

LEGISLATIVE ASSEMBLY OF ALBERTA - 29th LEG
Member EDR 2015-16 - 29th Leg
052 - Bonnyville-Cold Lake - Cyr, Scott
For Expenses Processed Oct 1 - Dec 31, 2015

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00	\$79.00	\$79.00
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Member Travel (Extraordinary Accommodation) - \$		\$1,061.55	\$1,253.29
Taxi, Bus Travel - \$		\$61.76	\$61.76
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$186.66	\$715.99
Other			
Hosting - \$		\$757.24	\$947.12
Non-Financial Reporting			
Member Travel - Accommodation			
Edmonton Accommodation Allowance (days; 120 max)	120	31	50
Travel Accommodations Allowance (days; 10 max)	10	7	8
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000	1,263	3,843
Special Trips (5 trips per year) - NF	5	4	5
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52	3	12
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		

\$ - 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

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA Bonnyville-Cold Lake Constituency

Claimant Name: Scott Cyr, MLA

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: AUMA Conference - Calgary

Purpose:

Parking for the AUMA Conference in Calgary.

PALLISER
SQUARE

Payment Receipt

Station name: Exit 2 Middle

Entry: 9/23/15 7:12 AM

Payment date: 9/24/15 3:13 P

Card no.: [REDACTED]

Due: CAD 56.00

Reduction: CAD 0.00

Aid with: CAD 56.00

Amount change: CAD 0.00

Change owed: CAD 0.00

***** [REDACTED]

ASTERCARD

Seq# 000023 017

Purchase 15/09/24 15:14:17

[REDACTED]
PPROVED

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA Bonnyville-Cold Lake Constituency

Claimant Name: Scott Cyr, MLA

Expense Category: Member Parking

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☒ Group: AUMA Conference - Calgary

Purpose:

Parking for the AUMA Conference in Calgary.



VINCI Park
Centennial
Lot #016

PARKING

2015/09/25 10:46



9BRYNT6THL

Welcome
Monthly Parking
Available
(403) 296-1820
(Entrance1)

ICT Tech Inc. www.parknet.ca ICT Tech Inc.



VINCI Park
Centennial
Lot #016

PARKING

2015/09/25 16:34

Paid: \$ 23.00

MASTERCARD

Ticket: 9BRYNT6THL

End:26/09/2015 10:47

Welcome
Monthly Parking
Available
(403) 296-1820
(Exit1)

ICT Tech Inc. www.parknet.ca ICT Tech Inc.

Elkwater Lake Lodge

Box 56

Elkwater, AB T0J 1C0

Phone: 403-893-3811 Fax: 403-893-3033

info@elkwaterlakelodge.com

Page 1 of 1

TAX ID: GST# 872985361RT0001

Scott Cyr

Room	Folio	CheckIn	CheckOut	Balance
		13/09/2015	17/09/2015	0.00
Master Folio				

Date	Room	Description / Voucher	Charges	Credits	Balance
13/09/2015	211	Room Taxable	136.00	0.00	136.00
13/09/2015	211	Destination Fee - 3.000%	4.08	0.00	140.08
13/09/2015	211	Room GST - 5.000%	7.00	0.00	147.08
13/09/2015	211	Alberta Tourism Levy - 4.000%	5.60	0.00	152.68
14/09/2015	211	Room Taxable	136.00	0.00	288.68
14/09/2015	211	Destination Fee - 3.000%	4.08	0.00	292.76
14/09/2015	211	Room GST - 5.000%	7.00	0.00	299.76
14/09/2015	211	Alberta Tourism Levy - 4.000%	5.60	0.00	305.36
15/09/2015	211	Room Taxable	136.00	0.00	441.36
15/09/2015	211	Destination Fee - 3.000%	4.08	0.00	445.44
15/09/2015	211	Room GST - 5.000%	7.00	0.00	452.44
15/09/2015	211	Alberta Tourism Levy - 4.000%	5.60	0.00	458.04
16/09/2015	211	Room Taxable	136.00	0.00	594.04
16/09/2015	211	Destination Fee - 3.000%	4.08	0.00	598.12
16/09/2015	211	Room GST - 5.000%	7.00	0.00	605.12
16/09/2015	211	Alberta Tourism Levy - 4.000%	5.60	0.00	610.72
17/09/2015	211	Mastercard	0.00	610.72	0.00
		Balance Due			0.00
Summary and Taxes					
		Taxable Sales	582.72		544.00
		Room GST - 5%			28.00
		Alberta Tourism Levy - 4%			22.40

ELKWATER LAKE LODGE & RES

481 4 ST

ELKWATER, AB, T0J1C0

403-893-3811

Merchant ID: 97490310018

Term ID: 001

Ref #: 061

Pre-Auth Compl

Entry Method: Chip

MASTERCARD

09/17/15

Inw #: 0000004

09:51:51

Appr Code: [REDACTED]

Batch#: 000773

Approved

Original Pre-Auth Amount: \$ 610.72

Total: \$ 610.72

I agree to pay above total amount
according to card issuer agreement
(Merchant agreement if credit voucher).
Retain this copy for statement
verification.

Application Label: MasterCard

AID: A000000000000000

TVR: 00 00 00 00 00 00

TSI: EB 00

Customer Copy

SLC

17/09/2015 07:57 AM

Thank you for choosing Elkwater Lake Lodge!

Aloft Calgary University
 2359 Banff Trail NW
 Calgary, AB T2M 4LZ
 Canada
 Tel: 403-289-1973 Fax: 403-282-1241



Mr. Scott Cyr
 Fifth Floor 9820 107th St
 Edmonton, AB T5K 1E4

Page Number : 1
 Guest Number :
 Folio ID : A
 22-SEP-15 21:39
 25-SEP-15 06:47
 1
 142

Invoice Nbr : 125183

Copy Invoice

Tax ID : 893755702RT0001

Aloft Calgary Univ 11-NOV-15 21:09 HOLLTAT

Date	Reference	Description	Charges (CAD)	Credits (CAD)
22-SEP-15	RT142	Room Charge	149.00	
22-SEP-15	RT142	Goods And Services Tax (GST)	7.67	
22-SEP-15	RT142	Alberta Tourism Levy	6.14	
22-SEP-15	RT142	Destination Marketing Fee	4.47	
23-SEP-15	RT142	Room Charge	149.00	
23-SEP-15	RT142	Goods And Services Tax (GST)	7.67	
23-SEP-15	RT142	Alberta Tourism Levy	6.14	
23-SEP-15	RT142	Destination Marketing Fee	4.47	
24-SEP-15	RT142	Room Charge	149.00	
24-SEP-15	RT142	Goods And Services Tax (GST)	7.67	
24-SEP-15	RT142	Alberta Tourism Levy	6.14	
24-SEP-15	RT142	Destination Marketing Fee	4.47	
25-SEP-15	MC	MasterCard / Diners Intl		-501.84

For Authorization Purpose Only

Date Code Authorized
 22-SEP-15

Continued on the next page

Aloft Calgary University
 2359 Banff Trail NW
 Calgary, AB T2M 4LZ
 Canada
 Tel: 403-289-1973 Fax: 403-282-1241



Mr. Scott Cyr
 Fifth Floor 9820 107th St
 Edmonton, AB T5K 1E4

Page Number : 2 Invoice Nbr : 125183
 Guest Number : XXXXXXXXXX
 Folio ID : A

22-SEP-15 21:39
 25-SEP-15 06:47
 1
 142

022203 581.1

** Total 501.84 -501.84
 *** Balance 0.00

Amount (CAD)

478.83
 0.00
 0.00
 0.00
 0.00
 0.00

As a Starwood Preferred Guest, you could have earned 894 Starpoints for this visit. Please provide your member number or enroll today.

www.aloftcalgaryuniversity.com

Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA Bonnyville-Cold Lake Constituency

Claimant Name: Scott Cyr, MLA

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: AUMA Conference - Calgary

Purpose:

Taxi for the AUMA Conference in Calgary.

Driver # Balt Car # 901
To: Let us
From: Hotel
Date: 24 Sep 15 Amount: 25.00
GST# R127273183

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA Bonnyville-Cold Lake Constituency

Claimant Name: Scott Cyr, MLA

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: AUMA Conference - Calgary

Purpose:

Taxi for the AUMA Conference in Calgary.



LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA Bonnyville-Cold Lake Constituency

Claimant Name: Scott Cyr, MLA

Expense Category: Taxi, Bus Travel

For hosting, select one:

- ☐ Individual Constituent(s)
- ☐ Individual Stakeholder(s)
- ☒ Group: AUMA Conference - Calgary

Purpose:

Taxi for the AUMA Conference in Calgary.

Destination ID: 317-657-277
Vehicle ID: 1451
Driver ID: 3620
GST Account ID: 071494628
Trip Number: 245268
Passenger(s): 1

05/25/2015
Start: 08:56
End: 09:10
Distance: 77.00
Rate: 1

Base Amount: \$ 17.71

Tax Amount: \$ 3.89

TOTAL: \$ 18.60

TIP AMOUNT: \$

GRAND TOTAL: \$

CASH RECEIPT

THANK YOU
(403) 299-9999
WWW.THECHECKERGROUP.COM





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: Cyr, Scott

Constituency: Bonnyville-Cold Lake

For the Month of: October

Year: 2015

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	Travel to/from Capital	Waskatenau	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
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	60 km from Perm. Res.	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
26	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.76	0.44	9.20
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$48.33	\$2.42	\$50.75

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' 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: Cyr, Scott

Constituency: Bonnyville-Cold Lake

For the Month of: September

Year: 2015

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	60 km from Perm. Res.	Elk Water, AB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
14	60 km from Perm. Res.	Elk Water, AB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
15	60 km from Perm. Res.	Elk Water, AB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
16	60 km from Perm. Res.	Elk Water, AB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18	60 km from Perm. Res.	Leduc, AB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	60 km from Perm. Res.	Red Deer, AB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25	60 km from Perm. Res.	Red Deer, AB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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						\$138.33	\$6.92	\$145.25

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

Member Signature

Date

Nov. 20, 2015



Best Western Cold Lake Inn
PO Box 245
4815 52nd Street
Cold Lake, AB T9M 1P1

THE WORLD'S LARGEST
HOTEL CHAIN®

MLA Oil Tour
CA

INFORMATION INVOICE

A/R Number :
Group Code : 67G
Company Name :



Arrival : 09-27-15
Departure : 10-15-15
Room No. : 9003
Conf. No. : 9241666
Cashier No. : 24

Date	Description	Charges	Payments
09-28-15	Restaurant Charge 4470	162.47	
09-29-15	Restaurant Charge 4496	162.47	
Total		324.94	0.00
Balance			324.94

Guest Signature

I agree the room rate and additonal charges are correctly stated.
Thank you

GST#: 89459 0660

Each Best Western® branded hotel is independently owned and operated.

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Best Western Cold Lake Inn

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: 5 MLAs and 3 staff

Purpose:

Tour of Oil Operations
Bagged lunches were provided to eat on the bus as they traveled
to Oil Operations.

A handwritten signature in black ink, appearing to be 'S. Cyr', is located in the bottom right corner of the page.

Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Lakeland Inn Cold Lake

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: Public Meeting

Purpose:

Tour of Oil Operations Public Meet & Greet
Open house for the public to meet MLAs' who were in the
constituency to take part in the Tour of Oil Operations.





Lakeland Inn

Box 1050, Highway 28, Cold Lake, Alberta T9M 1P3
Tel (780) 594-3311 • Fax (780) 594-3770

www.lakelandinn.com

El Lobo Motel

Box 1050, Highway 28, Cold Lake, Alberta T9M 1P3
Tel (780) 594-7521 • Fax (780) 594-3770

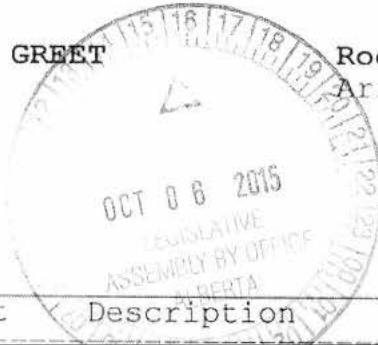
SCOTT CYR (MLA) MEET & GREET

Room # 5011 Invoice # 200778

Arrive 09/23/15 Depart

BONNYVILLE, ALBERTA

SCOTT CYR



Date	Clerk	Department	Description	Reference	Amount
09/28/15	EY	51-Banq Food	SHUTTLE COFFEE		25.00
09/28/15	EY	51-Banq Food	25 FRUITS @2.45		61.25
09/28/15	EY	51-Banq Food	25 SQUARES @2.45		61.25
09/28/15	EY	97-Paid Out	GRATUITY		22.12

Tax Reg. # R106139462

Hosting - \$169.62

Balance: XXXXXXXXXX

Thank You for Staying with Us!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Carmen Banman

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

To offer coffee or tea to constituents when in the constituency office.

43.85
+ 1.25 GST
= \$45.10

T6ST843319146

THANK YOU
CALL AGAIN

06-25-2015 13:10
REG 0017

22 X	@0.66	
DEPT04	\$14.52	
2 X	@0.88	
DEPT05	\$1.76	
DEPT02	\$24.95	T1
3 X	@0.88	
DEPT05	\$2.64	
TAX1	\$24.95	
TAX1	\$1.25	
TOTAL	\$45.12	
ROUNDING AMT	-0.02	
CASH	\$45.10	

CHAR'S KOFFEE KORNER
4716 50TH AVENUE T9N1A3
BONNYVILLE AB
22921726

|||| PURCHASE ||||

06-25-2015 13:12:34
Acct # [REDACTED]
Exp Date ' / ' Card Type MC
Name: CARMEN A BANMAN
A0000000041010 MasterCard

Trace # 760011
FS2292172601
Inv. # 6836
Auth # [REDACTED] RRN 001001773

Total \$45.10

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Julie Krawiec

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee creamers, cup sleeves and bottled water for office use/
constituent visitors.



BROSSEAU'S DEPARTMENT STORE
5001 - 50TH AVENUE

WHIP CRM	\$3.29
BOTTLE DEP	\$0.10
\$2.50 Ea or 2/\$5.00	
INT'L DLT FF VAN	\$2.50
\$2.50 Ea or 2/\$5.00	
INT'L DLT FF VAN	\$2.50
Subtotal	\$8.39
Subtotal Cash	\$8.35

Pre-Tax Subtotal:	\$8.39
Amount Due:	\$8.39
Cash	\$10.00
Change:	\$1.65

Item Count 4

6/26/2015	8:47:09 AM
102 #628247	1 CK1

Your cashier today: **Clerk 1**

Thank You For Calling
PLEASE COME AGAIN
RETOURNEE SVP

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLAClaimant Name: Julie KrawiecExpense Category: Hosting

For hosting, select one:

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

Purpose:

Coffee creamers, cup sleeves and bottled water for office use/
constituent visitors.



Sobeys Bonnyville
4501-50 Ave
780.826.3548
GST #102 624 897 RP0002

Served by: Sonia

Welcome to Sobeys

GROCERY

Cream Whipping 33%	\$3.69	C
+Deposit	\$0.10	R

SUBTOTAL \$3.79

TOTAL TAX \$0.00

TOTAL \$3.79

Cash TENDER \$5.00

Rounding TENDER -\$0.01

Cash CHANGE \$1.20

NUMBER OF ITEMS 1

Term	Tran	Store	Oper	07/21/15
30	8202	3158	131	09:31:38

Thank you for shopping at
Sobeys
Better Food For All
PLEASE COME AGAIN

\$1000 in FREE Sobeys
Gift Cards to be Won!

Hold onto this receipt and visit
www.Sobeys.com/MySobeys
Or call toll free: 1-866-215-9006

Tell us how we are doing; enter to win
a \$1000 Sobeys Gift Card.
See in-store for full contest rules
and no purchase purchase option.
Limit of 240 Entries per store.

Contest closes Aug 9 2015 at 11:59pm MST

Sobeys West Customer Care
1-888-476-2397

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Julie Krawiec

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee creamers, cup sleeves and bottled water for office use/
constituent visitors.

wholesaleTM
club

RCWC 6717 - 5101 46ST BONNYVILLE, AB
(780) 812-3956
INVOICE #: 0671701110859665

CASH
SALES

Account # : 101

() -
Tobacco Tax # :
PST # :
Payment Due : 0 Days

Welcome #

Card#: *****

GROCERY

06820020290	LTNT WHIP CRM	R	3.29
*44000493652	DEPOSIT	R	0.10

-----TRANSACTION RECORD-----

GLOBAL PAYMENTS MERCHANT # 5202130
Retail RCWC
5101 46 St
Bonnyville AB
STORE 06717
SLIP # 966500
TERM Z0671701C
REG 1
RETAIN THIS COPY FOR YOUR RECORDS
** Purchase ** Proximity
CARD # *****
MASTERCARD
REF # AUTH # RESP 001
033001001010
AID: A0000000041010
TSI 6800 TUR 0000008000

DATE	TIME	AMOUNT
08/11/2015	17:37:21	\$ 6.84

APPROVED

No Signature Required

CREDIT TN

PC Plus
Closing Balance

0



88671701966520150811

GST # 12223-5922 RT0001

THANK YOU FOR SHOPPING RCWC
MANAGER: CURTIS
Thank You, Come Again !
BUY MORE PAY LESS!
THANK-YOU FOR SHOPPING RCWC 6717
HOPE TO SEE YOU SOON!
2015/08/11
Amber 9840

17:38
01 9665

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

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Julie Krawiec

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee creamers, cup sleeves and bottled water for office use/
constituent visitors.



Sobeys Bonnyville
4501-50 Ave
780.826.3548
GST #102 624 897 RP0002

Served by: Joanna

Welcome to Sobeys

GROCERY	
DairyLnd 18% CffCrn	\$2.59 C
+Deposit	\$0.10 R
<hr/>	
SUBTOTAL	\$2.69
TOTAL TAX	\$0.00
TOTAL	\$2.69
Cash	TENDER \$3.00
Rounding	TENDER -\$0.01
Cash	CHANGE \$0.30
<hr/>	
NUMBER OF ITEMS	1

Term	Tran	Store	Oper	08/26/15
30	2484	3158	117	09:05:48

Thank you for shopping at
Sobeys
Better Food For All
PLEASE COME AGAIN

Sobeys West Customer Care
1-888-476-2397

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Julie Krawiec

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Coffee creamers, cup sleeves and bottled water for office use/
constituent visitors.

wholesale⁺
club

RCVC 6717 - 5101 46ST BONNYVILLE, AB
(780)812-3956
INVOICE #: 0671704240956224

**CASH
SALES**

Account #: 101

() -
Tobacco Tax #: _____
PST #: _____
Payment Due: 0 Days

Welcome # _____
Card#: ***** [REDACTED]

GROCERY

06827400014	NESTLE PURE WATR	R	4.99
*7207	RECYCLE	R	0.48
*44000630662	DEPOSIT	R	2.40
04127102518	INTL DELIGHT FV	R	3.17
06820020315	LTNT CREAM 10%	R	1.59
*44000493652	DEPOSIT	R	0.10

SUBTOTAL 12.73

TOTAL 12.73

Number of Items: 3

-----TRANSACTION RECORD-----

GLOBAL PAYMENTS MERCHANT # 5202130
Retail RCVC
5101 46 St
Bonnyville AB
STORE 06717
SLIP # 622400
TERM Z0671704C
REG 4
RETAIN THIS COPY FOR YOUR RECORDS
** Purchase ** Proximity
CARD # ***** [REDACTED]
MASTERCARD
REF # AUTH # RESP 001
051001001011 [REDACTED]
AID: A0000000041010
TSI 6800 TVR 0000008000

DATE TIME AMOUNT
09/24/2015 12:26:19 \$ 12.73

APPROVED

No Signature Required

CREDIT TN 12.73

PC Plus
Closing Balance 5640



68671704622420150924

GST # 12223-5922 RT0001

THANK YOU FOR SHOPPING RCVC
MANAGER: CURTIS
Thank You, Come Again!
BUY MORE PAY LESS!
THANK-YOU FOR SHOPPING RCVC 6717
HOPE TO SEE YOU SOON!
2015/09/24
Tetiana 317

12:27
04 6224

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: 06717
CODE: 092415 122704 6224 06717



**BONNYVILLE
WATER CONDITIONING LTD.**

6021 - 50 th Avenue
Bonnyville, Alberta T9N 2L3
Ph. 826-4418 Fax: 826-3603
email: bwc1@telus.net

INVOICE K 0199

NAME ~~Scott~~ Scott Cyr DATE Oct 7/15
ADDRESS MLA
P.O.# _____
GST # R100580331
ARTICLE Water
DATE WANTED _____ DELIVER ☒

1	Water @ 6.00	6 00
1	Containers @ 14.70	
Returns:		
1	Containers @ 14.70	()

Payment Method:	SUB-TOTAL	6 00
	G.S.T.	0
	TOTAL	6 00
	DEPOSIT	
Authorization:	BALANCE	

TERMS - CASH ON INSTALLATION

White - Customer Copy Yellow - Office Copy

Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA

Claimant Name: Bonnyville Water Conditioning Ltd.

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Water for the constituency Office to serve to constituents.

A handwritten signature in black ink, appearing to be 'S. Cyr', is written over the signature line.



An Office DEPOT, Inc. Company
une société d'Office DEPOT, Inc

COST CENTRE BILLING REPORT

REQUISITION REPORT

SOLD TO ACCOUNT NO.

ALTA LEGISLATIVE ASSEMBLY M
9718 107 ST NW
9TH FLR
EDMONTON, AB T5K 1E4

G.S.T.

R894032192

Q.S.T.

1001640701TQ0009

PERIOD ENDING

10/31/2015

ACCT MGR NO.

42902

INVOICE NO.
COST CENTRE

H897710

SHIP TO ACCOUNT NO. 457347

ALTA LEGISLATIVE ASSEMBLY
BONNYVILLE COLD LAKE
2-4428 50 AVE
BONNYVILLE, AB T9N 2G4

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
REQ NO.	G65029		DATE	10/21/2015	ATTENTION	Bonnyville Cold Lake	P.O.#	MLA163253	G&T ORDER NO	130931-00
1	1	0	BX	74-09573	STARBUCKS DECAF PIKE KCUP	19.39	NET	19.39	19.39	
3	3	0	BX	74-01104	K CUP TM HAZELNUT 24'S	15.51	NET	15.51	46.53	
1	1	0	BX	74-01108	K CUP TM DECAF HAZELNUT 24'S	15.51	NET	15.51	15.51	
1	1	0	BX	40-33717	K CUP VH COLUMBIAN MED 24'S	15.51	NET	15.51	15.51	
1	1	0	BX	74-09572	STARBUCKS PIKE PLACE RST KCUP	19.39	NET	19.39	19.39	
1	1	0	BX	40-19717	K CUP VH BREAKFST BLND LG 24'S	15.51	NET	15.51	15.51	

4451
Hosting

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Scott Cyr, MLA for Bonnyville-Cold Lake

Claimant Name: Bonnyville Seniors Citizens Drop In Centre

Expense Category: Hosting

For hosting, select one:

- ☐ Individual Constituent(s)
☐ Individual Stakeholder(s)
☒ Group: Constituent Farmers, Ranchers and Public

Purpose:

Town Hall Meeting regarding Bill 6

\$50.00

Bonnyville Senior Citizens Drop-In Centre 4813-47 Avenue Bonnyville, Alberta. T9N 1M4		OUR NUMBER NOTRE COMMANDE 2059111		
TAX REG. NO. _____ NO DE COMMANDE ORDER NO. _____ VENDU À SOLD TO <u>Scott Cyr MLA</u> ADRESSE ADDRESS <u>Bonnyville, Alberta</u> EXPÉDIÉ À SHIP TO _____ ADRESSE ADDRESS _____		Citizens Society DATE <u>Dec 04, 2015</u>		
DATE D'EXPÉDITION SHIPPING DATE	VIA	CONDITIONS TERMS	ACHETEUR BUYER	VENDEUR SALESPERSON
<div>One hundred cup coffee</div> <div>50 -</div>				
<div></div> <div></div>				
SIGNATURE		TPS/GST	PIPST	TOTAL