTALS / TOTAUX COD FICATION					395.97

BLE871

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

FLEET MANAGEMENT SERVICES DETAIL  
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 190 OF 230  
 DE

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 DATE DE LA FACTURE	02/01/18
NVOICE NO. NO DE LA FACTURE	0007019898

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
	ANDERSON				000485646234 12/14/17	FASGAS EDMONTON	AB	REGULAR DIESEL GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	59.1	1.16	65.22 3.26 68.48 68.48 64.63 67.89	3.26 3.26 68.48 68.48 67.89
UNIT TOTAL / TOT UNITE								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	59.1	65.22	3.26	68.48 .59- 67.89
BKDN TOTALS / TOTAUX CODIFICATION 01-63								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	59.1	65.22	3.26	68.48 .59- 67.89
								BKDN TOTALS / TOTAUX COD FICATION DISCOUNT / RABAIS TOTAL / TOTAL				68.48 .59- 67.89

# Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL  
 DETAILS SERVICES DE GESTION DE PARC

PAGE - 197 OF 238  
 DE

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	03/01/18
DATE DE LA FACTURE	
NVOICE NO.	0007042854
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
	ANDERSON				000490380471 02/16/18	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	69.5	1.32	87.30	4.37 4.37	91.67 91.67
UNIT TOTAL / TOT UNITE							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	69.5		87.30	4.37	91.67
BKDN TOTALS / TOTAUX CODIFICATION 01-63							FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	69.5		87.30	4.37	
BKDN TOTALS / TOTAUX COD FICATION												91.67

BLE871

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

# Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL  
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 201 OF 242  
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 04/01/18  
DATE DE LA FACTURE  
NVOICE NO. 0007066291  
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]	000492118399 03/10/18	PETRO CANADA CALGARY 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	75.7 1.0	1.21 14.95	87.17 14.95	4.36 7.5 5.11	107.23 107.23
					000492118398 03/06/18	PETRO CANADA CALGARY AB	REGULAR DIESEL GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	32.2	1.22	37.41	1.87 1.87	39.28 39.28
					000491258962 03/01/18	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	36.5 1.0	1.32 13.99	45.83 13.99	2.29 7.0 2.99	62.81 62.81
					000490733600 02/25/18	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	43.0 1.0	1.32 13.99	53.96 13.99	2.70 7.0 3.40	71.35 71.35
					000490603890 02/22/18	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	70.7	1.32	88.84	4.44 4.44	93.28 93.28
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	258.1		356.14	17.81	373.95
	BKDN TOTALS / TOTAUX CODIFICATION 01-63		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	258.1		356.14	17.81	
							BKDN TOTALS / TOTAUX CODIFICATION					373.95

BLE871

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

**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 and Diesel Exhaust Fluid

\$16.29

**TRANSACTION RECORD**

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

**SALE**

03-01-2018 16:2127

Account Chequing Card Type DP  
 A0000002771010  
 Interac

Trace # 890054  
 Inv. # 18358

RRN 001290054

Sale \$17.10

TOTAL \$17.10

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



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

Time: 16:20  
 Date: 03/01/2018  
 Page: 1/1

Invoice Number 159-754352

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

Employee: 4 , Glenn  
 Sales Rep: 0 , Salesman  
 Accounting Day: 1

Part Number	Line	Description	Quantity	Price	Net	Total	
55-125AIRX48	RCO	DIESEL EXHAUST FLUID	1.00	17.79	16.2900	16.29	T

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

Subtotal 16.29  
 GST 863381265 5.0000% 0.81

Total 17.10

PINDebit 17.10

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 day!

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 and Diesel Exhaust Fluid

\$268.19

TRANSACTION RECORD

SOUTHRIDGE CHRYSLER LT  
12 SOUTHRIDGE DR. T1S1N1  
OKOTOKS AB  
20969832  
QC2096983203

SALE

02-26-2018

16:53:36

Account Chequing Card Type DP  
A0000002771010  
Interac

Trace # 430007  
Inv. # 786239

RRN 001144007

Sale \$281.60

TOTAL \$281.60

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

Retain this copy for your  
records  
Customer copy



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: 02/26/2018 2:00:00 PM



Page 1

Fleet:  
Tag #:

**\* Service Invoice Customer Copy \***

SO #: 786239

Customer No:

WAYNE  
ANDERSON

Advisor: Dan Wells

Invoice Date: 02/26/2018 Term: CASH

**Request/Concern**

			Type	CSR#	TU	Amount
1	MAINT1	MAINTENANCE 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 9634 JAMIE				
	Cause:	DIESEL LOF				
	Correction:	COMPLETED DIESEL LOF				
Request Total						261.60

2	02	SERVICE AIR SUSPSION				
	NFF	UNABLE TO RECREATE CLIENT CONCERN.	C	9628	0	0.00
		Technician 9634 JAMIE				
	Cause:	AIR SUSPENSION				
	Correction:	DECLINED				
Request Total						0.00

**Added Operation**

3	20	ALIGNMENT				
	20	ALIGNMENT	C	9628	0	0.00
		Technician 9634 JAMIE				
Request Total						0.00

HAS 5/160 GOLD PLAN

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 \_\_\_\_\_





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: 02/26/2018 2:00:00 PM



Page 2

Fleet:  
Tag #:

**\* Service Invoice Customer Copy \***

SO #: 786239

Customer No:  
WAYNE

Advisor: Dan Wells

Invoice Date: 02/26/2018 Term: CASH

Request/Concern

Type	CSR#	TU	Amount
LABOUR			\$54.95
PARTS			\$206.65
SUPPLIES			\$6.59
<b>SUBTOTAL</b>			<b>\$268.19</b>
Gst			\$13.41
<b>TOTAL INVOICE</b>			<b>\$281.60</b>

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.

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**STATEMENT OF DISCLAIMER**

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Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

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:

Various events parking in Calgary and Edmonton

\$6.67

RECEIPT

License Plate Number  
[REDACTED]

\*Expiration Date/Time\*  
**03:00 AM**  
**OCT 04, 2017**

Purchase Date/Time: 07:46pm Oct 03, 2017  
Total Due: \$7.00      Rate: \$7 Expires @ 3am  
Total Paid: \$7.00      Payment Type: Card  
Ticket #: 81014201  
S/N #: 520117220859  
Setting: Lot 27  
Mach Name: Lot 27 -4

[REDACTED] [REDACTED]

GST REG #102466000

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:

Various events parking in Calgary and Edmonton

\$3.00

RECEIPT

PARKING  
License Plate Number

Expiration Date/Time

08:11 PM

SEP 12, 2017

Purchase Date/Time: 05:11pm Sep 12, 2017

Total Parking: \$3.00

Total GST: \$0.15 *Owned & Operated*

Total Due: \$3.15

Rate: \$3.00 - 3 HOURS

Total Paid: \$3.15

Pmt Type: CC (Swipe)

Ticket #: 01880644

S/N #: 520117210847

Setting: G046

Mach Name: G046n

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING F

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:

Various events parking in Calgary and Edmonton

\$3.00



License Plate Number

Expiration Date/Time

**02:30 PM**  
**OCT 27, 2017**

Purchase Date/Time: 11:30am Oct 27, 2017

Total Parking: \$3.00

Total GST: \$0.15

Total Due: \$3.15

Total Paid: \$3.15

Ticket #: 04395510

S/N #: 520117210847

Setting: G046

Mach Name: G046n

Rate: \$3.00 - 3 HOURS

Pmt Type: CC (Swipe)

PARKING  
GST# 89678089

PARKING RECEIPT  
PARKING RECEIPT  
PARKING RECEIPT  
PARKING RECEIPT  
PARKING RECEIPT

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:

Various events parking in Calgary and Edmonton

\$16.19

RECEIPT  
Impark Lot 02-4

License Plate Number

Expiration Date/Time

11:00 PM  
MAR 06, 2018

Purchase Date/Time: 06:57pm Mar 06, 2018

Total Parking: \$16.19

Total GST: \$0.81

Total Due: \$17.00

Total Paid: \$17.00

Ticket #: 044401:2

S/N #: 500012451 05

Setting: Lot 4

Mach Name: Meter 2

Rate: \$17- until 11pm

Payment Type: Card

gst #887315638RT0006  
NO IN AND OUT PRIVILEGES

ING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING



# 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  
**March 18, 2018**



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 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 \$

## New Transactions for WAYNE ANDERSON

Amount \$

March 15 **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**

Membership Number

Amount Due \$

Amount Paid \$



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

000131

Other Travel - Parking \$119.95

Amex Bank of Canada/  
Banque Amex du Canada  
PO BOX 2000  
West Hill ON M1E 5H4



ASSEMBLY OF ALBERTA  
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:

Taxi, from airport to Federal Building

\$52.38

AIRPORT TAXI SERVICE  
4608 101 ST.  
(7808907070)  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE INTERAC  
ACCOUNT TYPE CHEQUING  
DATE 2018/01/28  
TIME 5157 17:39:05  
INVOICE # 153  
RECEIPT NUMBER  
C85019463-001-221-017-0

PURCHASE  
TOTAL

\$55.00

Interac  
A0000002771010  
0E2524EC636B86AC  
8080008000-6800  
B709F244C3C0E78B  
8080008000-7800

APPROVED

THANK YOU

00-001

CARDHOLDER COPY

GST 71146 4891 RT0001



# 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  
**February 16, 2018**

Page 1 of 2

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
0.00	0.00	52.64	52.64

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.

## Credit Limit Summary On February 16, 2018

Total Credit Limit \$ Available Credit Limit \$

## New Transactions for WAYNE ANDERSON

				Amount \$
January 29	UBER *V420Z	HELP.UBER.COM	CA	7.19
	TAXICABS AND LIMOUSINES			
February 1	UBER *FT366	HELP.UBER.COM	CA	45.45
	TAXICABS AND LIMOUSINES			
Total New Transactions for WAYNE ANDERSON				52.64

Taxi, Bus Travel = \$50.14

## 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

000135

† Please detach here †

Membership Number		
Amount Due \$	Amount Paid \$	
52.64		

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 2P6

Prepared For  
**WAYNE ANDERSON**  
**LEGIS ASSEMBLY OF AB**

Membership Number

Date  
**March 18, 2018**



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 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 \$

## New Transactions for WAYNE ANDERSON

Amount \$

March 9	UBER *W2RPU HELP.UBER.COM CA TAXICABS AND LIMOUSINES	6.91
March 9	UBER *JHJX5 HELP.UBER.COM CA TAXICABS AND LIMOUSINES	7.54
March 11	UBER *BSYBK HELP.UBER.COM CA TAXICABS AND LIMOUSINES	9.49
March 11	UBER *IB412 HELP.UBER.COM CA TAXICABS AND LIMOUSINES	9.54
March 11	AIRPORT TAXI SERVICE EDMONTON TAXICABS AND LIMOUSINES	55.00
March 16	UBER *Y6W3S HELP.UBER.COM CA TAXICABS AND LIMOUSINES	45.18

Taxi, Bus Travel = \$127.30

† 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





# 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: January

Year: 2018

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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
29	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
30	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
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						\$127.43	\$6.37	\$133.80

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

Jan 31/18



# 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:** March

**Year:** 2018

**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	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 type="checkbox"/>	19.81	0.99	20.80
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
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	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 type="checkbox"/>	19.81	0.99	20.80
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
19	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
20	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
21	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
22	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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						\$496.95	\$24.85	\$521.80

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



# Members' Temporary Accommodation Allowance Claim Form

63

**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: 1/17/2018

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
January		2018	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.

RECEIVED

JAN 18 2017

FMAS-WZ

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: 1/30/2018

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
February				2018	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

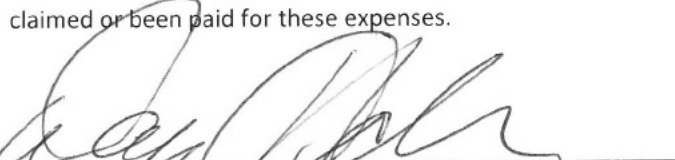
☐ No

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



# 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: 2/28/2018

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
March		1695	
29- -325-8831 (NF)	29- -320-2706	Grand Total	

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:

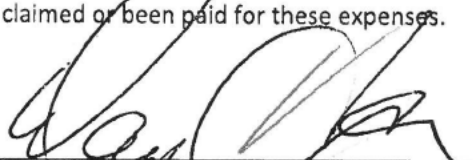
- (1) The Member is responsible for retaining all records which support the payment identified above.
- (2) The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

RECEIVED

FEB 28 2018

FMAS-

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

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 Meeting with Constituent

\$ 34.36

\*\*\*\*\*

CHECK # 478793      DATE 3/01/18

TABLE # 71      TIME 10:24AM

=====

--      RICKY'S : CHARLYN      --

ITEMS ORDERED	AMOUNT
1 DBL EGG TST BACN	11.99
1 DBL EGG TST SAUS	11.99
2 COFFEE	6.38

\*\*\*\*\*

SUBTOTAL	30.36
TAX	1.52

-----  
TOTAL DUE      31.88  
-----

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

\*\* Please pay cash to your server \*\*

THANK-YOU!!

TRANSACTION RECORD

RICKY'S ALL DAY GRILL  
747-201 SOUTHRIDGE T1S1E2  
OKOTOKS AB  
22996942

|||| PURCHASE ||||

03-01-2018      10:25:23

Acct #      [REDACTED]

Account Chequing      Card Type DP  
A0000002771010      Interac

Trace # 640009

FS2299694201

Inv. # 119438

RRN 001701009

Purchase	\$31.88
Tip	\$4.00
Total	\$35.88

( 00 ) APPROVED-THANK YOU

Retain this copy for your  
records  
Customer copy

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:

Dinner/High River

\$55.91





Boston Pizza #124

HIGH RIVER

0080 Table 61 #Party 3

VALESA B SvrCk: 4 17:52 02/27/18

2 WATER	0.00
1 N.S. POP	3.30
1 MEDI CKN SAL, w/ pln chkn	16.25
1 CHKN CAESAR SAL, w/ pln chkn	15.75
1 ITALIAN F.BREAD	13.00

Sub Total 48.30

GST : 2.42

02/27 18:14 TOTAL: 50.72

THANK YOU FOR JOINING US AT BOSTON PIZZA  
GST # 894648450R000

TELL US HOW WE DID!

We value your feedback and time.  
Complete our SUPER SHORT SURVEY and  
receive a chance to WIN an AWESOME  
\$200 Boston Pizza Gift Card.

Keep this receipt and go to  
[www.TellBostonPizza.com](http://www.TellBostonPizza.com)

\*\*\*\*\*  
please visit [www.TellBostonPizza.com](http://www.TellBostonPizza.com)

\*\*\*\*\*

Survey Access Code:

07481-20000-72211

This code will expire in 28 days

\*\*\*\*\*

\*\*\*\*\*

TRANSACTION RECORD

BOSTON PIZZA # 124  
1508 13TH AVE SE T1V2B1  
HIGH RIVER AB  
20714907  
BH2071490712

\*\*\*\* PURCHASE \*\*\*\*

02-27-2018 18:14:16

Account Chequing Card Type DP  
A0000002771010 Interac

\*\*\*\* DUPLICATE \*\*\*\*

Check # 80  
Operator: 481  
Trace # 8595  
Inv. # 8789

RRN 001049007

Purchase	\$50.72
Tip	\$7.61
Total	\$58.33

(001) APPROVED-THANK YOU

Retain this copy for your  
records  
Customer copy

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Wayne Anderson

Claimant Name: Melissa Whitney

Expense Category: Hosting

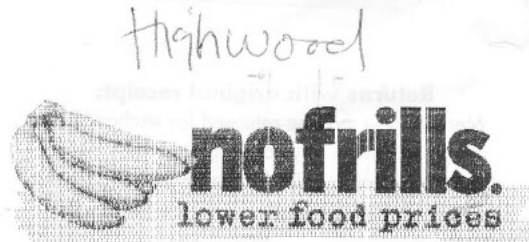
For hosting, select one:

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

Purpose:

Hosting materials for stakeholder events with Opposition Leader Jason Kenny here in Highwood.

\$16.97



NO FRILLS OKOTOKS  
5 Sandstone Gate  
Tel: 306-234-1111

21-GROCERY  
06320907227 TIM HORTN COFFEE R 16.97  
SUBTOTAL 16.97  
TOTAL 16.97

-----TRANSACTION RECORD-----  
GLOBAL PAYMENTS MERCHANT # N004179333  
nofrills  
5 Sandstone Gates  
Okotoks AB  
TERM 20394404C SLIP # 406700  
RETAIN THIS COPY FOR YOUR RECORDS  
\*\* Purchase \*\* Proximity  
EXP \*\*/\*\*

MASTERCARD  
REF # 214001001012  
02/26/2018 12:45:16 \$ 16.97

APPROVED

No Signature Required

CREDIT TN 16.97  
PC Optimum  
Points Redeemed  
Closing Balance



99394404406720180226124515

GST # 10027-4695 RT0001

VISIT US AT WWW.NOFRILLS.CA

Like us on Facebook:

www.facebook.com/nofrillsCA

Follow us on Twitter: @nofrillsCA

\*\*\*\*\*

THANK YOU FOR SHOPPING AT NOFRILLS

CHRISTINE TURNER, (403)-938-8010

Thank You, Come Again!

\*\*USE YOUR PCF CARD\*\*

TO COLLECT POINTS!!

\*\*REDEEM HERE FOR FREE GROCERIES\*\*

2018/02/26 BRENDA 9802 04 4067 12:45

TELL US HOW WE DID TODAY! MONTHLY CHANCES  
TO WIN \$5000 VISIT WWW.STOREOPINION.CA

OR CALL 1-877-234-2322 SEE CUSTOMER

SERVICE DESK FOR FULL CONTEST RULES OR

WWW.STOREOPINION.CA STORE: 03944

CODE: 022618 124504 4067 03944

\*\*\*\*\*

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:

Hosting materials for stakeholder events with Opposition Leader Jason Kenny here in Highwood.

\$31.27



OKOTOKS, AB #1069

500666 KSWTR40/500\* 3.99  
DEPOSIT 4.00  
ENVIRO FEE N .80  
891394 AUSSIE BITES 12.49  
153496 TWOBITE CINM 9.99

TOTAL 31.27  
VF MasterCard 31.27

REFERENCE#: 66231177-0010017880 T  
02/26/18 13:40:31  
Invoice#: 27474

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

PURCHASE - MasterCard  
01 APPROVED - THANK YOU 027  
AMOUNT: \$31.27

1069 008 0000000004 0154

IMPORTANT - retain this copy for your record.

\*\*\* CARDHOLDER COPY \*\*\*

CHANGE .00

TOTAL NUMBER OF ITEMS SOLD = 3  
CASHIER: JULIEA P REG# 8  
2018/02/26 13:40 1069 08 0154 4

GST/HST #121476329  
THANK YOU!  
PLEASE COME AGAIN