

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2017-18
083 - Strathmore-Brooks - Fildebrandt, Derek
For Expenses Processed Apr 1 to Jun 30, 2017

| | Budget | Used this Quarter | Used To-Date |
|--|-------------|----------------------|-----------------|
| Financial Reporting - \$ (Receipts attached) | | | |
| Transportation | | | |
| Fuel and Minor Maintenance - \$ | | \$1,222.57 | \$1,222.57 |
| MLA Parking Cap - \$ | \$900.00 | \$28.00 | \$28.00 |
| Other Travel - Parking - \$ | | \$57.14 | \$57.14 |
| Member Travel (overnight stay in constituency) - \$ | | | |
| Taxi, Bus Travel - \$ | | | |
| Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ | | | |
| Member Travel (Meal Per Diems) - \$ | | \$604.52 | \$604.52 |
| Accommodation | | | |
| Edmonton Accommodation Allowance (\$23,160.00/yr max) | \$23,160.00 | \$3,860.00 | \$3,860.00 |
| Travel Accommodations Allowance | | | |
| Travel Accommodations Allowance (days; 10 max) - NF | 10.0 | | |
| Other | | | |
| Hosting - \$ | | \$1,594.18 | \$1,594.18 |
| Non-Financial Reporting | | | |
| Use of Private Automobile (43.5 cents per km) | | | |
| Constituency Travel (Kilometres) - NF | 80,000.0 | 2,200.0 | 2,200.0 |
| Special Trips (5 trips per year) - NF | 5.0 | | |
| 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 | 52.0 | 8.0 | 8.0 |
| 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

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

7 Eleven Store 37797
Crossfield AB T0M0S0

ESSO EXPRESS PAY

7 ELEVEN STORE 37797
00302537
HWY 2 N
CROSSFIELD, AB T0M
URN:R119335453
04/02/2017 126424278
07:27:29 PM

PUMP# 3
REGLR 86.665L
PRICE/L \$1.049
FUEL TOTAL \$ 90.91

GST in fuel \$ 4.33
CREDIT \$ 90.91

TYPE: PURCHASE
ACCOUNT: MASTERCARD \$90.91
INVOICE: TEA68262

VERIFIED BY PIN

A- MasterCard

B- A0000000041010

01 Approved - Thank You 027

LOYALTY: NO

IMPORTANT - retain this copy for your records

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

7 Eleven Store 37797
Crossfield AB T0M0S0

ESSO EXPRESS PAY

7 ELEVEN STORE 37797
00302537
HWY 2 N
CROSSFIELD, AB T0M
URN:R119335453
04/09/2017 126430690
07:06:28 PM

PUMP# 9
REGLR 99.108L
PRICE/L \$1.009
FUEL TOTAL \$ 100.00

GST in fuel \$ 4.76
CREDIT \$ 100.00

TYPE: PURCHASE
ACCOUNT: MASTERCARD \$100.00
INVOICE: TRANS000

VERIFIED BY PIN

A- MasterCard

B- A0000000041010

01 Approved - Thank You 027

LOYALTY: NO

IMPORTANT - retain this copy for your
records

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

PETRO-CANADA
6209 50TH AVE
LACOMBE
ALBERTA T4L 1K7
(403) 782-7370

GST 836436741
PC0885819:3786601
TERMINAL: 023786651
PAYPOINT: 023786601

2017-04-18 00:26

PUMP 01
REGULAR
LITRES L122.796
PRICE/L \$ 1.079
FUEL SALES \$132.50*

TOTAL OWED \$132.50

TOTAL PAID
CREDIT CARD \$132.50

* GST INCL. \$ 6.31

MASTERCARD

PURCHASE
C 0010010010 00 027

MASTERCARD
A0000000041010
0000000000
E800
INVOICE 600465

VERIFIED BY PIN

00 APPROVED
THANK YOU 027

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& CHANCE TO WIN GAS
PETRO-CANADA.CA/HERO

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

PETRO-CANADA
203 - 2 ST. W
BROOKS
Alberta T1R 0E8

GST: R119335453 (403) 362-6311
2017-04-21 PC0580402:3908001 12:52
TERMINAL: 023908053 OPER: A
PAYPOINT: 023908001

| FUEL | (L) | (\$/L) | (\$) |
|------------|--------|--------|--------|
| Pump 3 | | | |
| Regular | 92.149 | 1.039 | 95.74* |
| Total Owed | | | 95.74 |

TOTAL PAID
CREDIT CARD \$ 95.74

*TAXES INCL. #TAXES EXCL.

GST TOTAL \$ 4.56

INV. 501018
Purchase
C 0010010010 00 027

MasterCard
AID: A00000000041010
0000008000
E800

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& chance to win gas
petro-canada.ca/hero

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$92.86



Want great rewards? Visit myHuskyRewards.ca

Drumheller Husky Winks
175 S. Railway Ave
Drumheller AB
T0J 0Y6
(403) 823-2207
GST# 102431616
Retailer ID 4714291
Rct:43568 1311-6
Batch:3037-28

2017/04/27 16:09:42

Pump# 6
Eth Regular \$97.50
94.755 L @ \$1.029/L
AMOUNT \$97.50
GST(Inc Pump) \$4.64

Pre Auth Completion
MasterCard
AID: A0000000041010

EXP: **/**
Date: 04/27/2017
Time: 16:09:42
AUTHCODE 131106EC
S215001001004 00 000
TUR: 0000000000 TSI: E800

Approved



PLEASE TELL US
HOW WE DID?
myHusky.ca/feedback

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek FildebrandtClaimant Name: Derek FildebrandtExpense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$85.00

Flying J #846

Hwy 9 Hwy 36 South
HannaInvoice # 65011
Date 04/30/17
Time 16:43
Auth # 066221

MC Acct#

#####

Pump Litres \$/L
02 83.487 \$ 1.069Product Amount
Bronze \$ 89.25
Total Sale \$ 89.25
Prompt: Swipe your A
Result:

MASTERCARD

TYPE: PURCHASE

AMOUNT: \$89.25

CARD NO:

30 Apr 2017 16:43:00

REFERENCE #:

36724808

0010013390 C

AUTHOR#:

TERMINAL #: 00846P02

TRAN ID. #: 102798

01 027

Approved - Thank You

A0000000041010

0000008000

E800

MasterCard

VERIFIED BY PIN

- IMPORTANT -

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for your records.

Customer Copy

5% GST is included
in the posted
price per litre
GST# 855506127Thank You
Please Come AgainThank you
for shopping
Cactus Corner

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek FildebrandtClaimant Name: Derek FildebrandtExpense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$108.73

WELCOME

Shell Canada
6400 OLD BANFF COACH
T3H 2H3
Calgary AB
(403) 240-0438Bronze
PUMP No. 01
LITRES 121.582
PRICE/L \$0.939
TOTAL FUEL \$114.17TOTAL SALE \$114.17
MASTERCARD \$114.17FUEL INCLUDES
GST - Fuel \$5.44
No. 137400032RT01 APPROVED - THANK
YOU 001

APPROVAL No. [REDACTED]

TERMINAL No. [REDACTED]

89442280

VERIFIED BY PIN

IMPORTANT
retain this copy for
your recordsXXXXXXXXXXXX
MASTERCARD
PURCHASE

C

INV No. 4422895274
2017/05/07 19:52
MasterCard
AID A0000000041010
TVR 0000008000
TSI E800YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
\$500 Shell Gift Card
*Receipt RequiredTHANK YOU
Questions?
1-800-661-1600STORE: C44228
TRAN: 1970934
5/7/2017 7:59:43

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$94.64

PETRO-CANADA
4624 VALIANT DR. NW
CALGARY
ALBERTA T3A0X9
(403) 218-0022

GST 870725054
PC0400516:0284201
TERMINAL: 020284254
PAYPOINT: 020284201

2017-05-12 13:55

PUMP
REGULAR
LITRES L 96.572
PRICE/L \$ 1.029
FUEL SALES \$ 99.37*
THE WORKS
~~\$ 10.99~~
GST ~~\$ 0.55~~

TOTAL OWED ~~\$110.91~~
99.37
TOTAL PAID
CREDIT CARD \$110.91

* GST INCL. \$ 4.73

MASTERCARD

AUTH
PURCHASE
C 0010010010 00 027

MASTERCARD
A0000000041010
0000008000
E800
INVOICE 211327

VERIFIED BY PIN

00 APPROVED
THANK YOU 027

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& CHANCE TO WIN GAS
PETRO-CANADA.CA/HERO

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$90.30

WELCOME

Shell Canada
53 Gasoline Alley Ea
T4E 1B1
Red Deer County AB
(403) 343-6555

Bronze
PUMP No. 03
LITRES 94.902
PRICE/L \$0.999
TOTAL FUEL \$94.81

TOTAL SALE \$94.81
AIR MILES \$
MASTERCARD \$94.81

FUEL INCLUDES
GST - Fuel \$4.51
No. 137400032RT

01 APPROVED - THANK
YOU 001

APPROVAL No. [REDACTED]
TERMINAL No. [REDACTED]
89106260
VERIFIED BY PIN

IMPORTANT
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your records

XXXXXXXXXXXX [REDACTED]
MASTERCARD [REDACTED]
PURCHASE C

INV No. 1062695039
2017/05/14 20:20
MasterCard
AID A0000000041010
TVR 0000008000
TSI E800

YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
\$500 Shell Gift Card
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

STORE: C10626
TRAN: 2001274
5/14/2017 8:25:58

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$120.86

WELCOME

Shell Canada
HIGHWAY 22 BOX 415
TOL OKO
BRAGG CREEK AB
(403) 949-3990

Bronze
PUMP No. 10
LITRES 120.975
PRICE/L \$1.049
TOTAL FUEL \$126.90

TOTAL SALE \$126.90
MASTERCARD \$126.90

FUEL INCLUDES
GST - Fuel \$6.04
No. 137400032RT

01 APPROVED - THANK

YOU 001

APPROVAL No. [REDACTED]

TERMINAL No. [REDACTED]

89215620

VERIFIED BY PIN

IMPORTANT
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your records

XXXXXXXXXXXX [REDACTED]
MASTERCARD
PURCHASE C

INV No. 2156290330
2017/05/21 16:40
MasterCard
AID A00000000041010
TVR 0000008000
TSI E800

YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
\$500 Shell Gift Card
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

STORE: C21562
TRAN: 2733780
5/21/2017 4:44:15

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$120.54

PETRO-CANADA
8420 BOWFORT RD NW
CALGARY
ALBERTA T3B 4T1
(403) 288-7744

GST 0137232914
PC0077377:8544701
TERMINAL: 028544753
PAYPOINT: 028544701

2017-06-04 12:54

PUMP 03
REGULAR
LITRES L125.439
PRICE/L \$ 1.009
FUEL SALES \$126.57*

TOTAL OWED \$126.57

TOTAL PAID
CREDIT CARD \$126.57

* GST INCL. \$ 6.03

MASTERCARD

AUTH
PURCHASE
C 0010010010 00 027

MASTERCARD
A0000000041010
0000008000
E800
INVOICE 059838

VERIFIED BY PIN

00 APPROVED
THANK YOU 027

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& CHANCE TO WIN GAS
PETRO-CANADA.CA/HERO

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$110.45

Calgary Co-op
Edgefield Gas Bar
140 Edgefield Place
Strathmore Alberta
(403) 361-2600
GST# R100730894

Member # 00000 [REDACTED]
Pump Litres Price/L
11 116.082 \$0.999
Product Amount
Regular \$115.97
Total \$115.97
GST (Inc Pumps) \$5.52

Purchase
MASTERCARD

***** [REDACTED]

DATE: 06/07/2017
TIME: 18:19:11
REF: 0010018030
TERM: 35R034RG

C

RESP: 027 ISO:01

MasterCard
A00000000041010
TVR: 0000008000
TSI: E800
VERIFIED BY PIN

Approved - Thank you

IMPORTANT:
retain this copy
for your records

CUSTOMER COPY

Store # 25
Receipt # 90402

Thank You !!!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$28.00

Indigo Park Lot #45
Petroleum Club
MONTHLY PARKING AVAILABLE

License Plate #: 

Expiration Time and Date

02:23 PM
APR 26, 2017

Purchase Time: 12:23pm Apr 26, 2017

Total Due: \$29.40

Rate: Hourly \$ 14

Total Paid: \$29.40

Payment Type: Card

Ticket #: 01392320

S/N #: 500012040112

Setting: Petroleum

Mach Name: Petroleum 12

 MasterCard

Auth # 

GST # 12099-6096

Thank You

Indigo Park

403 269 7275

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt
Claimant Name: Derek Fildebrandt
Expense Category: Member Parking

For hosting, select one:

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

Purpose:

\$57.14

GST# R128599776
Edmonton Airports
Can-TSJ 2T2 Edmonton
Tax Code CA5%
Exit Lane 28/05/17 19:31
Receipt 045879
Short-term parking tkt
VLT - No. 079562
28/05/17 09:12
28/05/17 19:31
Period 4d0h0'
(Tax) \$60.00
Total \$60.00
Payment Received
MC [REDACTED] \$60.00
Receipt: 87005340013
Type: Swiped
Sub Total \$57.14
Tax 5% \$2.86



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: Fildebrandt, Derek

Constituency: Strathmore-Brooks

For the Month of: April

Year: 2017

Employee #:

| 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 | Edmonton | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 19.76 | 0.99 | 20.75 |
| 3 | 60 km from Perm. Res. | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 4 | 60 km from Perm. Res. | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 5 | 60 km from Perm. Res. | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 6 | Travel to/from Capital | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 7 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 8 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| 9 | Travel to/from Capital | Edmonton | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 19.76 | 0.99 | 20.75 |
| 10 | 60 km from Perm. Res. | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 11 | 60 km from Perm. Res. | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 12 | 60 km from Perm. Res. | 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 | | | <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 | Travel to/from Capital | Edmonton | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 19.76 | 0.99 | 20.75 |
| 18 | 60 km from Perm. Res. | Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 19 | 60 km from Perm. Res. | 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 | | | <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 | 60 km from Perm. Res. | Brooks | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 30.81 | 1.54 | 32.35 |
| 29 | 60 km from Perm. Res. | Brooks | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 30 | 60 km from Perm. Res. | Brooks/Edmonton | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 39.57 | 1.98 | 41.55 |
| 31 | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| Grand Total | | | | | | \$604.52 | \$30.23 | \$634.75 |

In September 2017 the following was paid back:

April 28 - Lunch

April 28 - Dinner

April 29 - Lunch

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

April 30 2017



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: Fildebrandt, Derek

Constituency: Strathmore-Brooks

Employee #:

Date: 4/21/2017

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

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

| Month | Year | Monthly Claim Amount |
|-------------|------|----------------------|
| April | 2017 | 1,930.00 |
| Grand Total | | \$1,930.00 |

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

☒ Yes

☐ No

Please Note:

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

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

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Fildebrandt, Derek

Constituency: Strathmore-Brooks

Employee #:

Date: 5/12/2017

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

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month
Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

| Month | Year | Monthly Claim Amount |
|-------------|------|----------------------|
| May | 2017 | 1,930.00 |
| Grand Total | | \$1,930.00 |

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

☒ Yes

☐ No

Please Note:

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

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

Member Signature

Updated April 2016

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☒ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Meeting with stakeholder regarding community concerns.

COPY COPY COPY COPY COPY COPY COPY COPY
BP BROOKS #167
GST#894648450RT0003
0012 Table 13 #Party 2
JEANNETTE C SvrCk: 4 11:57 04/21/17

1 S.F. QUESADILLA, w/house salad,
balsam strawb (11:57) 10.00
1 1/2 BRUTE, w/house salad,
1000 island (11:57) 10.00

Sub Total: 20.00
GST : 1.00

04/21 12:29 TOTAL: 21.00

Like us on facebook

*** **

UFC LIVES HERE

*** PLEASE PAY YOUR ***

SERVER AT YOUR TABLE

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

For complete rules and eligibilty
please visit www.tellbostonpizza.com

SURVEY ACCESS CODE:

21711-40000-16211

This code will expire in 28 days

| | AMT-TEND | TIP/CHNG | TALLY |
|------------|----------|----------|-------|
| MASTER CRD | 24.15 | 3.15 | 21.00 |
| | 24.15 | | 21.00 |

21.00

04/21/17 12:29

JEANNETTE C

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Elizabeth McConnell

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosted a constituent at the Brooks Trade Show.

FRUITAS LLC
111 1 AVE W
BROOKS AB



CARD [REDACTED]
CARD TYPE FLASH
ACCOUNT TYPE DEFAULT
DATE 2017/04/29
TIME 1020 12:14:10
RECEIPT NUMBER
H85030651-001-013-053-0

PURCHASE
TOTAL

\$17.06

INTERAC
A0000002771010
90BA8A7E2D97B943
8080008000-

APPROVED

THANK YOU

00-001

CARDHOLDER COPY

" Creating a Healthier You! "

FruitAs Healthy Foods LTD

128-1st Street West

Brooks, Alberta T1R 1C7

403 362 6323

GST# 80334 1171

| Qty | Description | Extend |
|-----|--|---------|
| 1 | Regular Meal Combo | 10.50 |
| | Modifier 6: Pina Colada [REDACTED] Non-Alcoholic | |
| | Modifier 7: BBQ Chipotle Steak Pan | |
| | Modifier 8: No Option | |
| 1 | BBQ Chipotle Steak Panini | 5.75 |
| | Subtotal | 16.25 |
| | GST 5.00% | 0.81 |
| | Total | \$17.06 |
| | Paid Debit Card | \$17.06 |

Receipt# 4103

Date: 2017-04-29, 12:13 PM

Cashier: Emma

FRUITAS LLC Brooks

111 4th. Avenue W, Brooks AB

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Heather Pigott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Office hospitality

SAFEWAY 

Safeway Brooks
550 Cassils Road West Brooks AB
Phone: 403.362.6851
GST# 817093735

Served by: Giselle Z

Welcome to Safeway

GROCERY

| | | |
|----------------------|---------|---|
| Spr Water 500ML 24Pk | \$4.49 | C |
| INSTANT SAVINGS | -\$1.50 | |
| +EHC | \$0.96 | R |
| +Deposit | \$2.40 | R |
| Spr Water 500ML 24Pk | \$4.49 | C |
| INSTANT SAVINGS | -\$1.50 | |
| +EHC | \$0.96 | R |
| +Deposit | \$2.40 | R |

| | |
|--------------|----------------|
| SUBTOTAL | \$12.70 |
| TOTAL TAX | \$0.00 |
| TOTAL | \$12.70 |
| Cash | \$20.00 |
| Cash | \$7.30 |
| TENDER | |
| CHANGE | |

NUMBER OF ITEMS 2

*****YOUR SAVINGS*****
Discounts & Specials \$3.00
Your Total Savings \$3.00
Percentage Savings 19%

Term Tran Store Oper 04/03/17
3 1360 8896 145 12:55:42

Thank you for shopping at Our Store
Come Again Soon

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Heather Pigott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Brooks and District Chamber of Commerce Trade Show



MEDICINE HAT #593

2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8
(403)581-5700

20 @ 6.99 324543 ANGIE KETTLE 139.80 G
20 @ 2.00 1148053 TPD/324543 40.00-G

SUBTOTAL 99.80
**** GST 5% 4.99

TOTAL 104.79
VF Interac 104.79

ACCT: CHEQUING
REFERENCE#: 66231676-0010013850 C
04/09/17 10:47:21

Invoice#: 29912

COSTCO WHOLESALE #593
2350 BOX SPRINGS BLVD
MEDICINE HAT, AB T1C 0C8

PURCHASE - INTERAC
Interac

A0000002771010
00800008000 F800

00 APPROVED - THANK YOU 001
AMOUNT: \$104.79

0593 005 0000000041 0044

*** CARDHOLDER COPY ***

CHANGE .00
TOTAL DISCOUNT(S) 40.00

TOTAL NUMBER OF ITEMS SOLD = 20
CASHIER: KAREN F REG# 5
2017/04/09 10:47 0593 05 0044 41

GST/HST #121476329
SHOP WWW.COSTCO.CA

GST# 121476329RT
THANK YOU - PLEASE COME AGAIN

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Heather Pigott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Office hospitality

ENTER FOR A CHANCE TO WIN 1 OF 3
\$1000 CDN WAL-MART GIFT CARDS

To enter, please complete a survey
about today's store visit at:

<http://survey.walmart.ca>

WE WANT TO KNOW HOW
WE'RE DOING!

No purchase necessary. Math skill
testing question required. Open to
Canadian residents of the age of
majority. Survey must be taken
within 2 weeks of today. Odds of
winning depend on the number of
eligible entries received. Full
rules available in store at
the customer service desk
and online at

<http://survey.walmart.ca>

Please retain this receipt for the
purposes of completing
the online survey

Your STORE CODE is: 3658

Your opinion counts
(Le sondage est également offert
en français).



WAL*MART
WE SELL FOR LESS
(403) 793-2111
BROOKS, ALBERTA

ST# 03658 OP# 002521 TS# 05 TR# 01805

UL TO CREAM 006870010044 \$1.63 02
AB DEP MILK 000009066428 \$0.10 04



New Thursday flyer start date
Circulaire maintenant en vigueur Jeudi
04/19/17 12:26:25

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Heather Pigott

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Supplies for constituency bbq.



MEDICINE HAT #593

2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8
(403)581-5700

MEMBER [REDACTED]

| | | |
|---------------------|--|-------|
| 4 @ 8.49 | | |
| 449002 BULLSEYE BBQ | | 33.96 |
| 4 @ 2.00 | | |
| 1161685 TPD/449002 | | 8.00- |
| TOTAL | | 25.96 |
| VF Interac | | 25.96 |

ACCT: CHEQUING
REFERENCE#: 66231674-0010015170 C
AUTH#: [REDACTED] 05/09/17 19:00:48
Invoice#: 01087

COSTCO WHOLESALE #593
2350 BOX SPRINGS BLVD
MEDICINE HAT, AB T1C 0C8

PURCHASE - INTERAC

Interac

A0000002771010

0080008000 F800

00 APPROVED - THANK YOU 001
AMOUNT: \$25.96

0593 003 0000000022 0427

*** CARDHOLDER COPY ***

| | |
|-------------------|------|
| CHANGE | .00 |
| TOTAL DISCOUNT(S) | 8.00 |

TOTAL NUMBER OF ITEMS SOLD - 4
CASHIER: LUANNE G REG# 3
2017/05/09 19:00 0593 03 0427 22

GST/HST #121476329
SHOP WWW.COSTCO.CA

GST# 121476329RT
THANK YOU - PLEASE COME AGAIN

Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: David Hemsing

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: Community bbq

Purpose:

Supplies to host a community bbq.

\$1076.92

INVOICE

Page: 1



JBS FOOD CANADA, ULC
HIGHWAY #1 WEST
PO BOX 1868
BROOKS, AB T1R 1C6
CANADA
Tel No.:403-362-3457

Remit To:
JBS Food Canada
Station A
PO Box 15494
M5W 1C1 TORONTO

Invoice Number: 925073133
Invoice Date: 06/07/2017
Customer Number: [REDACTED]
Payment Terms: Net 7 Days
Sales Order: 896554
Plant: **BROOKS PLANT**

Shipping Terms: Customer Pick Up
Carrier: CUSTOMER PICK UP
Car / Trailer: 896554

Bill To: 1616030
CASH SALES
[REDACTED]

Ship To: [REDACTED]
CASH SALES
CASH SALES
[REDACTED]

CONTACT PERSON: Bonnie Adelman
CONTACT PHONE: 970-347-5489

GST ID: 810431858 RT0001

| PO Number | Order Date | Ship Date | Req. Deliv. Date | Sales Person | BOL |
|--------------|------------|------------|------------------|--------------|-----------|
| dave hemsing | 05/10/2017 | 06/03/2017 | 06/05/2017 | TOM FEENEY | 603071960 |

| Product | Product Description | Net Weight | Order Qty | Ship Qty | Billed Qty/Wt | Price | UoM | Amount |
|---------|--|------------|-----------|----------|---------------|--------|-----|----------|
| C6114AH | BNLS BEEF INSIDE ROUND XT Product of Canada | 141.70 | 4 | 4 | 141.70 | 7.6000 | KG | 1,076.92 |

paid for

| Original Invoice | Prior Adjustment | Total Order Qty | Total Ship Qty | Total Net Weight | Sales Tax | Total CAD Due |
|------------------|------------------|-----------------|----------------|------------------|-----------|---------------|
| | | 4 | 4 | 141.70 | 0.00 | 1,076.92 |

Notice: This sale is subject to Seller's General Terms and Conditions of Sale. A copy of the Seller's General Terms and Conditions of Sale can be found at <http://www.jbssa.com/CustomerService>

IMPORTANT: Please report discrepancies immediately. This notification can be made to the JBS Food Canada ULC Beef Claims Department at 1-800-978-9777 or to the applicable foreign office representative.

Personal Expense Claim Receipt Description

\$6.03

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: 03445
CODE: 060817 122904 8786 03445

12:29
04 8786

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek FildebrandtClaimant Name: Heather PigottExpense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)☐ Individual Stakeholder(s)☒ Group: Community bbq

Purpose:

Hosting supplies.

\$7.95



Freson Bros. - Brooks
330 Fairview Ave. East
Brooks, Alberta, AB
Tel: 403-362-4888
www.freson.com
GST #136930443

| | |
|------------------|---------|
| Grocery | |
| BAGGED ICE CUBES | \$1.99 |
| BAGGED ICE CUBES | \$1.99 |
| BLOCK ICE | \$3.99 |
| Sub Total | \$7.97 |
| GST | \$0.00 |
| Total | \$7.97 |
| Cash Total | \$7.95 |
| Cash | \$10.00 |
| Change | 2.05 |



Your cashier today: JADE

We'd love to hear from you!
Tell us how we served you today
visit us at www.freson.com

Thank you for shopping at your
Alberta Owned Freson Bros.

06/09/2017
Till: 2 JM

13:16
08020141

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek FildebrandtClaimant Name: Heather PigottExpense Category: Hosting

For hosting, select one:

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

Purpose:

Staff meeting.

\$57.01

Road House
Restaurant & Lounge

Fresh Country Cookin'

(403)934-6469

GST NO RT0001 139964183

7228 RACHEL

Check: 1994

Guests: 1

Table: 35-1

06/15/2017 12:22PM

| | | |
|---|------------------|-------|
| 1 | SOFT DRINK | 3.25 |
| 1 | BEEF DIP | 14.50 |
| 1 | SEAFOOD CEASAR | 14.00 |
| 1 | GARLIC TOAST | 2.00 |
| 1 | WRANGLER SPECIAL | 15.50 |

Subtotal 49.25

G.S.T. 2.46

Total Due \$51.70

****PLEASE PAY SERVER****

Try Our Sunday Brunch 10am-2pm

and Dinner Buffet 4pm-9pm

ROADHOUSE RESTAURANT

LTD.

510 HWY 1

STRATHMORE AB

CARD

CARD TYPE INTERAC

ACCOUNT TYPE CHEQUING

DATE 2017/06/15

TIME 0827 12:50:31

RECEIPT NUMBER

C85000888-001-060-002-0

PURCHASE

AMOUNT \$51.70

TIP \$7.76

TOTAL

\$59.46

Interac

A0000002771010

6D244731C11EA68E

0280008000-E800

8BDF497CFCA3282E

0280008000-F800

APPROVED

00-001

THANK YOU

CARDHOLDER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek FildebrandtClaimant Name: Derek FildebrandtExpense Category: Hosting

For hosting, select one:

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

Purpose:

Staff Meeting.

\$33.54

TYPE : PURCHASE

ACCT : MASTERCARD

AMOUNT : \$35.22

TOTAL : \$35.22

CARD NUMBER : *****

DATE/TIME : 28 Apr 2017 14:13:32

REFERENCE # : 66265E100010013570 H

AUTH # :

MasterCard

A0000000041010

0000003000

01 APPROVED - THANK YOU 027

*Important - retain this copy for your r

e

CUSTOMER COPY

PITA PIT
#1 - 322 8th Ave W
Brooks, Alberta T1R 1B8
ph. 403-501-5595
fax 403-501-5596

Tbl:0

Ref:326564

Chk:326570

Troy

4/28/2017 12:12 pm

| | |
|----------------|-------|
| 3 Souvlaki Reg | 26.97 |
| 3 Dasani | 6.57 |

| | |
|----------|-------|
| SubTotal | 33.54 |
| GST | 1.68 |

| | |
|-------|-------|
| Total | 35.22 |
|-------|-------|

| | |
|-----------|-------|
| MC **0226 | 35.22 |
|-----------|-------|

| | |
|-------------|-------|
| Amount Paid | 35.22 |
|-------------|-------|

PITA PIT
#1 - 322 8th Ave W
Brooks, Alberta T1R 1B8
ph. 403-501-5595
fax 403-501-5596

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Derek Fildebrandt

Claimant Name: Derek Fildebrandt

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

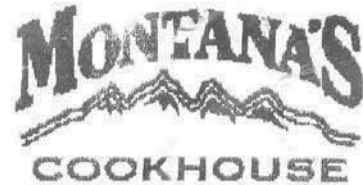
☒ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Meeting with community stakeholders and volunteers.

\$156.92



Montana's
119-15th Ave W
Brooks, AB, T1R 0V5
777645326rt0001

25 Hollie H

Tbl 98/2

Chk 423

Apr28'17 07:56PM

Bar

| | |
|-------------------------------|-------|
| 2 KA-POW Shrimp | 27.98 |
| 1 Steak Fajita | 21.99 |
| Med Rare | |
| Guacamole | 0.99 |
| 1 7oz Hand Carve <i>steak</i> | 20.48 |
| Chz/Onion Topper | |
| w/Fries | |
| Cilantro Lime | |
| w/Coleslaw | |
| 1 7oz Hand Carve | 19.99 |
| Shrimp Topper | |
| 1 Mac n Chz | 15.99 |
| w/Chorizo | 1.99 |
| 1 Large Nachos | 16.29 |
| Pork | 3.00 |
| 1 Guacamole | 0.99 |

Subtotal 129.69

HST 6.48

Total Due 136.17

Rounded if Paying Cash \$136.15

Montana's
119-15th Ave W
Brooks, AB, T1R 0V5
TRANSACTION RECORD
Trans# 423
Card #: *****0226
Card Entry:CHIP Account:MASTERCARD
Trans:PURCHASE Amount:\$136.17
Tip:\$27.23 Total:\$163.40
Auth #:014563 Sequence #:000023
Term ID: 001
Server:Hollie Table:98
Date:17/04/28 Time:21:10:22

APPROVED

BY ENTERING A VERIFIED PIN, CARDHOLDER
AGREES TO PAY ISSUER SUCH TOTAL IN
ACCORDANCE WITH ISSUERS AGREEMENT WITH
CARDHOLDER

Application Label: MasterCard
TVR: 0000000000
AID: A0000000041010 TSI: 6800
TC: D3C007BB68F51A57

*** CUSTOMER COPY ***

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Derek FildebrandtClaimant Name: Derek FildebrandtExpense Category: Hosting

For hosting, select one:

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

Purpose:

Staff Meeting.

\$76.23

HARRY'S PLACE
438 2 AVE. RD.
BASSANO, AB T0J 0B0Merchant ID: 000000005093172
Term ID: 08688246
25351490016

Purchase

MasterCard

XXXXXXXXXXXX0226

AID: A0000000041010

Entry Method: Chip

Batch#: 000362

06/07/17

18:41:09

Ref#:000001576073

Inv #: 007508 Appr Code: 039631

Amount: \$ 66.15

Tip: \$ 13.23

Total: \$ 79.38

Customer Copy

HARRY'S PLACE
BASSANO, AB
(403) 641-4334
gst# 770638120

SERVICE

Table #5

| | |
|------------------|-------|
| 2 x 3.00 | |
| SPRING ROLL | 6.00 |
| 2 x 11.00 | |
| WOR WON TON SOUP | 22.00 |
| S/P SQUID | 16.00 |
| CANTONESE C MEIN | 15.00 |
| SM WON TON SOUP | 4.00 |

Total 66.15

Sales WOTax 63.00

GST 3.15

6:23 PM 6/7/2017 MANDY

THANK YOU
PLEASE PAY CASHIER