

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2016-17
053 - Cardston-Taber-Warner - Hunter, Grant
For Expenses Processed April 1 - June 30, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$283.98	\$283.98
MLA Parking Cap - \$	\$900.00	\$32.57	\$32.57
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$632.56	\$632.56
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$992.19	\$992.19
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$3,900.00	\$3,900.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10		
Other			
Hosting - \$		\$145.73	\$145.73
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000	4,992	4,992
Special Trips (5 trips per year) - NF	5		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF		11	11
Use of a Private Automobile (52 trips per year) - NF	52		
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5		

\$ - Reported on CAD dollar amount of actual expense

NF - Reported based on number of trips, number of kilometres, or number of days

Budget reported is the maximum annual amount that may be claimed

GST is not included in the \$ amounts as the Legislative Assembly is GST/HST - exempt

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel to Barnwell School for ground breaking ceremony

\$27.92

292298 Costco #168
3200 Mayor Magrath
Lethbridge

MEMBER#

TYPE: PURCHASE

ACCT: MasterCard

PUMP: 12
GRADE: Unleaded
L: 35.139
PRICE/L: \$ 0.834
FUEL SALE: \$ 29.31

CARD NUMBER:

DATE: 03/24/2016
TIME: 10:21
REFERENCE:
36626519 0010010930 C
AUTH#:
TRANSACTION#: 66506

MasterCard
A0000000041010
0000008000 E800

GST INCLUDED = \$ 1.39
GST #121476329

VERIFIED BY PIN

01 APPROVED-THANK YOU 027

- IMPORTANT -
RETAIN THIS COPY
FOR YOUR RECORDS

WE APPRECIATE YOUR COSTCO
MEMBERSHIP.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

Travel from Lethbridge Airport to Cardston

\$33.12

WELCOME

Shell Canada
2730 Mayor Magrath D
T1K 7J5
Lethbridge AB
403-380-3002

INTERAC
PURCHASE C

INV No. 2259598773
2016/04/07 00:53
Interac
AID A0000002771010
TVR 8000008000
TSI 6800

Bronze
PUMP No. 08
LITRES 40.025
PRICE/L \$0.869
TOTAL FUEL \$34.78
00 APPROVED - THANK
YOU 001

APPROVAL No. [REDACTED]
CHEQUING
PINPAD No. 33B01MJ1
VERIFIED BY PIN

IMPORTANT
retain this copy for
your records

FUEL INCLUDES
GST - Fuel \$1.66
No. 137400032RT

TOTAL SALE \$34.78

STORE: C22595
TRAN: 982582
2016/04/07 00:55:00

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

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Cardston to meeting at University of Lethbridge,
Lethbridge College Convocation and Policing Conference in Taber

\$32.53

Fas Gas Cardston
192 Main Street
Cardston, Alberta
403-653-1319
GST# R101745552

Tran# :0071816

REGULAR ETHANOL \$34.16

Pump: 7
36.382L @ \$0.939/l

GST4(5%) : \$1.63

PURCHASE

\$34.16

CARD

INTERAC/CHEQUING

DATE 16/04/22

TIME 09:12:34

REFERENCE #
35310144 0011170220 C

AUTH#

INVOICE # 0071816

Interac
A0000002771010
8000008000

VERIFIED BY PIN

00/000
APPROVED - THANK YOU

-- IMPORTANT --
Retain This Copy
For Your Records

CUSTOMER COPY

THANK YOU
for fueling at
Fas Gas Plus!

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

Travel from Cardston to Taber for Taber Legion Spring Rally and Policing Conference.

\$30.81

CARDSTON # 1629535704

ExtraFoods GasBar#3810

1906 8th Ave

Fort Macleod AB

Pump 4

REGULAR \$32.35

34.447L x 0.939\$/L

TOTAL \$32.35

Taxes included in fuel:

GST# 122235922 \$1.54

Approved

Pre Auth Completion

Interac

AID: A0000002771010

ACCT: Debit Chequing

C

EXP: **/**

Host Date: 04/23/2016

Host Time: 14:08:44

AUTHCODE: U0381004

S157001001033 00 000

TUR: 8000008000 TSI: 6800

3810-4

Act#4014 Rcpt

Batch# 1543-101

TELL US HOW WE DID TODAY

MONTHLY CHANCES TO WIN \$5000

VISIT WWW.STOREOPINION.CA

OR CALL 1-877-234-2322

FULL CONTEST RULES AT

WWW.STOREOPINION.CA

STORE: 03810

CODE:042316 140804 4014 03810

Sales Receipt ID:

11414084104

Questions? Comments?

Contact us at

1-866-999-9898

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel to Medicine Hat for South East Watershed Alliance Meeting

\$25.17

MERCHANT # 40221545704

ExtraFoods GasBar#3824

120 2nd St E

Cardston AB

Pump 6

REGULAR \$26.43

28.448L x 0.929\$/L

TOTAL \$26.43

Taxes included in Fuel:

GST# 122235922 \$1.26

Approved

Pre Auth Completion

MasterCard

AID: A00000000041010

EXP: **/**

Host Date: 04/28/2016

Host Time: 09:29:28

S133001001006 00 000

TUR: 0000001000 TSI: E800

3824-6

Rct#14894 Rcpt

Batch# 1331-17

TELL US HOW WE DID TODAY
MONTHLY CHANCES TO WIN \$5000
VISIT WWW.STOREOPINION.CA
OR CALL 1-877-234-2322
FULL CONTEST RULES AT
WWW.STOREOPINION.CA

STORE: 03824

CODE:042816 092906 4894 03824

Sales Receipt ID:

11909292606

Questions? Comments?

Contact us at

1-866-999-9898

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

Travel to Okotoks for Chamber of Commerce Meeting with MLA
Wayne Anderson.

\$40.72

Flying J #869

2810 21 Ave

Nanton AB T0L 1R0

403-646-3181

Invoice # 61435
Date 04/29/16
Time 14:28
Auth # R03701

MC Acct#

Pump Litres \$/L
07 44.590 \$ 0.959

Product Amount
Bronze \$ 42.76
Total Sale \$ 42.76

MASTERCARD

TYPE: PURCHASE

AMOUNT: \$42.76

CARD NO:

29 Apr 2016 14:28:54

REFERENCE #:

36731563

0010010200 C

TERMINAL #: 00869P07

TRAN ID. #: 103967

01 027

Approved - Thank You

A0000000041010

0000008000

E800

MasterCard

MasterCard

VERIFIED BY PIN

- IMPORTANT -

retain this copy

for your records.

Customer Copy

5% GST is included
in the posted
price per litre
GST# 855506127

Thank You
Please Come Again

Pre Pay ONLY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel to Hwy. # 3 Meeting; Mayors & Reeves Meeting; Grand
Opening of MLA Dave Schneider's Office in Coaldale

\$22.23

292298 Costco #168
3200 Mayor Magrath
Lethbridge

TYPE: PURCHASE

ACCT: MasterCard

PUMP: 10
GRADE: Unleaded
LTRS: 25.961
PRICE/LTR: \$ 0.899
FUEL SALE: \$ 23.34

CARD NUMBER:

DATE: 05/06/2016

TIME: 17:33

REFERENCE:

36626521 0010010900 C

AUTH#:

TRANSACTION#: 56015

MasterCard

A0000000041010

0000000000 E800

GST INCLUDED = \$ 1.11

GST #121476329

VERIFIED BY PIN

01 APPROVED-THANK YOU 027

- IMPORTANT -
RETAIN THIS COPY
FOR YOUR RECORDS

WE APPRECIATE YOUR COSTCO
MEMBERSHIP.

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel to Edmonton

\$35.68

Flying J #869

2810 21 Ave

Nanton AB T0L 1R0

403-646-3181

Invoice # 65824

Date 05/14/16

Time 07:25

UI Acct#

#####

Pump	Litres	\$/L
06	39.065	\$ 0.959

Product	Amount
Bronze	\$ 37.46
Total Sale	\$ 37.46

UISA

TYPE: PURCHASE

AMOUNT: \$37.46

CARD NO:

14 May 2016 07:25:18

REFERENCE #:

36731346

0010018170 C

AUTHOR#:

TERMINAL #: 00869P06

TRAN ID. #: 102570

01 027

Approved - Thank You

A0000000031010

0080008000

F800

UISA

VERIFIED BY PIN

- IMPORTANT -

retain this copy

for your records.

Customer Copy

5% GST is included

in the posted

price per litre

GST# 855506127

Thank You

Please Come Again

Pre Pay ONLY

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

Travel from Edmonton to Cardston

\$35.80

284134 COSTCO #164

162 Leva Avenue

Red Deer, AB

TYPE: PURCHASE

ACCT: MasterCard

PUMP: 5
GRADE: Unleaded
LTRS: 41.572
PRICE/LTR: \$ 0.904
FUEL SALE: \$ 37.58

CARD NUMBER:

DATE: 05/26/2016

TIME: 11:56

REFERENCE:

36684825 0010019110 C

AUTH#:

TRANSACTION#: 87154

MasterCard

A0000000041010

0000008000 E800

GST INCLUDED = \$ 1.78

GST #121476329

VERIFIED BY PIN

01 APPROVED-THANK YOU 027

- IMPORTANT -
RETAIN THIS COPY
FOR YOUR RECORDS

WE APPRECIATE YOUR COSTCO
MEMBERSHIP.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Member Parking

For hosting, select one:

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

Purpose:

Parking at University of Lethbridge for Meeting

\$1.90

DISPLAY THIS SIDE UP ON DASHBOARD		DETACH RECEIPT FROM TICKET		
EXPIRATION DATE	EXPIRATION TIME	DATE ISSUED	TIME ISSUED	AMOUNT PAID
22/04	11:30 AM	22/04/16	10:10 AM	\$ 2.00
AMOUNT PAID		CREDIT CARD NUMBER		
\$ 2.00 3812000010:10 AM		CD GST 119279248RT0001		
				
CHARGES ARE FOR THE USE OF THE PARKING SPACE ONLY. WE WILL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE TO CAR OR CONTENTS, HOWEVER CAUSED, INCLUDING BUT NOT LIMITED TO FIRE, THEFT OR COLLISION				
NON TRANSFERABLE 93685972		RECEIPT 93685972		

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Parking

For hosting, select one:

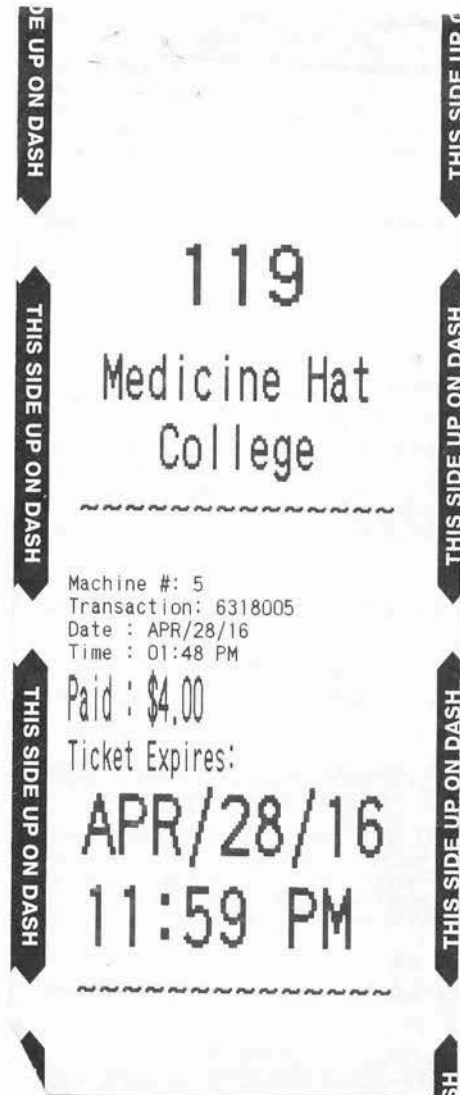
☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Park at Medicine Hat College - South East Watershed Alliance
Meeting in Medicine Hat



LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking - Across the street from the Federal Building

RECEIPT
IMPARK LOT 237
NO IN AND OUT PRIVILEGES

License Plate Number

Expiration Date/Time

06:00 PM
MAY 24, 2016

Purchase Date/Time: 05:51am May 24, 2016

Total Parking: \$26.67

Total gst: \$1.33

Total Due: \$28.00

Total Paid: \$28.00

Ticket #: 83022040

S/N #: 500012451113

Setting: Lot 237

Mach Name: Meter 1

Rate: \$28 - Early Bird
Payment Type: Card

GST #687315638RT0006
IMPARK LOT 237

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARKING RECEIPT

PARK

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Edmonton Airport to Legislature

\$52.38

AIRPORT TAXI SERVICE

4608 101 ST.

(7808907070)

EDMONTON

AB

CARD

CARD TYPE

VISA

DATE

2016/03/14

TIME

4066 08:52:15

INVOICE #

555

RECEIPT NUMBER

CB5010984-001-207-004-0

PURCHASE

TOTAL

\$55.00

VISA

A0000000031010

DE3EA0BC1D38AA0B

0080208000-EB00

E233421396152D30

0080208010-FC00

APPROVED

AUTH#

01-027

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS

COPY FOR YOUR RECORDS

GST#848353876

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Travel from Legislature to Edmonton Airport

\$52.38

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

CARD [REDACTED]
CARD TYPE VISA
DATE 2016/03/17
TIME 09:16 16:51:19
INVOICE # 911
RECEIPT NUMBER
C85009789-001-020-009-0

PURCHASE
TOTAL

\$55.00

VISA
A0000000031010
D1DC514E6847E041
0080208000-E800
9F770E1D9C9D7C76
0080208010-FC00

APPROVED

AUTH# [REDACTED] 01-027
THANK YOU

CARDHOLDER WILL PAY
CARD ISSUER ABOVE AMOUNT
PURSUANT TO CARDHOLDER
AGREEMENT.

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#822883138

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Edmonton Airport to Legislature - Cab credit card machine was not working on Monday, April 4, so Grant paid twice on April 7 to make up for the transaction. Grant uses the same cab driver each time. _____

\$52.38

AIRPORT TAXI SERVICE

4608 101 ST.

(7808907070)

EDMONTON AB

CARD

CARD TYPE MASTERCARD

DATE 2016/04/07

TIME 7944 12:32:17

INVOICE # 911

RECEIPT NUMBER

C85009789-001-023-022-0

PURCHASE

TOTAL

\$55.00

MasterCard

A0000000041010

B51B15880481266F

0000008000-E800

69E527A012319610

APPROVED

AUTH#

01-027

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#822883138

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Legislature to Airport - Air Canada Flight [REDACTED]

\$ 48.38

YELLOW CAB
10135 31 AVENUE NW
EDMONTON AB T6N-1C2
780-462-3456

Term Id: 4502412478201
Item #: 0473
MasterCard
PURCHASE
Of Id: 57275
Card #: [REDACTED]

AID: A0000000041010

APPROVED

AMOUNT CAD\$50.80

Ref. #: C
Auth. #: [REDACTED]
Resp. Code: 00
TUR: 0400008000
TSI: E800

BOOK ON LINE AT EDMTAXI.COM
THANK YOU FOR BEING OUR GUEST

GST 100403070

Date: 2016/04/06 Time: 21:16:40
Response: AUTH [REDACTED]

CUS [REDACTED] COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Travel from Edmonton Airport to Legislature

\$52.38

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

CARD XXXXXXXXXX
CARD TYPE MASTERCARD
DATE 2016/04/07
TIME 5534 08:41:20
INVOICE # 99
RECEIPT NUMBER
C85029599-001-038-012-0

PURCHASE
TOTAL

\$55.00

MasterCard
A0000000041010
28AEE2F0EC614864
0000008000-E800
C21F8A9E3BD83D30

APPROVED

AUTH# XXXXXXXXXX 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#832048615

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Travel from Legislature to Edmonton Airport

\$52.38

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

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/04/07
TIME 6903 12:31:41
INVOICE # 911
RECEIPT NUMBER
C85009789-001-023-021-0

PURCHASE
TOTAL

\$55.00

MasterCard
A0000000041010
A73007218E1A0934
0000008000-E800
7E00BD85E1C13E9E

APPROVED
AUTH# [REDACTED] 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#822883138

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Edmonton Airport to Apartment in Edmonton

\$52.38

YELLOW CAB
10135 31 AVENUE NW
EDMONTON AB T6H-1C2
780-462-3456

Term Id: 45024124782258
Item #: 0403
MasterCard
PURCHASE
Op Id: 810265
Card #: [REDACTED]

AID: A0000000041010

APPROVED

AMOUNT CAD\$55.00

Ref. #: C
Auth. #: [REDACTED]
Resp. Code: 00
TUR: 0400008000
TSI: E800

BOOK ON LINE AT EDMTAXI.COM
THANK YOU FOR BEING OUR GUEST

GST 100403070

Date: 2016/04/10 Time: 21:37:44
Response: AUTH [REDACTED]

CUSTOMER COPY

LEGISLATIVE-ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Legislature to Edmonton Airport

\$52.38

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

CARD [REDACTED]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/04/14
TIME 0716 17:34:28
INVOICE # 911
RECEIPT NUMBER
C85009789-001-024-030-0

PURCHASE
TOTAL

\$55.00

Interac
A0000002771010
AFB3D3AA971A1AAC
8000008000-6800
5E0034283FC60DC2

APPROVED

AUTH# [REDACTED] 00-001
THANK YOU

CARDHOLDER COPY

GST#822883138

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Travel from Edmonton Airport to Legislature

\$52.38

AIRPORT TAXI SERVICE
4608 101 ST.
(780) 890-7070
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2016/04/18
TIME 1891 08:42:32
INVOICE # 555
RECEIPT NUMBER
CB5010984-001-212-005-0

PURCHASE
TOTAL

\$55.00

MasterCard
MasterCard
A0000000041010
C391CB69D7F1BCA7
0000008000-EB00
04738D71B464F4FD

APPROVED
AUTH# [REDACTED] 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#848353876

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Legislature to CKUA Event in Edmonton

\$8.00

Co-op Taxi Line

(780)425-2525

www.co-optaxi.com

CASH RECEIPT

TERMINAL: 386/66233588

DRIVER : 1610

TRIP #: 8905738

2016/04/20 18:10:50

FARE : \$ 8.00

TOTAL: \$ 8.00

Thank you for choosing
Co-op Taxi

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Edmonton Airport to Legislature

\$52.38

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

CARD *****
CARD TYPE VISA
DATE 2016/05/02
TIME 0047 08:40:17
INVOICE # 555
RECEIPT NUMBER
CB5010984-001-214-023-0

PURCHASE
TOTAL

\$55.00

VISA
A0000000031010
BA720CD1EDCFB9DE
0080008000-E800
06D619E0C64949FE
0080008000-F800

APPROVED

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#848353876

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Travel from Legislature to Edmonton Airport

\$52.38

AIRPORT TAXI SERVICE

4608 101 ST.

(7808907070)

EDMONTON AB

CARD ***** [REDACTED]

CARD TYPE VISA

DATE 2016/05/05

TIME 4036 17:35:00

INVOICE # 911

RECEIPT NUMBER

C85009789-001-027-026-0

PURCHASE

TOTAL

\$55.00

VISA

A00000000031010

C34DF912D3303E15

0080008000-E800

0080008000-F800

APPROVED

01-027

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#822883138

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

Travel from Edmonton Airport to Legislature

\$52.38

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

CARD *****
CARD TYPE VISA
DATE 2016/05/09
TIME 1956 08:34:27
INVOICE # 555
RECEIPT NUMBER
CB5010984-001-215-009-0

PURCHASE
TOTAL

\$55.00

VISA
A0000000031010
FA9C4ABA8CD4B814
0080008000-E800
81B686FF254E3E51
0080008000-F800

APPROVED

THANK YOU

01-027

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST#848353876



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)

APPROY-28/16MEALS

Member Name: Hunter, Grant

Constituency: Cardston-Taber-Warner

For the Month of: April

Year: 2016

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
5	Travel to/from Capital	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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
13	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
15								
16								
17								
18	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
19	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
20	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
21	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25	60 km from Perm. Res.	Taber	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
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.	Medicine Hat	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$380.62	\$19.03	\$399.65

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 28/16



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: Hunter, Grant

Constituency: Cardston-Taber-Warner

For the Month of: May

Year: 2016

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T. 5%	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
3	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
4	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
5	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
6	60 km from Perm. Res.	Lethbridge/Coaldale	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
7	60 km from Perm. Res.	Milk River	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
10	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
11	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
18	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
19	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
25	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
26	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
27	60 km from Perm. Res.	Taber	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
31	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
Grand Total						\$611.57	\$30.58	\$642.15

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

May 27, 2016



Members' Temporary Accommodation Allowance Claim Form

D
053

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

APR 01 - 30 / 16 MTA

Member Name: Hunter, Grant

Constituency: Cardston-Tabor-Warner

Employee #:

Date: 4/1/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually
Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

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

Monthly Amount (maximum \$1,930 or less)

\$ 1,300.00

x 12 = \$

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

Please Note: 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 eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

053

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: Hunter, Grant

Constituency: Cardston-Taber-Warner

Employee #:

Date: 4/1/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

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

Monthly Amount (maximum \$1,930 or less)

\$ 1,300.00

x 12 = \$

Please Note: The Member is responsible for retaining all records which support the

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

Please Note: The Member must advise the Clerk in writing of any change in permanent or temporary residence at the time it occurs.

MAY 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

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: Hunter, Grant

Constituency: Cardston-Taber-Warner

Employee #:

Date: 4/1/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year: 2016-2017

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

Monthly Amount (maximum \$1,930 or less)

\$ 1,300.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

JUNE 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting Constituent - Lethbridge Restaurant

\$43.96

MOXIE'S

GRILL & BAR

MOXIE'S
LETHBRIDGE
0074 Table 45 #Party 2
197*MINDI F SvrCk: 13 13:13 04/01/16
Separate checks: 1-of-1

POP, gingerale	3.25
STEAK SANDWICH	16.99
BEEF VINDALOO	17.99

Sub Total:	38.23
GST :	1.91
15% GRATUIT	5.73
04/01 14:46 TOTAL:	45.87

GST # 104945324
PLEASE PAY SERVER

Follow us on Facebook and Twitter

MOXIES #394 - Lethbridge
1621 South 3rd Avenue
Lethbridge, AB
T1J 4M7
403-320-1102

** TRANSACTION RECORD **

Tran. #: 25116
Check #: 74
Employee #: 197
Employee Name: 197*MINDI

MasterCard Purchase

AID: A0000000041010

Amount	\$40.14
Gratuity	\$5.73
=====	
TOTAL CAD	\$45.87

APPROVED [REDACTED]
00-001 [REDACTED]
394MXS12/394HXC12
035001001006
2016/04/01 14:49:42

TUR: 0000008000
TSI: E800

Customer Copy

THANK YOU
Come Again

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting Constituent - Edmonton Restaurant

\$7.76

Subway#39867-0 Phone 780-441-3630
10621 - 100 Ave.
Edmonton, AB, T5J 0B3
Served by: Audrey 4/21/2016 3:18:31 pm
Term ID-Trans# 1/A-138753

Customer Receipt
GST# 105055685RT0001

Qty	Size	Item	Price
1	6"	Tuna Sub	\$5.25
1		Soup RTU 8oz Soup	\$2.50
Sub Total			\$7.75
General Sales Tax (5%)			\$0.39
Cash Rounding			\$0.01
Total (Eat In)			\$8.15
Cash			\$20.00
Change			\$11.85

If you are not 100% satisfied call 780-445-8998

Host Order ID: SPM20160421031831

How'd we do Get a Free Cookie! Take 1 min.
Survey at www.TellSubway.com

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: _____

Purpose:

Hosting Constituents

\$74.04

BOSTON PIZZA # 179
10620 JASPER AVENUE T5J2A3
EDMONTON AB
20153908
BH2015390815

**** PURCHASE ****

05-25-2016 19:20:04

Acct # ***** [REDACTED]

Exp Date **/** Card Type VI

Name: GRANT HUNTER

A0000000031010 VISA

Check # 296

Trace # 1335 Operator 28

Inv. # 1362

RRN 001665027

Purchase \$70.35

Tip \$7.04

Total \$77.39

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy



BOSTON PIZZA #179
JASPER AVENUE
0296 Table 65 #Party 3
LISA L SvrCk: 10 18:33 05/25/16

1 N.S. POP	3.00
1 N.S. ICED TEA	3.00
2 THAI CHKN BITES	24.00
1 S-G.W.N., original	15.00
1 JAMBA FETT	18.00
2 SIDE ORDERS, 1 sour crm,	
1 sour crm	4.00

Sub Total: 67.00

GST : 3.35

05/25 19:18 TOTAL: 70.35

THANK YOU!

GST#893018549

PLEASE PAY SERVER

JOIN US FOR \$10.99 PASTA TUESDAY

PLEASE NOTE THAT BOSTON PIZZAS' PARKING
IS ON THE EAST AND WEST SIDE
OF THE BUILDING ONLY!!

TELL US HOW WE DID!

We value your feedback.

Complete short survey and receive a

weekly chance to WIN an awesome

\$200 Boston Pizza Gift Card

keep this receipt and go to

www.tellbostonpizza.com

For complete rules, eligibility
please visit www.tellbostonpizza.com

68991-52000-57211

Full Rules & Regulations can be found at
www.bostonpizzasurvey.com

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: Angela Wolgen-Strojwas

Expense Category: Office

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Tea for office \$13.48

LONDON
DRUGS

LD Lethbridge 403 320 8899
LOOKING FOR WORK? www.londondrugs.com

TAYLORS TEA 7.99
TAYLORS TEA 5.49

VF

CHANGE .00
(POST) .00
(GST) 2.10

5/30/16 09:29 0038 91 0011 15223

** Thank You **
LONDON DRUGS LTD. G.S.T. #R103378972

CREDIT CARD TRANSACTION RECORD

LONDON DRUGS 38
110 905 FIRST AVE S.
LETHBRIDGE, AB
T1J 4M7

CASH REG.: 031 EMPLOYEE: 15223 1

NO.: XXXXXXXXXX

AMOUNT

MasterCard PURCHASE

05/30/16 09:28:57 AUTH:
REFERENCE: 66208183 0012990040 C

APL: MasterCard

APN:

AID: A0000000041C10

TVR: 0000008000

TSI: E800

01 APPROVED - THANK YOU 027

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Grant Hunter

Claimant Name: Angela Wolgen-Strojwas

Expense Category: Office

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

creamers for office. \$6.49

save-on-foods #6650
West Lethbridge
Visit www.saveonfoods.com
G.S.T #R846980878

D/L CREAMERS

6.49 ✓

Tax-Code	Taxable-Value	Tax-Value
GST		

BALANCE DUE

Credit

[K] XXXXXXXXXXXX

CUSTOMER COPY

SLIP # 0001085242

TERM E6650C01

** Purchase

**

CAD \$ 60.80

CARD MASTERCARD

PROXIMITY

RESP 001 ISO 00

DATE 05/30/2016

TIME 08:52:51

REF # 578001001003

APPL.: MasterCard

AID: A0000000041010

TVR: 0000008000

TSI:

Approved

No Signature Required

CHANGE

\$0.00
