



**LEGISLATIVE ASSEMBLY OF ALBERTA**  
**Member EDR 2025-26**  
**051 - Bonnyville-Cold Lake-St. Paul - Scott Cyr**  
**For Expenses Processed Jan 1 - Mar 31, 2026**

	Budget	Reimbursed This Quarter	Reimbursed to Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900	\$48.92	\$173.67
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$1579.97	\$3894.23
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$26,400.00/yr max)	\$26400	\$6600	\$26400
Travel Accommodations Allowance		\$82.16	\$1344.76
Travel Accommodations Allowance (days; 10 max) - NF	10	1.0	7.0
<b>Other</b>			
Hosting - \$		\$531.62	\$611.02
Event Tickets Disclosable - \$			\$650
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (50.5 cents per km)</b>			
Constituency Travel MLA (KM) - NF	80000	3,170.0	15,150.0
Constituency Travel Staff (KM) - NF		0.0	0.0
Total Constituency Travel (KM) - NF	80,000.0	3,170.0	15,150.0
Adverse Driving Conditions	0		
Special Trips (5 trips per year) - NF	5	1.0	2.0
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF	0		
Use of a Private Automobile (52 trips per year) - NF	52	4.0	20.0
<b>Other Travel</b>			
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

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**  
**ME59863 - Members' Other Expenses Claim Form**

MLA Parking Cap - \$26.67 + GST

Receipt Description	Parking in Calgary for Meetings - Indigo
Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Member Parking

**scottjcyr@gmail.com**

**From:** Indigo Park Canada <noreplycanada@indigoneo.ca>  
**Sent:** February 5, 2026 12:20 PM  
**To:** [REDACTED]  
**Subject:** Confirmation & receipt of your reservation: C120 - Rogers 2 577929262 Day Max



**Thank you for choosing Indigo!**

This receipt contains the details of your purchase and any relevant information for your visit. We recommend keeping this document in case you need assistance.

Pass is non-refundable.

[GET MY PASS](#)

**Information**

**Transaction:** 577929262

**Licence Plate:** [REDACTED]

**Location:** C120 - Rogers 2  
 636 4 Ave SW  
 Calgary, Alberta T2P0J9

<b>Start</b>	Thu, Feb 5, 2026 <b>12:21 PM</b>	<b>End</b>	Thu, Feb 5, 2026 <b>07:00 PM</b>
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**Details of your purchase**

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**  
**ME59863 - Members' Other Expenses Claim Form**

Receipt Description	Parking in Calgary for Meetings - Indigo
Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Member Parking

**Total** **\$28.00**

Rate(Tax incl.)

Time

Feb 5, 2026 12:21 PM - Feb 5, 2026 07:00 PM Day Max **\$28.00**

GST 5.000% \$1.33

**Amount Paid \$28.00**

**Made on:** Thu, Feb 5, 2026 12:20 PM  
**Payment method:** Apple Pay-Mastercard  
**Card number:** Apple Pay-Mastercard

INDIGO PARK CANADA INC. VAT# 120996095  
 INDIGO PARK CANADA INC. VAT2# NONE

LinkedIn | Instagram

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Indigo Park Canada Inc. | 1 Place Ville Marie, Suite 1130, Montreal, Quebec H3B 2A7 | 2026 All rights reserved

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  
ME59863 - Members' Other Expenses Claim Form

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

RECEIPT  
Impark Lot 02-182  
License Plate Number  
[REDACTED]  
Expiration Date/Time  
06:00 AM  
FEB 28, 2026

Purchase Date/Time: 08:05am Feb 27, 2026  
Total Parking: \$21.25  
Total Processing Fee: \$1.00  
Total GST: \$1.11  
Total Due: \$23.36 Rate: \$21.25 - EB + GST  
Total Paid: \$23.36 Pmt Type: CC (Swipe)  
Ticket #: 03992420  
S/N #: 520119290849  
Setting: Lot 182  
Mach Name: Meter 3

\*\*\*\* [REDACTED] MasterCard

Auth #: [REDACTED]

gst no. 887315638RT0006  
NO TN AND OUT PRTUTIFGFS

MLA Parking Cap - \$22.25 + GST

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

## MP58003 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP58003
Description	December 2025 - Per-Diems
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	January 26, 2026
Date Received	January 27, 2026
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
21077	Dec 1, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
21078	Dec 2, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
21079	Dec 3, 2025	60 km from Perm. Res.	Edmonton		X		17.14	0.86	18.00
21080	Dec 4, 2025	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
21081	Dec 5, 2025	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
21082	Dec 8, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
21083	Dec 9, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
21084	Dec 10, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
21085	Dec 11, 2025	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
21086	Dec 12, 2025	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
							355.22	17.78	373.00

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

## MP58259 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP58259
Description	January 2026 - Per-Diems
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	February 11, 2026
Date Received	February 11, 2026
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
21255	Jan 28, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
21256	Jan 29, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
21257	Jan 30, 2026	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
							151.43	7.57	159.00

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

## MP59862 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP59862
Description	February 2026 - Per-Diems
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	April 14, 2026
Date Received	April 14, 2026
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
23696	Feb 5, 2026	60 km from Perm. Res.	Calgary	X	X	X	56.19	2.81	59.00
23697	Feb 11, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23698	Feb 12, 2026	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
23699	Feb 23, 2026	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
23700	Feb 24, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23701	Feb 25, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23702	Feb 26, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23703	Feb 27, 2026	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
23704	Feb 28, 2026	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
							427.62	21.38	449.00

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

## MP59865 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP59865
Description	March 2026 - Per-Diems
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	April 14, 2026
Date Received	April 14, 2026
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
23705	Mar 9, 2026	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
23706	Mar 10, 2026	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
23707	Mar 11, 2026	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
23708	Mar 12, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23709	Mar 16, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23710	Mar 17, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23711	Mar 18, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23712	Mar 19, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23713	Mar 23, 2026	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
23714	Mar 24, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23715	Mar 25, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23716	Mar 26, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23717	Mar 30, 2026	60 km from Perm. Res.	Edmonton	X			12.38	0.62	13.00
23718	Mar 31, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
							645.70	32.30	678.00

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

## MR57617 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR57617
Description	2026 January Temporary Accomodation
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	January 5, 2026
Date Received	January 5, 2026
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
January	2026	2200.00
	Grand Total	2200.00

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

## MR58002 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR58002
Description	2026 February Temporary Accommodation
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	January 26, 2026
Date Received	January 27, 2026
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
February	2026	2200.00
	Grand Total	2200.00

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

## MR58415 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR58415
Description	2026 March Temporary Accommodations
Claimant	Scott Cyr
Employee Number	[REDACTED]
Constituency	Bonnyville-Cold Lake-St. Paul 51 (Scott Cyr)
Date Submitted	February 23, 2026
Date Received	February 24, 2026
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
March	2026	2200.00
	Grand Total	2200.00

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

## VF36280 - Vendor Payment Submission Form

Travel Accommodations Allowance \$82.16 + GST

Member Name	Scott Cyr
Claimant	Scott Cyr
Expense Category	Other



**MOTEL 6 - AIRDRIE**  
 133 Gateway Drive NE, Airdrie T4B 0J6  
 AB CAN  
 403960055  
 motel6airdrie@outlook.com

Date Range: 2026-02-04 - 2026-02-05  
 Tax ID :

### Guest Folio

Confirmation No - [REDACTED]

#### Primary Guest

Guest Name  
 Address  
 City / State / Zip Code  
 Country

Scott CYR



CAN

#### Stay Details

Check In Date  
 Check Out Date  
 Room  
 Source  
 Guests

Feb 04, 2026  
 Feb 05, 2026  
 1QN - 410  
 PHONE CALL  
 1/0

#### Company Details

Name  
 Tax ID  
 PO Number  
 Account Name

#### Other Details

Tax Invoice  
 Tax/Fee  
 Exemption  
 Tax/Fee  
 Exempt Date  
**Travel Agent**  
 IATA  
 Name

Date	Type	Description	Amount
Feb 04, 2026	Payments	MASTER- [REDACTED]	-\$86.11
Feb 04, 2026	Charge	ROOM RENT	\$79.00
Feb 04, 2026	Tax	AB Tourism Levy	\$3.16
Feb 04, 2026	Tax	GST	\$3.95

Summary	
Type	Amount
CREDIT CARD	-\$86.11
ROOM RENT	\$79.00
AB Tourism Levy	\$3.16
GST	\$3.95
<b>Folio Balance</b>	<b>\$0.00</b>

Check In Time 04:48 PM  
 Check Out Time 08:54 AM  
 Page1 / 1

Thank you for choosing Motel 6 – Airdrie, AB (GST # 866808363001). We appreciate your business.

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$4.14

Receipt Description	Sobey's - \$4.14 - Creamer for office
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: Anita

GROcery  
 Whipping Cream 33% \$9.99 C  
 EHC \$0.05 R  
 Deposit \$0.10 R

SUBTOTAL \$4.14  
 TOTAL TAX \$0.00

TOTAL \$4.14  
 MasterCard TENDER \$4.14  
 Cash CHANGE \$0.00

NUMBER OF ITEMS 1

MERCHANT 23875013 RF  
 TERMINAL ID 502387501330  
 \*\* Purchase \*\* \$ 4.14  
 CARD MC RCPT 4199000  
 NO. \*\*\*\*\* RESP 001  
 DATE 07/15/2025 TIME 09:18:29  
 AUTH # [REDACTED]  
 REF# 001171006  
 APPL PC Mastercard  
 AID A0000000041010

00 APPROVED - THANK YOU

Term Tran Store Oper 07/15/25  
 30 4199 3158 127 09:18:29

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$24.33

Receipt Description	Wholesale Club - \$24.33 - Water for Town Halls
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Hosting - Group (Constituents) Hosting Purpose - July 16 & 17 Town Halls - 4 Communities in Constit



USE YOUR RECEIPT TO CLAIM YOUR POINTS!  
 SCAN THIS CODE TO TELL US ABOUT IT !!

WHOLESALE CLUB LOCATION #6717  
 STORE TELEPHONE NUMBER 780-812-3956  
 INVOICE #:0671705150751824

**CASH SALES**

Account # : [REDACTED]

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

Welcome #

21-GROCERY  
 (C)06827400014 PURE WATER MRJ 14.97  
 3 @ \$4.99  
 RECYCLING FEE 2.16  
 38\$0.72  
 DEPOSIT 1 7.20  
 38\$2.40  
**SUBTOTAL 24.33**

**TOTAL 24.33**  
 Number of Items: 3

Trans. Type: PURCHASE  
 Account: MASTERCARD CAD\$ 24.33  
 Card Type: CREDIT

Card Number: [REDACTED]  
 Date Time: 25/07/15 19:22:42  
 Ref. #: 112700  
 Auth #: [REDACTED]

PC Mastercard  
 A000000041010 0000008001  
 00 APPROVED - THANK YOU  
 Retain this copy for statement validation  
 \*\*\* CUSTOMER COPY \*\*\*

CREDIT TN [REDACTED]  
 PC Optimum  
 Points Redeemed [REDACTED]  
 Closing Balance [REDACTED]



9967705182420250715192246  
 GST # 12223-5922 RT0001

THANK YOU FOR SHOPPING AT WHOLESALE CLUB  
 STORE MANAGER CURTIS

2025/07/15 Mary 273 05 1824 19:22

Tell us how we did today! Visit  
 storeopinion.ca or call 1-800-531-2928  
 Win a \$1,000 PC gift card or  
 1,000,000 PC Optimum points  
 Full contest rules on survey website  
 CODE: 071525 192205 1824 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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$115.00 + GST

Receipt Description	Tim Horton's Coffee-St.Paul & Cold Lake Town Halls
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Hosting - Group (Constituents) Hosting Purpose - St. Paul & Cold Lake Town Halls July 16

*Tim Hortons*

Tim Hortons # 133595  
 102-5401 43rd St, Bonnyville, AB, T9H 2G4  
 (780) 826-3354

Take Out  
 Order #: 357

1 Cow 70 Orig Blend \$115.00  
 1 Tyre Rewards Scan

Subtotal: \$115.00  
 GST: \$5.75  
 Total Tax: \$5.75

MasterCard: [REDACTED]  
 MasterCard: \$120.75  
 Change Due: \$0.00  
 Cashier: SHIFT 3

GS1#:  
 07-16-2025 11:50:58 AM  
 Receipt #: 354434803  
 Order ID: 353032403

MasterCard [REDACTED]  
 Card Entry:DNIP Sequence:000149  
 Trans Type:Purchase \$120.75  
 Term #: 203  
 REF #: 00000142  
 Application Label: FC MasterCard  
 RID #: R000000041010  
 PUR #: 0000006030  
 TSI #: E800  
 Auth #: [REDACTED] Approved

By entering a verified PIN, cardholder agrees to pay issuer such total in accordance with issuer's agreement with CardHolder.

Best Copy  
 RECEIPT REPRINT

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$115.00 + GST

Receipt Description	Tim Horton's Coffee-Elk Point & Bonnyville Town Halls
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Hosting - Group (Constituents) Hosting Purpose - July 17 - Elk Point & Bonnyville Town Halls

*Tim Hortons*

Tim Hortons # 105095  
 102-5401 43rd St. Bonnyville, AB, T9N 2G4  
 (780) 826-3354

Take Out  
 Order #: 338

1 Large 70 Ounc Blend 115.00  
 1 Points Earned

Subtotal: 115.00  
 GST: 85.75  
 Total Tax: 85.75  
 Total: 200.75  
 Mastercard: 115.00  
 Change Due: 85.00  
 Cashier: SHIFT 2

EST#:  
 07-17-2025 12:38:21 PM  
 Receipt #: 354430793  
 Order ID: 358055403

Mastercard  
 Card Entry: 0119  
 Trans Type: Purchase 115.00  
 Term #: 263  
 REF #: 00000156  
 Application Label: PL Mastercard  
 RID #: AC00000041010  
 TWR #: 0000000000  
 PSE #: E800  
 AUTH: [REDACTED] Approved

By entering a verified PIN, cardholder agrees to pay issuer such total in accordance with issuer's agreement with Cardholder.

Guest Copy  
 RECEIPT REPRINT

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$3.36

Receipt Description	Wholesale Club - \$3.36 - Creamer for office
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



USE YOUR MOBILE OR SCAN SIGN  
 SCAN THIS CODE TO TELL US

WHOLESALE CLUB LOCATION #671/  
 STORE TELEPHONE NUMBER 780-812-3996  
 INVOICE #:0671704280852027

CASH  
 SALES  
 Account # : [REDACTED]

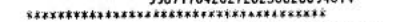
() -  
 Tobacco Tax # :  
 PST # :  
 Payment Due : 0 Days

Welcome #

22-DAIRY  
 06820020285 LTNY WHIP CRM RQ 3 21  
 RECYCLING FEE 0.05  
 DEPOSIT 1 0.10  
**SUBTOTAL 3.36**  
**TOTAL 3.36**  
 Number of Items: 1

Trans. Type: PURCHASE  
 Account: MASTERCARD LADS 3.36  
 Card Type: CREDIT  
 Card Number: \*\*\*\*\* [REDACTED]  
 Date/Time: 25/08/28 09:46:10  
 Ref. #: 128575  
 Auth #: [REDACTED]  
 PC Mastercard  
 A000000041010 0000008001  
 00 APPROVED - THANK YOU  
 Retain this copy for statement  
 validation  
 \*\*\* CUSTOMER COPY \*\*\*

CREDIT TH [REDACTED]  
 PC Optimun [REDACTED]  
 Points Redeemed [REDACTED]  
 Closing Balance [REDACTED]



99671704202720250828094614  
 \*\*\*\*\*  
 GST # 12223-5922 RT0001

THANK YOU FOR SHOPPING AT WHOLESALE CLUB  
 STORE MANAGER CURTIS  
 \*\*\*\*\*  
 2025/08/28 Dawn, R 9816 04 2027 09:46  
 Tell us how we did today! Visit  
 storeopinion.ca or call 1-800-531-2928  
 Win a \$1,000 PC gift card or  
 1,000,000 PC points  
 Full contest rules on website  
 CODE: 082825

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$5.24

Receipt Description	Sobey's - \$5.24 - Creamer for office
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



Sobey's Bonnyville  
 4501-50 Ave  
 780-826-3548  
 GST #102 624 897 RP0002

Served by: George

<b>GROCERY</b>	
Whipping Cream	\$5.09 C
+EHC	\$0.05 R
+Deposit	\$0.10 R
SUBTOTAL \$5.24	
TOTAL TAX \$0.00	
<b>TOTAL</b>	<b>\$5.24</b>
MasterCard	\$5.24
Cash	\$0.00
TENDER	
CHANGE	

NUMBER OF ITEMS 1

MERCHANT 23875013 RF  
 TERMINAL ID 502387501301  
 \*\* Purchase \*\* \$ 5.24  
 CARD MC RCPT 2396000  
 NO. \*\*\*\*\* [REDACTED] RESP 001  
 DATE 09/26/2025 TIME 08:47:58  
 AUTH # [REDACTED]  
 REF# 001209027  
 APPL PC Mastercard  
 AID A000000041010

00 APPROVED - THANK YOU

Term	Tran	Store	Oper	09/26/25
1	2398	3158	113	08:47:59

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$5.60

Receipt Description	Sobey's - \$5.60 - Creamer for office
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



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

Printed by: Angela

GROCERY  
 Cream Whipping 3% \$5.45 C  
 Milk \$0.05 R  
 Yogurt \$0.10 R  
 SUBTOTAL \$5.60  
 TOTAL TAX \$0.00  
**TOTAL \$5.60**  
 TENDER \$5.60  
 CHANGE \$0.00

NUMBER OF ITEMS 1

STATION 23575013 RF  
 TERMINAL ID 02387501303  
 \*\* \$ 5.60  
 RCPT 1185000  
 RESP 001  
 TIME 12/15/2025 13:27:15  
 AIB # 001326041  
 AIB PC Mastercard  
 AIB A0000000041010

APPROVED - THANK YOU

Trans Store Oper 12/15/25  
 1185 3158 116 13:27:13

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$5.60

Receipt Description	Sobey's - \$5.60 - Creamer for office
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other

**Sobeys**

Sobeys Bonnyville  
 1501-50 Ave  
 780.826.3542  
 GST #102 624 897 R0002

Served by: Anilyn

Member card number: \*\*\*\*\*

**GROCERY**  
 Cream Whipping 33% \$5.45 C  
 +EHC 10.05 R  
 +Deposit \$0.10 R

SUBTOTAL \$5.50  
 TOTAL TAX \$0.00  
**TOTAL \$5.60**

MasterCard TENDER \$5.60  
 Cash CHANGE \$0.00

NUMBER OF ITEMS 1

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

MERCHANT 23875013 RF  
 TERMINAL ID 502387501302  
 \*\* Purchase \*\* \$ 5.60  
 CARD MC RCPT 289000  
 NO. \*\*\*\*\* RESP 001  
 DATE 01/14/2026 TIME 09:00:12  
 AUTH #  
 REF# 001357005  
 APPL PC Mastercard  
 AID A0000000041010

00 APPROVED - THANK YOU

Term Tran Store Oper 01/14/26  
 2 289 3158 132 09:00:11

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**  
**SE58855 - Staff Other Expenses Claim Form**

Hosting \$5.39

Receipt Description	Sobey's - \$5.39 - Creamer for office
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other

**Sobeys**

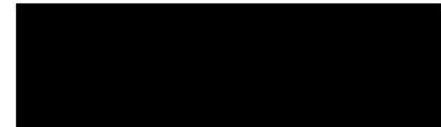
Sobeys Bonnyville  
 4801 20 Ave  
 790.826.3548  
 GST #102 624 897 RP0002

Served by: Jccoll

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

GROCERY  
 Whipping Cream \$5.25 C  
 +ENC \$0.04 R  
 +Deposit \$0.10 R  
 SUBTOTAL \$5.39  
 TOTAL TAX \$0.00  
**TOTAL \$5.39**  
 MasterCard \$5.39  
 Cash CHANGE \$0.00

NUMBER OF ITEMS 1



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

MERCHANT 23875013 RF  
 TERMINAL ID 502387501336  
 \*\* Purchase \*\* \$ 5.39  
 CARD MC RPT 9274000  
 NO. \*\*\*\*\* [REDACTED] RESP 001  
 DATE 02/09/2026 TIME 09:04:12  
 AUTH # [REDACTED]  
 REF# 001370002  
 APPL PC Mastercard  
 ATD A000000041010

00 APPROVED - THANK YOU

Term Tran Store Oper 02/09/26  
 30 9274 3158 109 09:04:10

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

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

Looking for support with diabetes  
 quitting smoking or weight management?  
 Our pharmacies offer personalized health  
 solutions to help you reach your goals.

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  
SE59231 - Staff Other Expenses Claim Form**

Receipt Description	Costco - Office supplies for 4 Offices
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other



**Order Details**

**Order Number**  
1270801678

**Order Date**  
03/15/2026

**Membership Number**

**Payment Method**  
Mastercard ending in [REDACTED]

**Shipping Address**  
4711 45 ST  
BONNYVILLE, AB  
T9N1G8  
7808260355

**Billing Address**  
Julie Krawiec  
4711 45 ST  
BONNYVILLE, AB  
T9N 1G8

Item	Quantity	Status	Total Price
Tim Hortons Steeped Tea Single Serve K-Cup Pods, 72-count Item #7319799 \$44.99	1	Delivered	\$44.99



[Feedback](#)

Hosting \$247.96 + GST

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**  
**SE59231 - Staff Other Expenses Claim Form**

Receipt Description	Costco - Office supplies for 4 Offices
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other

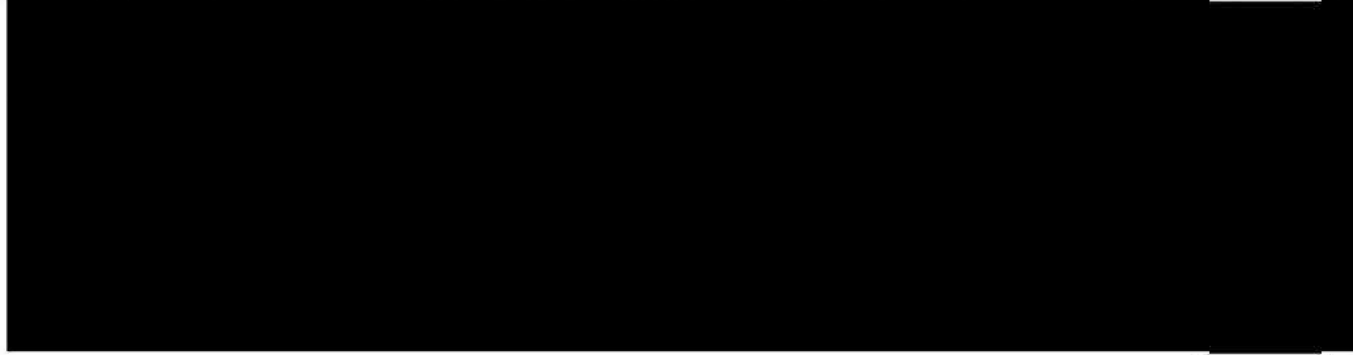
Kirkland Signature Organic Breakfast Blend Fair Trade Coffee K-Cup Pods, 120-count  
 Item #4272377  
 \$49.99

1  
 (G) Delivered \$49.99



Tim Hortons Variety Single Serve K-cup Coffee Pods, 120-count  
 Item #2319717  
 \$87.99

1 Delivered \$87.99



Feedback

Zavida Holiday Variety Pack Coffee K-Cup Pods, 96- count  
 Item #1382949  
 \$64.99

1 Delivered \$64.99

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 SE59231 - Staff Other Expenses Claim Form

Receipt Description	Costco - Office supplies for 4 Offices
Member Name	Scott Cyr
Claimant	Julie Krawiec
Expense Category	Other

## Order Summary



Feedback

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.