

LEGISLATIVE ASSEMBLY OF ALBERTA  
 Member EDR 2023-24  
 051 - Bonnyville-Cold Lake-St. Paul - MLA Scott Cyr  
 For Expenses Processed JAN 1 - MAR 31, 2024

	Budget	Reimbursed This Qtr	Reimbursed To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00	\$20.00	\$102.29
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$1,348.08	\$2,027.39
Member Travel (Meal Per Diems) - \$			
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$13,510.00
Travel Accommodations Allowance		\$640.30	\$1,593.82
Travel Accommodations Allowance (days; 10 max) - NF	10.0	2.0	6.0
<b>Other</b>			
Hosting - \$		\$885.96	\$1,240.72
Event Tickets Disclosable - \$		\$250.00	\$250.00
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (50.5 cents per km)</b>			
Constituency Travel MLA (KM) - NF	80,000.0	7,520.0	14,423.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	<u>80,000.0</u>	<u>7,520.0</u>	<u>14,423.0</u>
<b>Adverse Driving Conditions</b>			
Special Trips (5 trips per year) - NF	5.0		2.0
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52.0	6.0	16.0
<b>Other Travel</b>			
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

**Note:**

Expenses are reported in the Quarter the expense is reimbursed and not necessarily the Quarter the expense was incurred.

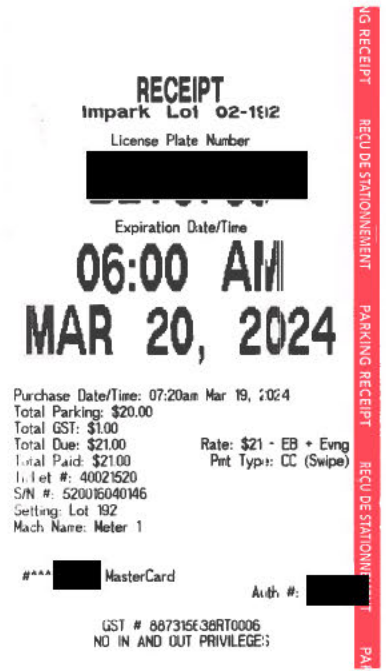
The reader should take this into account when reviewing the disclosure



**Legislative Assembly of Alberta**  
**ME39312 - Members' Other Expenses Claim Form**

MLA Parking plus GST - \$20

Receipt Description	Impark Parking - Edmonton - for RMA
Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Member Parking



I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



# Legislative Assembly of Alberta

## MP39311 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP39311
Description	March 2024 - Per-Diems
Claimant	Scott Cyr
Employee Number	██████████
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	April 8, 2024
Date Received	April 12, 2024
Mailing Address	██

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
6936	Mar 11, 2024	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
6937	Mar 12, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6938	Mar 13, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6939	Mar 14, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6940	Mar 18, 2024	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
6941	Mar 19, 2024	60 km from Perm. Res.	Edmonton		X		16.19	0.81	17.00
6942	Mar 20, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6943	Mar 21, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6944	Mar 25, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6945	Mar 26, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6946	Mar 27, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
6947	Mar 28, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
							561.94	28.06	590.00

This Claim Form has been certified by the Member to 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.



# Legislative Assembly of Alberta

## MP37420 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP37420
Description	February 2024 - Per-Diems
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	March 8, 2024
Date Received	March 12, 2024
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
5719	Feb 12, 2024	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
5720	Feb 14, 2024	60 km from Perm. Res.	Edmonton		X	X	41.90	2.10	44.00
5721	Feb 15, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
5722	Feb 26, 2024	60 km from Perm. Res.	Edmonton			X	25.71	1.29	27.00
5723	Feb 27, 2024	60 km from Perm. Res.	Edmonton	X		X	38.10	1.90	40.00
5724	Feb 28, 2024	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
5725	Feb 29, 2024	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
							271.43	13.57	285.00

This Claim Form has been certified by the Member to 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.



# Legislative Assembly of Alberta

## MP35958 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP35958
Description	December 2023 - Per-Diems
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	February 13, 2024
Date Received	February 14, 2024
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
4367	Dec 1, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4368	Dec 4, 2023	60 km from Perm. Res.	Edmonton	X	X	X	39.57	1.98	41.55
4369	Dec 5, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4370	Dec 6, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4371	Dec 7, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
							118.81	5.94	124.75

This Claim Form has been certified by the Member to 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.



# Legislative Assembly of Alberta

## MP35955 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP35955
Description	November 2023 - Per-Diems
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	February 13, 2024
Date Received	February 14, 2024
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
4348	Nov 1, 2023	60 km from Perm. Res.	Edmonton	X	X	X	39.57	1.98	41.55
4349	Nov 2, 2023	60 km from Perm. Res.	Edmonton	X	X	X	39.57	1.98	41.55
4350	Nov 6, 2023	60 km from Perm. Res.	Edmonton	X	X	X	39.57	1.98	41.55
4351	Nov 7, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4352	Nov 8, 2023	60 km from Perm. Res.	Edmonton	X	X	X	39.57	1.98	41.55
4353	Nov 9, 2023	60 km from Perm. Res.	Edmonton	X	X	X	39.57	1.98	41.55
4354	Nov 20, 2023	60 km from Perm. Res.	Edmonton	X	X	X	39.57	1.98	41.55
4355	Nov 21, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4356	Nov 22, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4357	Nov 23, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4358	Nov 27, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4359	Nov 28, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4360	Nov 29, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
4361	Nov 30, 2023	60 km from Perm. Res.	Edmonton	X	X		19.81	0.99	20.80
							395.90	19.80	415.70

This Claim Form has been certified by the Member to 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.



# Legislative Assembly of Alberta

## MR33358 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR33358
Description	2024 January
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	January 2, 2024
Date Received	January 5, 2024
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
January	2024	1930.00
	Grand Total	1930.00

Office Use Only	[REDACTED]
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I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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



# Legislative Assembly of Alberta

## MR35714 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR35714
Description	2024 February
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	February 1, 2024
Date Received	February 1, 2024
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
February	2024	1930.00
	Grand Total	1930.00

Office Use Only	[REDACTED]
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I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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





# Legislative Assembly of Alberta

## MR37238 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR37238
Description	2024 March
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	March 1, 2024
Date Received	March 6, 2024
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
March	2024	1930.00
	Grand Total	1930.00

Office Use Only	[REDACTED]
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I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

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



**Legislative Assembly of Alberta**

**MR37422 - Members' Temporary Accommodation Allowance Claim Form**

Receipt Description	
Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Member Travel



P.O Box 40  
 Jasper, AB, Canada T0E 1E0  
 T (780) 852-3301 F (780) 852-5107  
 G.S.T. Registration # 84968 1721 RT0004

Room : 0271  
 Folio # :   
 Invoice # :   
 Cashier # : 1082  
 Page # : 1 of 1  
 Group Name : UCP Caucus Retreat

**United Conservative Party**  
**Mr Scott Cyr**



Arrival : 02-12-24  
 Departure : 02-14-24

Date	Description	Additional Information	Charges	Credits
02-12-24	Caucus Meetings 2024		301.00	
02-12-24	Destination Marketing Fee		8.07	
02-12-24	Room GST		13.85	
02-12-24	Room Tourism Levy		11.08	
02-12-24	Package GST		1.60	
02-13-24	Caucus Meetings 2024		301.00	
02-13-24	Destination Marketing Fee		8.07	
02-13-24	Room GST		13.85	
02-13-24	Room Tourism Levy		11.08	
02-13-24	Package GST		1.60	
02-14-24	Mastercard	XXXXXXXXXX [REDACTED] XX/XX		671.20
<b>Total</b>			<b>671.20</b>	<b>671.20</b>
<b>Balance Due</b>			<b>0.00</b>	

**GST Summary**

Room : 27.70  
 F&B : 0.00  
 Other : 3.20  
**Total : 30.90**

Thank you for choosing Fairmont Hotels & Resorts.  
 To provide feedback about your stay, please contact Garrett Turta, General Manager at [Garrett.TurtaGM@fairmont.com](mailto:Garrett.TurtaGM@fairmont.com).  
 We also invite you to share memories of your experience on our community forum - visit [www.everyonesanoriginal.com](http://www.everyonesanoriginal.com).

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



**Legislative Assembly of Alberta**  
**VF22280 - Vendor Payment Submission Form**

Hosting - \$138.05 plus GST

Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Hosting - Individual Stakeholder(s)



**Bonnyville Neighbourhood Inn**  
 5011-66 Street  
 Bonnyville, AB T9N 2L9  
 780-826-3300  
<https://neighbourhoodinn.com/>

Page 1 of 1

Attn: Julie Krawiec  
 Bonnyville/Cold Lake/St. Paul

Folio ID	Folio	Checkin	CheckOut	Balance
(9002)		03/06/2024		
Master Folio				
MLA Scott Cyr,				

CA

Date	Room	Description / Voucher	Charges	Credits	Balance
03/07/2024	9002	Banquets Coffee Break - 60085	117.00		
03/07/2024	9002	GST F&B - 60085	15.85		
03/07/2024	9002	Banquet Gratuities - 18% F&B Only	21.05		

*Thank you for staying with us!*  
 Payment is due upon receipt.  
 khaines@neighbourhoodinn.com

10830

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.



**Legislative Assembly of Alberta**  
**VF22321 - Vendor Payment Submission Form**

Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Hosting - Individual Constituent(s)

February 16<sup>th</sup>, 2024

Judith V. Hess

[Redacted]

St. Paul, Alberta

T0A 3A3

Mr. Scott Cyr, MLA

Bonnyville-Cold Lake-St. Paul Constituency Office

[Redacted]

Bonnyville, Alberta

[Redacted]

Attention: Julie

**Re: St. Paul Open House – Food preparation and serving – Friday, February 16<sup>th</sup>, 2024**

Invoice 2024 - 01

Provided finger foods and non-alcoholic beverages for the price of \$550.00.

I trust the above is satisfactory.

Sincerely,

Judith V. Hess

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.



# Legislative Assembly of Alberta

## VF22321 - Vendor Payment Submission Form

Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Hosting - Individual Constituent(s)

48 deviled eggs  
Philly cheesy dip - cold  
Cheesy Chile dip - cold  
Surprise spread - cold  
Frank Hot sauce chicken bits - hot  
BLT dip  
cream puffs  
Spinach dip - hot  
Meat Tray  
Fruit Tray  
Veggie Tray  
Cheese Tray  
extra baguettes  
Olives  
pickles  
crackers  
plates, napkins, coffee, tea and two punches (non-alcoholic)

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.



**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Receipt Description	Costco - Coffee K-Cup Pods & Cups for office use
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other

Hosting - \$85.98



**Order Details**

<b>Order Number</b> 1073587393	<b>Payment Method</b> Mastercard ending in [REDACTED]	<b>Shipping Address</b> [REDACTED]	<b>Billing Address</b> Julie Krawiec [REDACTED]
<b>Order Date</b> 11/21/2023	[REDACTED]	[REDACTED]	[REDACTED]
<b>Membership Number</b> [REDACTED]			

[Feedback](#)

Item	Quantity	Status	Total Price
Kirkland Signature Organic Summit Fair Trade Coffee K-Cup Pods, 120-count Item #4272379 \$42.99 Discount \$8.00	1	Delivered	\$42.99
Kirkland Signature Organic Breakfast Blend Fair Trade Coffee K-Cup Pods, 120-count Item #4272377 \$42.99 Discount \$8.00	1	Delivered	\$42.99

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Receipt Description	Costco - Coffee K-Cup Pods & Cups for office use
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



Order Summary

Subtotal (3 Items)	
Shipping	
Costco Grocery Surcharge	
GST (G)	
HST (H)	
PST (P)	
QST (Q)	
Order Total	

GST/HST|PST Numbers for Costco.ca  
GST/HST: 121476329RT0001  
British Columbia: PST-1001-0028  
Manitoba PST: 261561-4  
Saskatchewan PST: 1708601  
Quebec QST: 1018199561TQ0001  
Newfoundland SSBT: 605515

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Hosting - \$4.05

Receipt Description	Sobey's - Coffee Creamer for Office Use
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



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

Served by: Jocell



**GROCERY**  
 DairyLnd 18% CffCrn \$3.89 C  
 +EHC \$0.06 R  
 +Deposit \$0.10 R

---

SUBTOTAL \$4.05  
 TOTAL TAX \$0.00  
**TOTAL \$4.05**

MasterCard TENDER \$4.05  
 Cash CHANGE \$0.00

NUMBER OF ITEMS 1

MERCHANT 23875013 RF  
 TERMINAL ID S02387501301  
 \*\* \$ 4.05  
 RCPT 3976000  
 RESP 001  
 TIME 08:57:42

REF# 001611024  
 APPL PC Mastercard  
 AID A0000000041010

00 APPROVED - THANK YOU

Term Tran Store Oper 02/05/24  
 1 3976 3158 109 08:57:45

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

\*\*\*\*\*  
 Sobeys West Customer Care  
 1-866-948-0196  
 \*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.





**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Hosting - \$4.05

Receipt Description	Sobey's - Coffee Creamer for Office Use
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



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

Served by: Charlotte

Member card number: \*\*\*\* [REDACTED]

**GROCERY**  
 Dairy Ind 18% : 10cm \$3.89 C  
 +EHC \$0.06 R  
 +Deposit \$0.10 R

---

SUBTOTAL \$4.05  
 TOTAL TAX \$0.00  
**TOTAL \$4.05**  
 Master Card TENDER \$4.05  
 Cash CHANGE \$0.00

NUMBER OF ITEMS 1

Earn 2 Sobeys points for every \$1 spent when using the Scotiabank Sobeys Visa Card. Learn more at [scotiabank.com/2xthepoints](http://scotiabank.com/2xthepoints)

00 APPROVED - THANK YOU

Term Trans Store Oper 02/23/24  
 1 394 3158 124 08:52:39

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

\*\*\*\*\*  
 Sobeys West Customer Care  
 1-866-948-0196  
 \*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



Legislative Assembly of Alberta  
SE37651 - Staff Other Expenses Claim Form

Receipt Description	Wholesale Club - Coffee Creamer for office use
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other

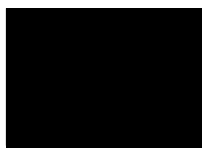
Hosting - \$3.15



WHOLESALE CLUB LOCATION #6717  
STORE TELEPHONE NUMBER 780-812-3956  
INVOICE #: 0671705071233732

CASH SALES  
Account # : 101

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



22-DAIRY  
06820051114 HALF&HALF CRM RQ  
\$2.99 Int 4, \$3.69 ea  
1 @ \$2.99 ea 2.99  
RECYCLING FEE 0.06  
DEPOSIT 1 0.10  
SUBTOTAL 3.15  
TOTAL 3.15  
Number of Items: 1

Trans. Type: PURCHASE  
Account: MASTERCARD CASH 3.15  
Card Type: CREDIT

8000000041010 00  
00 APPROVED - THANK YOU  
Retain this copy for statement validation  
\*\*\* CUSTOMER COPY \*\*\*  
CREDIT TN 3.15

\*\*\*\*\*  
GST # 12223-5922 RT0001  
THANK YOU FOR SHOPPING AT WHOLESALE CLUB  
STORE MANAGER CURTIS  
BUY MORE PAY LESS!  
THANK-YOU FOR SHOPPING RCWC 6717  
780-812-3956  
2023/12/07 Trinit 231 05 3732 13:04  
\*\*\*\*\*  
TELL US HOW WE DID TODAY! VISIT  
WWW.STOREOPINION.CA OR CALL  
1-800-531-2928. WIN 1 of 2 MONTHLY  
PRIZES OF 1 MILLION PC OPTIMUM POINTS  
OR \$1000 IN PC GIFT CARDS. SEE  
WWW.STOREOPINION.CA FOR FULL  
CONTEST RULES. STORE: 06717  
CODE: 120723 130405 3732 06717  
\*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Hosting - \$4.05

Receipt Description	Sobey's - Coffee Creamer for Office Use
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



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

Served by: Monique



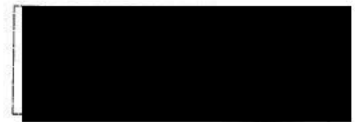
**GROCERY**  
 DairyLnd 18% CffCrm \$3.89 C  
 +EHC \$0.06 R  
 +Deposit \$0.10 R

---

SUBTOTAL \$4.05  
 TOTAL TAX \$0.00  
**TOTAL \$4.05**

MasterCard TENDER \$4.05  
 Cash CHANGE \$0.00

NUMBER OF ITEMS 1



The Scotiabank Scene+ Visa card lets you earn Scene+ points on purchases every time you shop. Learn more at [scotiabank.com/earnpointsfaster](http://scotiabank.com/earnpointsfaster)

MERCHANT 23875013 RF  
 TERMINAL ID S02387501301  
 \*\* Purchase \*\* \$ 4.05  
 CARD MC RCPT 5315000  
 NO. \*\*\*\*\* RESP 001  
 TIME 08:50:47

APPL  
 ATD  
 00 APPROVED - THANK YOU

Term Tran Store Oper 01/09/24  
 1 5315 3158 105 08:50:50

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

\*\*\*\*\*  
 Sobeys West Customer Care  
 1-866-948-0196  
 \*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Hosting - \$17.98

Receipt Description	Sobey's - Tea - KCup for Office Use
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



Sobeys Bonrville  
 4501-50 Ave  
 780.826.3548  
 GST #102 624 897 R99002

Served by: Adriane

GROCERY  
 Tea KCup Orange Pekoe \$8.99 C  
 YOU SAVED \$1.50  
 Tea KCup Orange Pekoe \$8.99 C  
 YOU SAVED \$1.50

SUBTOTAL \$17.98  
 TOTAL TAX \$0.00

**TOTAL \$17.98**  
 Master Card TENDER \$17.98  
 Cash CHANGE \$0.00

NUMBER OF ITEMS 2

\*\*\*\*\*YOUR SAVINGS\*\*\*\*\*  
 Discounts & Specials \$3.00  
 Your Total Savings \$3.00  
 Percentage Savings 14%

Earn 2 Scener points for every \$1 spent  
 when using the Scotiabank Scener  
 Visa Card. Learn more at  
[scotiabank.com/2xthepoints](http://scotiabank.com/2xthepoints)

MERCHANT 23875013 RF  
 TERMINAL ID 502387501301  
 \*\* Purchase \*\* \$ 17.98  
 RPT 3011000  
 RESP 001  
 TIME 12:23:18

00 APPROVED - THANK YOU

Term	Tran	Store	Oper	
1	3011	3158	106	03/01/24 12:23:20

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

\*\*\*\*\*  
 Sobeys West Customer Care  
 1-866-948-0196  
 \*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Hosting - \$5.17

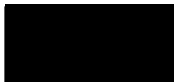
Receipt Description	Wholesale Club - Water Bottles for Office Usage
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



WHOLESALE CLUB LOCATION #6717  
 STORE TELEPHONE NUMBER 780-812-3956  
 INVOICE #:0671703040342978

**CASH SALES**  
 Account # : 101

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



**21-GROCERY**  
 06038375938 RC SPR WTR HRJ  
 \$2.29 Int 4, \$5.29 ea  
 1 @ \$2.29 ea 2.29  
 RECYCLING FEE 0.48  
 DEPOSIT 1 2.40  
**SUBTOTAL 5.17**  
**TOTAL 5.17**  
 Number of Items: 1

Trans. Type: PURCHASE  
 Account: MASTERCARD CASH 5.17  
 Card Type: CREDIT  
 Card Number: \*\*\*\*\*



Retain this copy for statement validation  
 \*\*\* CUSTOMER COPY \*\*\*

CREDIT TN 5.17

PC Optimun  
 Points Redeemed  
 Closing Balance



99671703297820240304130443  
 \*\*\*\*\*  
 GST # 12223-5922 RT0001

THANK YOU FOR SHOPPING AT WHOLESALE CLUB  
 STORE MANAGER CURTIS  
 BUY MORE PAY LESS!  
 THANK-YOU FOR SHOPPING RCWC 6717  
 780-812-3956  
 2024/03/04 Cayley 277 03 2978 13:04  
 \*\*\*\*\*  
 TELL US HOW WE DID TODAY! VISIT  
 WWW.STOREOPINION.CA OR CALL  
 1-800-531-2928. WIN 1 of 2 MONTHLY  
 PRIZES OF 1 MILLION PC OPTIMUM POINTS  
 OR \$1000 IN PC GIFT CARDS. SEE  
 WWW.STOREOPINION.CA FOR FULL  
 CONTEST RULES. STORE: 06717  
 CODE: 030424 130403 2978 06717  
 \*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



**Legislative Assembly of Alberta**  
**SE37651 - Staff Other Expenses Claim Form**

Hosting - \$4.85

Receipt Description	Wholesale Club - Office Cleaning Supplies
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



WHOLESALE CLUB LOCATION #6717  
 STORE TELEPHONE NUMBER 780-812-3956  
 \*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*  
 INVOICE #:0671704150346141

**CASH SALES**  
 Account # : 101

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

21. GROCERY



06820020290 LTNT WHIP CRM RQ 4.69  
 RECYCLING FEE 0.06  
 DEPOSIT 1 0.10

**SUBTOTAL**  
 0=GST 5% 63.45 @ 5.000%

**TOTAL**  
 Number of Items: 6

Trans. Type: PURCHASE  
 Account: MASTERCARD CARD 71.47  
 Card Type: CREDIT  
 Card Number: \*\*\*\*\* P  
 Date/Time: 24/03/15 12:49:28



Retain this copy for statement validation  
 \*\*\* CUSTOMER COPY \*\*\*

**CREDIT TN**

PC Optimum  
 Points Redeemed  
 Closing Balance



99671704614120240315124934

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

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\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

\*\*\*\*\* DUPLICATE RECEIPT \*\*\*\*\*

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.





**Legislative Assembly of Alberta**  
**VF19666 - Vendor Payment Submission Form**

Event tickets - \$250.00

Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Other

**Bonnyville Jr. A Pontiacs**  
 PO Box 6554  
 Bonnyville, Alberta T9N 2G6

**INVOICE**

Invoice No.: 6143126  
 Date: Dec 28, 2023  
 Ship Date:  
 Page: 1  
 Re: Order No.

Sold to:

Scott Cyr MLA  
 [Redacted]

Ship to:

Scott Cyr MLA  
 Julie Krawiec  
 [Redacted]

Business No.: 133659920RT0001

Item No.	Unit	Quantity	Description	Tax	Unit Price	Amount
		2	Victor Ringuette Sportsman Dinner Tickets - 2023/24		125.00	250.00
			Subtotal:			250.00
<p>TICKETS FOR:            MLA SCOTT CYR            MRS MEGAN CYR</p>						
Shipped By: _____ Tracking Number: _____					Total Amount	250.00
Comment: Tickets do not include a Tax Receipt or Alcohol					Amount Paid	0.00
Sold By: _____					Amount Owning	250.00

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.





**Legislative Assembly of Alberta**  
**VF19666 - Vendor Payment Submission Form**

Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Other

P821844286 - 2023-12-28 11:35:33 286362846947-2610210 Tickets: 2

**NAME: SCOTT CYR**  
**COMPANY: SCOTT CYR MLA**  
**PHONE:** [REDACTED]  
**ADDRESS:** [REDACTED]  
**AMOUNT: \$250.00 - CASH**  
**SIGNED:**

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.