

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2016-17
064 - Innisfail-Sylvan Lake - MacIntyre, Don
For Expenses Processed July 1 - September 30, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$784.61	\$1,724.55
MLA Parking Cap - \$	\$900.00	\$178.00	\$178.00
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$47.62	\$47.62
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$272.81	\$1,673.48
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,340.00	\$10,680.00
Travel Accommodations Allowance		\$536.64	\$670.54
Travel Accommodations Allowance (days; 10 max) - NF	10	4	5
Other			
Hosting - \$		\$818.84	\$1,225.94
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	80,000	2,082	2,442
Special Trips (5 trips per year) - NF	5		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52		9
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

Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION	
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-64-D MACL NTYRE	
-	-
-	-
-	-
-	-

CLIENT NO.	
NO DU CLIENT	
INVOICE DATE	08/01/16
DATE DE LA FACTURE	
INVOICE NO.	0006443170
NO DE LA FACTURE	

UNIT NO	DRIVER NAME DRIVER ID.	V.I.N.	CARD NO.	KM AUTHORIZE	REFERENCE NO ACTIVITY DATE	SUPPLIER NAME SUPPLIER LOCATION	CHARGE DESCRIPTION	QTY	UNIT COST	EXTENDED PRICE	GST-HST PST/QST	TOTAL DUE
NO. D'UNITE	NOM DU CONDUCTEUR	NO. DE SERIE	NO. DE CARTE	KM AUTORISE	NO. DE REFERENCE DATE DE LA TRANS.	NOM DU FOURNISSEUR POINT DE VENTE	DESCRIPTION DES FRAIS	QTE	COUT UNIT	TOTAL	TPS-TVH TVP/TVQ	MONTANT TOTAL DU
	MACL NTYRE				000438725193 06/30/16	FASGAS EDMONTON AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	63.0	.92	55.44	2.77 2.77	58.21 58.21 .63- 57.58
				0106500 KU82767	120013749893 06/28/16	LUBE STOP - SYLVAN L SYLVAN LAKE AB	LUBRICATE-CHANGE OIL & FILTER/ GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	1.0	67.97	67.97	3.40 3.40	71.37 71.37
					000439155099 06/26/16	PETRO CANADA CANMORE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH OIL GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	54.6 1.0	1.17 6.49	60.73 6.49	3.04 .32 3.36	70.58 70.58
					000439155098 06/23/16	PETRO CANADA FAWCETT AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.4	1.05	65.36	3.27 3.27	68.63 68.63
					000438725192 06/22/16	FASGAS EDMONTON AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	62.2	.94	55.95	2.80 2.80	58.75 58.75 .62- 55.33 58.13
					000438726462 06/16/16	FASGAS SYLVAN LAKE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	63.4	1.08	65.11	3.26 3.26	68.37 68.37 .63- 64.48 67.74
					000438725194 06/08/16	FASGAS EDMONTON AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	58.0	1.03	57.15	2.86 2.86	60.01 60.01 .58- 56.57 59.43

BLG871

GST-HST REG. NO / NO ENRG TPS-TVH R104164223
QST ID. NO / NO ID TVQ 1001439118

Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-64-D MACL NTYRE

- -
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CLIENT NO. [REDACTED]
NO DU CLIENT
INVOICE DATE 08/01/16
DATE DE LA FACTURE
INVOICE NO. 0006443170
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORISE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	MACL NTYRE			0096118 KU74214	120013738488 04/25/16	JEFFY LUBE #1021 RED DEER	AB	LUBRICATE-CHANGE OIL & FILTER/ GST-HST / TPS-TVH DISPOSAL FEES/DISPOSAL FEE//DI	1.0 1.0	65.87 5.99	65.87 5.99	
											3.59	75.45
								REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL			71.86	
								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	366.6			
								BKDN TOTALS / TOTAUX CODIFICATION 01-64				
								FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	366.6			
								BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL		506.06	25.31	531.37

Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

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CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION

SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY
DIV-64-D MACL NTYRE

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CLIENT NO. [REDACTED]
NO DU CLIENT
INVOICE DATE 09/01/16
DATE DE LA FACTURE
INVOICE NO. 0006455248
NO DE LA FACTURE

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	MACL NTYRE				000440365377 07/26/16	FASGAS RED DEER COUN AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	63.0	.93	55.71 2.79 2.79 55.71 .63- 55.08	2.79 2.79	58.50 58.50 .63- 57.87
					000440363566 07/22/16	FASGAS SYLVAN LAKE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	64.4	.91	56.09 2.80 2.80 56.09 .64- 55.45	2.80 2.80	58.89 58.89 .64- 58.25
					000440355353 07/13/16	FASGAS INNISFAIL AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	88.1	.92	77.10 3.85 3.85 77.10 .88- 76.22	3.85 3.85	80.95 80.95 .88- 80.07
					000440357345 07/07/16	FASGAS SYLVAN LAKE AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	63.9	.92	56.22 2.81 2.81 56.22 .64- 55.58	2.81 2.81	59.03 59.03 .64- 58.39
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	279.4		245.12 12.25 257.37 2.79- 254.58	12.25	257.37 2.79- 254.58
	BKDN TOTALS / TOTAUX CODIFICATION 01-64				1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	279.4		245.12 12.25	12.25	257.37 2.79- 254.58

BLG871

GST-HST REG. NO / NO ENRG TPS-TVH R104164223
QST ID. NO / NO ID TVQ 1001439118

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Car Wash

For hosting, select one:


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

Purpose:

\$10.00

05.06 June
Car Wash

03-Jun-2016 3:54 PM

Purchase Txn: 6 20782 \$ 10.0
Basic Soft Touch
Payment:  \$ 10.0
Credit Card: 7777
Exp XX-XXXX Auth.
Change: \$ 0.0

Thank you for
using our wash.
Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Car Wash

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$12.00

Our
Car Wash

24-Jun-2016 9:20 AM

Purchase Txn:0121092
Ultimate Soft Touch \$ 12.00

Payment:
Credit Card:????? \$ 12.00
Exp:XX-XXXX Auth.

Change: \$ 0.00

Thank-you for
using our wash.
Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Car Wash

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$11.43

Our
Car Wash

07-Aug-2016 7:41 PM

Purchase Txn: 018258
Ultimate Soft Touch \$ 12.00

Payment:
Credit Card: ****-****-****-**** \$ 12.00
Exp: XX-XXXX Auth.

Change: \$ 0.00

Thank you for
using our wash.
Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

*parking June 8/16
for attending a meeting*

RECEIPT

License Plate Number

Expiration Date/Time

01:11 PM
JUN 08, 2016

Purchase Date/Time: 11:11am Jun 08, 2016

Total Parking: \$24.00

Total Federal: \$1.20

Total Due: \$25.20

Total Paid: \$25.20

Ticket #: 00009634

S/N #: 500012260460

Setting: Lot 31

Mach Name: Lot 31-2

Rate: 2 HOURS

Payment Type: Card

MasterCard

GST REG #102466000

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Member Parking

For hosting, select one:

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

Purpose:

\$35.00

RECEIPT
Use This Code
For After Hour Access
7446

Stall # 179

Expiration Date/Time

06:00 PM
JUL 12, 2016

Purchase Date/Time: 09:27am Jul 12, 2016
Total Parking: \$36.00
Total FEDERAL: \$1.75
Total Due: \$36.75
Total Paid: \$36.75
Ticket #: 00005878
S/N #: 500012080187
Setting: Lot 425
Mach Name: Lot 425-1

Rate: DAILY MAX
Payment Type: Card

MasterCard

GST REG #R102466000

RECEIPT
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RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Member Parking

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$22.00

RECEIPT

License Plate Number



Expiration Date/Time

06:00 PM
JUL 18, 2016

Purchase Date/Time: 07:49am Jul 18, 2016

Total Parking: \$22.00

Total Federal: \$1.10

Total Due: \$23.10

Total Paid: \$23.10

Ticket #: 00015596

S/N #: 520014501911

Setting: Lot 236

Mach Name: Lot 236-1

Rate: EARLY BIRD
Payment Type: Card

MasterCard

GST REG #102466000

PT PARKING RECEIPT PT PARKING RECEIPT PT PARKING RECEIPT PT PARKING RECEIPT PT PARKING RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$6.00

PT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT

RECEIPT

License Plate Number
[REDACTED]

Expiration Date/Time

06:00 AM
JUL 18, 2016

Purchase Date/Time: 12:41pm Jul 17, 2016
Total Due: \$6.30
Total Paid: \$6.30
Ticket #: 00015560
S/N #: 520014501911
Setting: Lot 236
Mach Name: Lot 236-1

Rate: WEEKEND RATE
Payment Type: Card

[REDACTED] MasterCard [REDACTED]

GST REG #102466000

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Member Parking

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$27.00

RECEIPT

License Plate Number



Expiration Date/Time

06:00 PM
JUL 19, 2016

Purchase Date/Time: 10:45am Jul 19, 2016

Total Parking: \$27.00

Total Federal: \$1.35

Total Due: \$28.35

Total Paid: \$28.35

Ticket #: 00015662

S/N #: 520014501911

Setting: Lot 236

Mach Name: Lot 236-1

Rate: DAILY MAX

Payment Type: Card

MasterCard

GST REG #102466000

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LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Member Parking

For hosting, select one:

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

Purpose:

\$36.00

ELITE INDOOR PARKING
EDMONTON
1302 SPARROW DR
NISKU AB

CARD [REDACTED]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/09/01
TIME 1184 16:11:11
RECEIPT NUMBER
C85011839-001-001-397-0

PURCHASE
TOTAL

\$37.80

INTERAC
A0000002771010
C1534F2221CD437F
8080008000-6800
657DAE6AD2586BEF

APPROVED

[REDACTED]
THANK YOU

00-001

VERIFIED BY PIN

MERCHANT COPY

ELITE INDOOR PARKING

GST 80432 9266 RT0001

780.986.3839

Thank you!



Cashier: SHANNON F
CheckIn D/T: 08/28/16 16:32
CheckOut D/T: 09/01/16 16:10
Duration Time: 3d 23h 37m

Check: 1:11

Parking Charge: \$42.00
Discount: \$4.20-
ON LINE RESERVATION SUMMER 16
Charge: \$36.00
Tax %5: \$1.80
Total: \$37.80

Amount: \$37.80
Due: \$0.00

© AVPM®

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Member Parking

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$28.00

RECEIPT

License Plate Number



Expiration Date/Time

06:00 AM
JUL 21, 2016

Purchase Date/Time: 07:37am Jul 20, 2016

Total Parking: \$28.00

Total Federal: \$1.40

Total Due: \$29.40 Rate: EARLY BIRD + EVENING

Total Paid: \$29.40

Payment Type: Card

Ticket #: 00015685

S/N #: 520014501911

Setting: Lot 236

Mach Name: Lot 236-1

MasterCard

GST REG #102466000

RECEIPT
PARKING RECEIPT
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PARKING RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

\$23.81

CHECKER CABS
316 MERIDIAN RD SE T2A1X2
CALGARY AB
22483560

|||| PURCHASE ||||

07-19-2016 18:16:53
Acct # [REDACTED]
Exp Date / / Card Type MC
Name: DON MACINTYRE
A0000000041010 MASTERCARD

Trace # 990025
FS2248356001
[REDACTED] RRM 001882025

Total \$25.00

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Taxi, Bus Travel

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$23.81



Safe, Courteous
Taxi Service

780-743-1234

CHARGE SLIP

TRIP I.D. # _____

DATE SEP 01, 2016 TIME 11:00 ☐ AM ☐ PM

COMPANY _____

DEPT. _____

AUTHORIZED BY _____ REF. # _____

FROM Quality Inn TO Airport

PASSENGER(S) _____

2. _____

3. _____

DRIVER _____ CAR # _____

FARE \$ 25.00 G.S.T. _____



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: MacIntyre, Don

Constituency: Innisfail-Sylvan Lake

For the Month of: July

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12	60 km from Perm. Res.	Calgary	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16	60 km from Perm. Res.	Bowden	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
17	60 km from Perm. Res.	Calgary	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26	60 km from Perm. Res.	Keephills	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$112.24	\$5.61	\$117.85

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

31 Aug 2016



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: MacIntyre, Don

Constituency: Innisfail-Sylvan Lake

For the Month of: August

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13	60 km from Perm. Res.	Elnora	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
23			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
26	On August 18, 2017 the following was paid back:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
27	August 30 - Dinner		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
28	60 km from Perm. Res.	Devon	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
29	60 km from Perm. Res.	Ft. MacMurray	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30	60 km from Perm. Res.	Ft. MacMurray	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31	60 km from Perm. Res.	Ft. MacMurray	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
Grand Total						\$160.57	\$8.03	\$168.60

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

31 Aug 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: MacIntyre, Don

Constituency: Innisfail-Sylvan Lake

Employee #: [REDACTED]

Date: 4/19/2016

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)

\$ 1,780.00

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.

JULY 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: MacIntyre, Don

Constituency: Innisfail-Sylvan Lake

Employee #: [REDACTED]

Date: 4/19/2016

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)

\$ 1,780.00

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.

AUGUST 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

64



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: MacIntyre, Don

Constituency: Innisfail-Sylvan Lake

Employee #: [REDACTED]

Date: 4/19/2016

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)

\$ 1,780.00

x 12 = \$ 21,360.00

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.

SEPTEMBER 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



**Quality Hotel & Conference Centre
GST 86554 8226 RT0001 (CN456)**

424 Gregoire Drive
Fort McMurray, AB T9H3R2
(780) 791-7200
GM.CN456@choic-hotels.com

Account: [REDACTED]

Date: 9/1/16

Room: 345 GROUP~

Arrival Date: 8/28/16

Departure Date: 9/1/16

Check In Time: 8/28/16 7:42 PM

Check Out Time:

Rewards Program ID:

You were checked out by:

You were checked in by: lcox

Total Balance Due: 0.00

Post Date	Description	Comment	Amount
8/28/16	Room Charge	#345 Macintyre, Don	129.00
8/28/16	Other Tax		-2.00
8/28/16	State Tax		-0.10
8/28/16	Goods & Services Tax		-6.45
8/28/16	Occupancy Tax		5.16
8/29/16	Goods & Services Tax	Tax Exemption Refund	(6.45)
8/29/16	Other Tax	Tax Exemption Refund	(2.00)
8/29/16	State Tax	Tax Exemption Refund	(0.10)
8/29/16	Room Charge	#345 Macintyre, Don	129.00
8/29/16	Occupancy Tax		5.16
8/30/16	Room Charge	#345 Macintyre, Don	129.00
8/30/16	Occupancy Tax		5.16
8/31/16	Room Charge	#345 Macintyre, Don	129.00
8/31/16	Occupancy Tax		5.16
9/1/16	Master Card		(536.64)
		XXXXXXXXXXXX [REDACTED]	

Folio Summary 8/28/16 - 9/1/16

Room Charge	516.00
Goods & Services Tax	0.00
State Tax	0.00
Occupancy Tax	20.64
Other Tax	0.00
Master Card	(536.64)

Balance Due: 0.00

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

To discuss policy

\$106.50

Blondie's Restaurant
5004 33rd
Sylvan Lake AB
GST# 806054185RT0001

64 Mary Anne

Check: 2208

Guests: 7

Table: 29-1

06/03/2016 04:00PM

2	COFFEE	5.24
2	POP	5.50
3	*WATER	0.00
2	BEEF TACO SALAD	23.90
1	CHICK CEASAR WRAP	11.95
1	J'S BLT	10.95
	FRIES & GRAVY	1.00
1	J'S BLT	10.95
1	REUBEN	11.95
1	SMOKED CLUBHOUSE	13.95
	FRIES & GRAVY	1.00

Subtotal 96.39

G.S.T. 4.72

Total Due \$101.11

THANK YOU SERVER***

you

ASK US ABOUT OUR OUTSIDE CATERING

BLONDIE'S RESTAURANT
5004 33 ST
SYLVAN LAKE AB

CARD [REDACTED]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/06/03
TIME 0951 17:02:36
CLERK ID 08
RECEIPT NUMBER
C85026496-001-004-608-0

PURCHASE
AMOUNT \$101.11
TIP \$10.11
TOTAL

\$111.22

INTERAC
A0000002771010
22D51704A4AA057A
8080008000-6800
9E9BA53C49616D12

APPROVED

00-001

THANK YOU

CARDHOLDER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☒ Individual Stakeholder(s)

☐ Group: _____

Purpose:

To discuss issues

\$50.00

VIPHALAY LAOS AND THAI
RESTAURANT
10523 99 AVE NW
EDMONTON AB

CARD [REDACTED]
CARD TYPE ~~INTERAC~~
ACCOUNT TYPE CHEQUING
DATE 2016/06/01
TIME 10:21 19:12:23
RECEIPT NUMBER
C82015025-001-001-313-0

PURCHASE
TOTAL

\$52.50

INTERAC

[REDACTED]
E55D7CAB0F00E358
8080008000-6800
583B8B633600B5EB

APPROVED

THANK YOU

00-001

CARDHOLDER COPY

Viphalay Laos & Thai Restaurant

10523 99 Ave
Edmonton, Alberta T5K 0E7
(780) 756-8188

GST# 844456921RT0001

Server: Dew

Station: 5

Order #: 78903

Dine In

Table: 28

Guests: 12

1 GREEN CURRY
VEGETABLE
1 SM COCONUT RICE
2 YELLOW CURRY
Chicken
1 THAI SAMOSA
1 CHICKEN SATAY
1 BASIL STIR FRY
Chicken
1 GINGER LEMON CH
1 LG COCONUT RICE
1 COCONUT SOUP
1 PENANG
BEEF
1 ORANGE CASHEW CH
1 RED Curry
Chicken
Togo
1 LG COCONUT RICE
Togo
1 SALAD ROLLS

SUB TOTAL:

Tax 1:

TOTAL:

Gratuity:

TOTAL DUE:

>> Ticket #: 36 <<

6/1/2016 6:20:56 PM

THANK YOU!

Split bill. My
group \$52.50

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

To discuss policy

\$36.52

Viva La Sirena
4903 Lakeshore Drive
Sylvan Lake, Alberta
Canada, T4S1C6
Tel: 4038778808
Printed June 11, 2016 at 4:45 PM

June 11, 2016 at 4:45 PM
Table: 3, 2 guests
Party Name: 23
Tax 1 #: R0123456789

Order #: 811
Waiter: Mary03

Olives \$5.00
Mushroom Bread \$12.00
Seafood Salad \$15.00

Food Total \$32.00

Book your Christmas Party with us!

Printed from iPad using TouchBistro Pro

VIVA LA SIRENA
4903 LAKESHORE DR
SYLVAN LAKE AB

CARD *****
CARD TYPE MASTERCARD
DATE 2016/06/11
TIME 7589 16:46:42
CLERK ID 03
RECEIPT NUMBER
C82025955-001-019-010-0

PURCHASE
AMOUNT \$45.15
TIP \$4.52
TOTAL

\$49.67

PC MasterCard
A0000000041010
276C7F95EB7BB9EB
0000008000-E800
88C JC2265EBD7FF

APPROVED

THANK YOU

01-027

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

To discuss policy

\$40.86

CHECK REPRINT#2

06/19/16 000000

BILL#7238

#7332 6:06PM

LINA0009

GLU#000000027

***PBAL	\$0.00
LUNCH SPECIAL	\$12.99
BOWL OF SOUP	\$4.75
POP	\$2.50
GARDEN BGR	\$10.99
cake/ic cake	\$5.75
BAL FWD	\$36.98
MDSE ST	\$36.98
TTL TAX \$1.85 ***TOTAL	\$38.83

TIVOLI GARDEN
1916 10TH AVE
SPRUCE VIEW, AB
TOM 100
403-728-3555

SALE

Server #: 0099

MID: 8020496827

TID: 0089250008020496827001

Entry Method : C

REF #: 76

2016/06/19

18:02:32

Trace:0156

APPROVED

Appr Code: [REDACTED]

MASTERCARD

***** [REDACTED]

AMOUNT	\$38.83
TIP	\$3.88
TOTAL	\$42.71

VERIFIED BY PIN

PC MasterCard

MasterCard

AID: A0000000041010

TC: E0BB08

TVR: 0000008000

THANK YOU / MERCI

CUSTOMER COPY

Personal Expense Claim Receipt Description

Claimant Name: Don MacIntyre

Expense Category: Hosting

☒ Individual Constituent(s)☐ Individual Stakeholder(s)

☐ Group:

To discuss policy

\$31.27

Blondie's Restaurant
5004 33st
Alvan Lake AB
GST# 806054185RT0001

43 Bobbie

Check: 2120 Guests: 2
Table: 12-1
06/25/2016 06:15PM

1	SPAGHETTI MEATSAUCE	11.95
1	J'S BLT	10.95
1	TEA	2.62
1	POP	2.75

Subtotal	28.27
G.S.T.	1.41

Total Due } \$29.68

****PLEASE PAY SERVER****

Thank You
ASK US ABOUT OUR OUTSIDE CATERING

BLONDIES RESTAURANT
5004 33 ST
SYLVAN LAKE AB

CARD
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/06/25
TIME 5213 19:04:07
CLERK ID 13
RECEIPT NUMBER
C85025066-001-004-391-0

PURCHASE	
AMOUNT	\$29.68
TIP	\$3.00
TOTAL	

\$32.68

INTERAC
A0000002771010
221D519E667B507E
8080008000-6800
E12EFBC20B0C35B9

APPROVED

00-001

THANK YOU

CARDHOLDER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Kathy Taber

Expense Category: hosting

For hosting, select one:

☒ Individual Constituent(s)

☒ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Water is for hosting constituents or
stakeholders in appointments

\$49.96





Thank You for Your Order

For complete details, including estimated tax and shipping information, keep an eye out for an email from Staples at innisfail.sylvanlake@assembly.ab.ca with your complete order details. For items being picked up, please don't go to the store yet. We'll send you an email when it's ready for pick up.

If you have any questions about your order, please visit our [Help Centre](#).

Order number 1: 5410814915

Order date: July 20, 2016

AIR MILES Collector Number: [REDACTED]

You'll also find complete details of this order in the Order Status section of My Account on Staples.ca®.

Deliver to: Don MacIntyre, 160 hewlett park landng, 2, sylvan lake, AB T4S2J3

Expected Delivery : Thursday, July 21

Item No.	Item Name	Item Price	Qty	Coupons & Rewards	Subtotal
744976	Nestlé® Pure Life Water, 500ml Bottles, 35-Pack	\$8.99 35 Pack	4.0	\$0.00	Price: \$35.96

Billing Address

Don MacIntyre

MLA

160 hewlett park landng

2

sylvan lake, AB, T4S2J3

Subtotal:

Coupons:

Estimated GST (or HST):

Environmental Fee

Shipping:

Total:

Remaining Balance:

Remaining Balance will be applied to following:

\$14.00

If you have any questions or concerns about your order, please call 1-877-360-8500 or email bd.website@orders.staples.com

Important information concerning coupons and sales tax can be found at: [coupons and sales tax](#)

The tax shown is estimated. **Your Order Confirmation Email** will include shipment details, product availability and estimated tax.

Important information concerning return policy can be found at: [return policy](#)

For complete order details like sales tax, shipping info and Software Download instructions, keep an eye out for an email from Staples at the address above. You'll also find complete details of this order in the Order Status section of My Account on Staples.ca®.

Sign up to receive Staples emails with great online and in-store offers and exclusive money-saving discounts.

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office supplies

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Kathy Tabler

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Constituency Office Open House

\$39.27



Sobeys Sylvan Lake
#900, 3715-47 Ave
403.887.3982
GST# 816339121RT0001

Served by: Lori F

Open House

Welcome to Sobeys

PRODUCE

Fruit Tray \$24.99

BAKERY

Gingersnap Ckies 12S \$5.29

Brownies Value Pack \$8.99

1 Reward for Every \$20 1 Miles

SUBTOTAL \$39.27

5% GST \$1.25

TOTAL \$40.52

Master Card TENDER \$40.52

Cash CHANGE \$0.00

NUMBER OF ITEMS 3

AIR MILES

Member number:

Total Miles Earned

Your AIR MILES Balances

Cash Miles

Dream Miles

You could have earned an additional
4 AIR MILES

with a BMO Sobeys AIR MILES MasterCard
Apply today at bmosobeys.com

CLIENT ID 9803

TERMINAL ID 003

** PURCHASE

CARD MasterCard

DATE 06/24/2016

ATL MasterCard

ATD A0000000041010

TVH 0000008000

INSERTED

** \$ 40.52

RCPT 5093000

RESP 000

TIME 09:54:56

REF # 00000017

TSI E800

APPROVED

NO SIGNATURE REQUIRED

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

Term Tran Store Oper 06/24/16
3 5093 5124 112 09:55:00

Thank You For Shopping at
Sylvan Lake Sobeys

ph: 403-887-3982

Sobeys West Customer Care

May 6/16

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Kathy Tabler

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

For meeting

\$100.17



Sobeys Sylvan Lake

#900, 3715-47 Ave

403.887.3982

GST# 816339121RT0001

Served by: Lori F

GROCERY

Unico Olives \$3.99 C

YOU SAVED \$0.50

Artichoke Hearts Mnn \$3.99 C

Unico Olives \$3.49 C

YOU SAVED \$0.70

Bell Peppers Roasted \$3.49 C

YOU SAVED \$0.50

PRODUCE

Fruit Tray \$24.99 GC

Tray Veg Lrg \$17.99 GC

Mixed Melon Heaven \$8.89 GC

Crunch Mix Deluxe \$6.49 GC

DELI

Whole Dagw \$9.99 GC

YOU SAVED \$1.00

Hummus Pinenuts \$4.99 C

BAKERY

Gingersnap \$5.29 C

Party Pita WW \$3.29 C

Party Pita Wt \$3.29 C

SUBTOTAL \$100.17

5% GST \$3.42

TOTAL \$103.59

Master Card TENDER \$103.59

Cash CHANGE \$0.00

NUMBER OF ITEMS 13

*****YOUR SAVINGS*****

Discounts & Specials \$2.70

Your Total Savings \$2.70

AIR MILES

LET US REWARD YOU

Air Miles you could have earned
this visit: 20

Enroll today, visit www.airmiles.ca

CLIENT ID 9803

TERMINAL ID 003

** PURCHASE

CARD MasterCard

DATE 05/06/2016

APPL. MasterCard

ATD A0000000041010

TVR 0000008000

INSERTED

** \$ 103.59

RCPT 3889000

RESP 000

TIME 10:36:42

REF # 00000013

TST E800

APPROVED

May 13/16

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Kathy Tabler

Expense Category: Hosting

For hosting, select one:

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

Purpose:

For meeting

\$75.95



Sobeys Sylvan Lake
#900, 3715-47 Ave
403.887.3982
GST# 816339121RT0001

Served by: Joanne

Welcome to Sobeys

PRODUCE
Fruit Tray \$24.99 GC
BONUS EARNED 10 Miles
Tray Veg Lrg \$17.99 GC
DELI
EntrSm \$11.99 GC
EntrSm \$11.99 GC
BAKERY
Brownies Value Pack \$8.99 C



AIR MILES
Member number: [Redacted]
Base Miles Earned [Redacted]
Bonus Miles Earned [Redacted]
Total Miles Earned [Redacted]
Your AIR MILES Balances
Cash Miles [Redacted]
Dream Miles [Redacted]

You could have earned an additional
10 AIR MILES
with a BMO Sobeys AIR MILES MasterCard
Apply today at bmossobeys.com



CLIENT ID 9803
TERMINAL ID 002
** PURCHASE
CARD MasterCard
DATE 05/13/2016
APPL. MasterCard
AID A0000000041010
TVR 0000008000

INSERTED
[Redacted]
RCPT 8669000
RESP 000
TIME 10:10:27
REF # 00000015
TSI E800

APPROVED

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent.

\$44.00

VIVA LA SIRENA
4903 LAKESHORE DR
SYLVAN LAKE AB
CARD: [REDACTED]
CARD TYPE: INTERAC
ACCOUNT TYPE: CREDITING
DATE: 2016/07/14
TIME: 20:43:15
CLERK ID: 08
RECEIPT HOLDER:
C82020000000000000000000000000000

PURCHASE AMOUNT: [REDACTED]
TIP: \$8.00
TOTAL: [REDACTED] **\$8.00 Tip**

INTERAC
A0000000273010
55FDF4A2027043BF
8080008000000000
FDC5757E95E2D3FF

APPROVED

THANK YOU

CARDHOLDER COPY

Viva La Sirena
4903 Lakeshore Drive
Sylvan Lake, Alberta
Canada T4S1C6
Tel: 403/778808

Printed July 14, 2016 at 9:41 PM

July 14, 2016 at 9:41 PM

Order #: 2614

Table: 22, 2 guests

Waiter: Jesse08

Party Name: 466

Tax 1 #: R0123456789

From The Sea 8"

\$20.00

Grilled Tuna

\$16.00

Book your Christmas Party with us!

Printed from iPad using TouchBistro Pro

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: _____

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

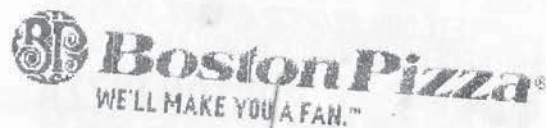
☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent

\$38.22



OLDS, ALBERTA
STORE 187

0092 Table 12 #Party 2
COLTON 0 SvrCk: 10 16:33 07/15/16

1 COFFEE	2.99
1 N.S. ICED TEA	3.25
1 DBL BAC BBQ BURG, beef patty, w/house salad, balsam dressg	15.99
1 MVB, beef patty, w/house salad, italian , tomato	15.99

Sub Total: 38.22
GST 1.91

07/15 17:30 TOTAL: 40.13

THANK YOU FOR JOINING US
GST #864350194RT001
PLEASE PAY SERVER

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent

\$12.62

BAKERS
REGIONAL CANADIAN CUISINE
112 STEPHEN AVENUE S.E.
FOR RESERVATIONS CALL 537-4449
GST#859734659RT0002

CHECK: 6295
SERVER: 302 Ernesto
DATE: JUL19'16 5:36PM
CARD TYPE: MasterCard \$
ACCT. #:
EXP DATE: XX/XX
AUTH CODE:
DON MACINTYRE

SUBTOTAL: 13.25

Gratuity: _____

Total: *13.25*

Signature: _____

I Agree to pay above total
amount according to card holder
agreement
Gratuity included for
parties of 6 or more

BAKERS
REGIONAL CANADIAN CUISINE
112 STEPHEN AVENUE S.E.
302 Ernesto

CHK 6295 JUL19'16 5:35PM

1 NAKED JUICE	4.50
1 CLIF COOL CHOC	2.75
1 TURKEY SANDWICH	6.00
Food Sales	10.50
Misc Sales	2.75
Total Paid \$	13.25

MasterCard \$ 13.25
---302 CLOSED JUL19 5:37PM---

Join Hyatt Gold Passport
today and start earning points
for stays, dining and more.
Visit goldpassport.com.
*Not point earning eligible.
#Not point redemption eligible.

GST#859734659RT0002

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent.
\$41.40

BOSTON PIZZA # 253
5014-40TH AVE T4G1Z1
INNISFAIL AB
20391334
BH2039133412

**** PURCHASE ****

08-10-2016 21:28:42

Acct # *****

Exp Date **/** Card Type MC

Name:

A0000000041010 MasterCard

Check # 249

Operator: 55

Trace # 49

Inv. # 50

RRN 001657029

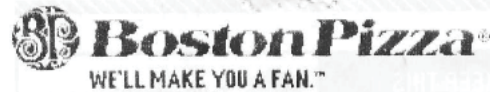
Purchase \$39.34

Tip \$3.93

Total \$43.27

(001) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy



Boston Pizza #253
INNISFAIL

0249 Table 65 #Party 2
SAM S SvrCk: 31 20:28 08/10/16

BAR QUENCH, mango ginger	3.25
TEA	2.99
QUENCH, mango ginger	3.25
DBL OVEN WINGS, , medium	
thai , w/ranch	11.99
BEEF/PEACH SALAD	15.99

Sub Total: 37.47
GST : 1.87
08/10 21:28 TOTAL: 39.34

THANK YOU FOR JOINING US AT BOSTON PIZZA
GST # 817819618

PLEASE PAY SERVER

TELL US HOW WE DID!
We value your feedback and time.
Complete our SUPER SHORT SURVEY and
receive a chance to WIN an AWESOME
\$200 Boston Pizza Gift Card.
www.Tellbostonpizza.com
please visit www.TellBostonPizza.com
90342-82000-05121

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent

\$70.70

PIER 7
101 5227 LAKESHORE DR
SYLVAN LAKE AB

CARD [REDACTED]
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/08/24
TIME 0265 17:32:39
CLERK ID 7777
RECEIPT NUMBER
C82025129-001-091-006-0

PURCHASE
AMOUNT \$66.89
TIP \$7.00
TOTAL

\$73.89

INTERAC
A0000002771010
76B2C85D9848FD07
8080008000-6800
B5C4637824B05D0B

APPROVED

00-001

THANK YOU

CARDHOLDER COPY

Pier 7 Restaurant
5227 Lakeshore Drive
Sylvan Lake, AB T4S 1Y8
(403) 887-0077
G.S.T.# 787633122RT0001

Tbl:26

Ref:57829

Chk:96853

Julie

8/24/2016 4:31 pm

2 Ice Tea	7.90
Potato Skins	10.95
Turkey BLT Wrap	13.95
Clubhouse	13.95
Chicken Curry	16.95

SubTotal	63.70
GST	3.19

Total 66.89

Total Due 66.89



Your feedback is important to us,
Please scan our QR Code and leave a
review for a chance to win a \$100 Gift
Card.

Be sure to enter the REF: Code off
your Bill in the "REVIEW TITLE"
section of the form.

Reviews must be submitted within 5
days of the receipt date.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent.
\$28.90

MCRAY'S ROADHOUSE GRILL
GST# 800748576

131 SHELTA S

Tbl 17/2 Chk 4160 Gst 0
Aug30'16 05:32PM

1 CANADIAN BURGER	12.95
1 CAJUN CHK BURG	12.95

Subtotal	25.90
25.90 GST	1.30
Amount Due	27.20

WEDNESDAY & SUNDAY
\$6.00 PER POUND WINGS IN PUB
THANKS FOR COMING TO MCRAYS!

*** Please pay your server ***

MCRAYS ROADHOUSE BAR AND GRILL
385 CRECOIRE DR
FORT McMURRAY AB T9H4K7

Transaction record

Term Id: 28717002
Invoice #: 0003544

DBT PURCHASE

DEBIT

App Label: INTERAC
ATD: A00000002771010
TVR: 8000000000
TSI: 6000
Op Id: 66
Card #: [REDACTED]

00 APPROVED 000

THANK YOU

Account: Chequing

AMOUNT \$27.20

TIP \$3.00

=====

TOTAL \$30.20

No signature required

Seq. #: 1003910 D

TC: 4519E892DE7567ED

TS: 20160830184433

Date: 2016/08/30 Time: 17:44:31

THANK YOU

CUSTOMER COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent
\$52.50

EARLS - YHM
240-100 Snowbird Way
Fort McMurray Airport
Fort McMurray, AB T9H5B4
780-790-1700

** TRANSACTION RECORD **

Trans. #: 1900
RUC: Restaurant
Table #: 24
Check #: 9070
Group #: 1
Employee #: 1244
Employee Name: JOSH

INTERAC Purchase
From Chequing

AID: A000000277101Q

Amount \$49.88

Tip \$5.00

=====

TOTAL CAD\$54.88

APPROVED [REDACTED]
00-001 006488
EA65US56/EA65WD56
001001001006
2016/09/01 12:48:10

TUR: 8080008000
TSI: 6800

Merchant Copy

THANK YOU
Come Again

EARLS RESTAURANTS

earls
GREAT FOOD GREAT PEOPLE

240 - 100 Snowbird Way
Fort McMurray Intl Airport
Fort McMurray, AB T9H 5B4
780-790-1700

1244 JOSH

Tbl 24/1 Chk 9070 Gst 3
01Sep'16 11:47AM

1 LEMONADE	3.75
1 CAJUN SAND	16.50
1 TACOS CHK SAND*	18.50
1 TOFFEE CAKE	8.75

Subtotal	47.50
GST Tax	2.38
12:46PM Total	49.88

PLEASE PAY YOUR SERVER
GST # 83096 3310 RT0001