

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2017-18  
064 - Innisfail-Sylvan Lake - MacIntyre, Don  
For Expenses Processed Jul 1 - Sep 30, 2017

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$583.93	\$1,672.72
MLA Parking Cap - \$	\$900.00	\$26.00	\$28.86
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$			\$949.67
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,340.00	\$10,680.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
<b>Other</b>			
Hosting - \$		\$255.55	\$374.96
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (43.5 cents per km)</b>			
Constituency Travel (Kilometres) - NF	80,000.0	4,812.0	7,612.0
Special Trips (5 trips per year) - NF	5.0	1.0	2.0
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52.0	1.0	11.0
<b>Other Travel</b>			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		

\$ - Reported on CAD dollar amount of actual expense

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

Budget reported is the maximum annual amount that may be claimed

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

# Element Fleet Management



BDFD290001

FLEET MANAGEMENT SERVICES DETAIL  
DETAI LS 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. [REDACTED]  
NO DU CLIENT [REDACTED]  
NVOICE DATE 08/01/17  
DATE DE LA FACTURE  
NVOICE NO. 0006873046  
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 DESCR PTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
[REDACTED]	MACL NTYRE	[REDACTED]	[REDACTED]	[REDACTED]	000468334735 07/10/17	LOBLAW'S INC INNISFAIL AB	UNLEADED REGULAR GASOLINE ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	49.5 TOTAL	.92	45.76 45.76		45.76 45.76
					000466103627 06/23/17	SHELL CANADA INC HANNA 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	77.2 2.0	1.02 5.37	74.89 10.74	3.74 54 4.28	89.91 89.91
					000465980353 06/21/17	FEDERATED COOPERATIVES LIMITED INNISFAIL AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	58.2	.96	53.20 2.66 2.66 53.20	2.66 2.66	55.86 55.86
					000467214210 06/10/17	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	60.9	.98	57.10 2.85 2.85 57.10 61- 56.49	2.85 2.85	59.95 59.95 61- 59.34
					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	245.8		241.69 9.79		251.48 61- 250.87
	BKDN TOTALS / TOTAUX CODIFICATION 01-64		UNITS / VEHIC	1			FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	245.8		241.69 9.79		251.48 61- 250.87
							BKDN TOTALS / TOTAUX COD FICATION DISCOUNT / RABAIS TOTAL / TOTAL					251.48 61- 250.87

BLE871

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

# Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL  
DETAI LS SERVICES DE GESTION DE PARC

PAGE - 195 OF 233  
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  
NVOICE DATE 09/01/17  
DATE DE LA FACTURE  
NVOICE NO. 0006898662  
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 DESCRPTION 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				000470061527 07/28/17	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	64.3	.92	56.61	2.83 2.83	59.44 59.44 59.44 58.80
					000471348094 07/24/17	PETRO CANADA RED DEER AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	60.9	.95	55.06	2.75 2.75	57.81 57.81
					000468813649 07/18/17	FEDERATED COOPERATIVES LIMITED INNISFAIL AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	63.1	.92	55.54	2.78 2.78	58.32 58.32
					000470064247 07/18/17	FASGAS PENHOLD 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	32.9	.93	29.25	1.46 1.46	30.71 30.71 30.71 30.38
					000470064796 07/15/17	FASGAS DEVON AB	REGULAR DIESEL GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	58.8	1.07	59.83	2.99 2.99	62.82 62.82 62.82 62.23
					000470067914 07/04/17	FASGAS RED DEER COUN AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH MISCELLANEOUS GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	64.1 1.0	.94 9.28	57.63 9.28	2.88 3.34	70.25 70.25 70.25 69.61
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS	344.1		323.20	16.15	339.35 2.20-

BLE871

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

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CLIENT NO.  
NO DU CLIENT  
NVOICE DATE 09/01/17  
DATE DE LA FACTURE  
NVOICE NO. 0006898662  
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 ----- DESCR PTION 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					TOTAL / TOTAL					337.15
	BKDN TOTALS / TOTAUX CODIFICATION 01-64		UNITS / VEHIC	1			FUEL QTY / QTE CARB 344.1 TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH			323.20	16.15	
							BKDN TOTALS / TOTAUX COD FICATION DISCOUNT / RABAIS TOTAL / TOTAL					339.35 2.20- 337.15

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Car wash

\$ 9.52

Our  
Car Wash

19-May-2017 2:29 PM

Purchase Txn: 0126788  
Basic Soft Touch

\$ 10.00

EXP: XX-XXXX Auth

\$ 10.00

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: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Car Wash

\$9.52

~~Our~~  
Car Wash

07-Sep-2017 3:45 PM

Purchase Txn: 0133146  
Basic Soft Touch \$ 10.0

Payment:  
Credit Card: ????-??-??-??  \$ 10.0  
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: Member Parking

For hosting, select one:

- ☐ Individual Constituent(s)  
☐ Individual Stakeholder(s)  
☐ Group: \_\_\_\_\_

Purpose:

\$12.00

RECEIPT

License Plate Number

\*Expiration Date/Time\*

04:30 PM

MAY 05, 2017

Purchase Date/Time: 03:30pm May 05, 2017

Total Parking: \$12.00

Total Federal: \$0.60

Total Due: \$12.60

Total Paid: \$12.60

Ticket #: 00030032

S/N #: 500012260460

Setting: Lot 31

Mach Name: Lot 31-2

Rate: 1 HOUR

Payment Type: Card

MasterCard

GST REG #102466000

KING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING RECEIPT

MasterCard





## 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 #:**

**Date:**

**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:** 2017-2018

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)**

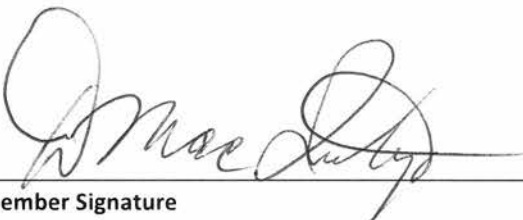
☒ **12 Monthly Payments**

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.

JULY 2017

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 #:**

**Date:**

**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:** 2017-2018

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.

August 2017

☒ 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)**

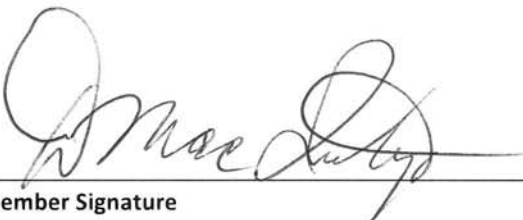
☒ **12 Monthly Payments**

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.

AUGUST 2017

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 #:**

**Date:**

**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:** 2017-2018

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)**

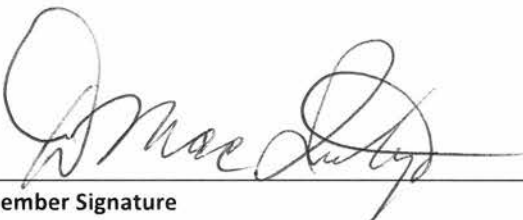
☒ **12 Monthly Payments**

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 2017

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: Don MacIntyre

Claimant Name: Don MacIntyre

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: \_\_\_\_\_

Purpose:

Hosting individual

\$ 111.03

Montana's  
195 2004 - 50th Avenue  
Red Deer, AB, T4R 3A2  
TRANSACTION RECORD  
Trans# 3585  
Card #:   
Card Entry:CHIP Account:CHEQUING  
Trans:PURCHASE  
Tip:\$11.17  
Ref. #:00000013 Sequence #:000013  
Term ID: 004 Trace #:00929657  
Server:Jihad Table:41  
Date:17/05/07 Time:19:28:49

APPROVED

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

Application Label: INTERAC  
IVR: 8090008000  
AID: A0000002771010 TSI: 6800  
IC: 32A3624C85963081

\*\*\* CUSTOMER COPY \*\*\*



2004-50th Ave  
Red Deer, AB, T4R 3A2  
gst# 868133810RT1001

2 Jihad J

Tbl 41/1 Chk 3585  
May07'17 06:11PM

Dining Room

4 Tonic Water	11.96
1 Ginger Ale	2.99
1 Iced tea	2.99
1 Bison Burger	18.97
1 SmkyJambalya	17.99
1 Chkn Fajita	20.99
Chkn Fajita	
1 Steak Fajita	21.99
Med Rare	
Guacamole	0.99
1 Guacamole	0.99
1 Extra Tortillas	0.00
4 Tortillas	

Subtotal  
HST  
Total Due

Rounded if Paying Cash

Tell Us How We Did Today to  
\* RECEIVE A FREE APPETIZER \*  
with the purchase of  
any two entrees.  
Complete our Guest survey at:  
[www.Montanassurvey.com](http://www.Montanassurvey.com)  
or call 1-866-240-1354  
Access Code: 5880-01536-20766  
Expiry in 21 days; 1 per table;  
Max value \$11.99; not valid with  
other offers; at participating  
locations only; must show survey  
validation code and this receipt

Earn & Redeem SCENE points  
at Montana's!

Learn more at  
[www.scene.ca/Montanas](http://www.scene.ca/Montanas)

Jay

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:

Office coffee hosting constituents at appointments

\$23.24

Sylvan Lake  
50 Hewlett Park Landing  
Sylvan Lake AB T4S 2J3  
Store#: 29732 Tel#: 403-887-1133

Come join us  
on May 3  
McHappy Day

SALE #11nmh8wk8d

KSH 5 06/10/2017 12:20:03 PM

Order #82

QTY	ITEM	TOTAL
4	Cheeseburger	7.56
1	Quarter Cheese	5.49
1	M Cappuccino 2%	3.09
1	M Mango Smoothie	3.49
1	M Mocha2%	3.99
	total	23.22
		1.16
	Take-Out Total	24.38
	Rounding Adjustment	0.02
	Total Rounded	24.40
	Cash Tendered	30.00
	Change	5.60

GST: 135686509

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 hosting in office of constituents and office coffee supplies

\$34.76

**LONDON  
DRUGS**

LD RED DEER 403 342 5222  
LOOKING FOR WORK? [www.londondrugs.com](http://www.londondrugs.com)

KICKING HORSE 9.99  
KICKING HORSE 9.99  
KICKING HORSE 9.99  
DAIRYLAND CREAMO 4.69  
DEPOSIT AB .10

CL

\*\*\*\*

VF

AUTH: [REDACTED]

CHANGE .00

(P)ST .00

(G)ST .25

6/10/17 16:25 0024 13 0070 60488

\*\*

THANK YOU

\*\*

LONDON DRUGS LTD. G.S.T. #R103378972

DIRECT PAYMENT TRANSACTION RECORD

LONDON DRUGS 24  
109, 2004 50TH AVE  
RED DEER, AB  
T4R 3A2

CASH REG.: 013 EMPLOYEE: 60488

1

NO.: [REDACTED]

AMOUNT [REDACTED]

Interac PURCHASE  
CHEQUING

06/10/17 16:25:33 AUTH: [REDACTED]  
REFERENCE: 66207374 0016590420

C

APL: Interac

APN:

AID: A0000002771010

TVR: 8000008000

TSI: 6800

00 APPROVED - THANK YOU 001

0024 013 60488 0070

\*\*\* CARDHOLDER COPY \*\*\*

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 hosting in office of constituents and office coffee supplies

\$5.96

\*\*\*\*\*  
ENTER FOR A CHANCE TO WIN 1 OF 3  
\$1000 CDN WAL-MART GIFT CARDS  
To enter, please complete a survey  
about today's store visit at:  
<http://survey.walmart.ca>  
\*\*\*\*\*

WE WANT TO KNOW HOW  
WE'RE DOING!

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

Please retain this receipt for the  
purposes of completing  
the online survey  
Your STORE CODE is: 3194  
Your opinion counts  
(Le sondage est également offert  
en français).

• • • • •  
• **HOW DID WE**  
• **DO TODAY?**  
•

Complete our short customer survey  
at [SURVEY.WALMART.CA](http://SURVEY.WALMART.CA) for a

monthly chance to

**WIN \$1000**

Rules and regulations apply. See contest rules for details.

Walmart  
Supercentre

WE SELL FOR LESS  
EVERY DAY!!!

STORE # 3194  
RED DEER, ALBERTA

ST# 03194	OP# 009050	TE# 50	TR# 09200
10 CREAM	006870014800		\$2.88 D
AB DEP MILK	000009066428		\$0.10 H
10 CREAM	006870014800		\$2.88 D
AB DEP MILK	000009066428		\$0.10 H
SUBTOTAL			\$5.96
TOTAL			\$5.96
MCARD TEND			\$5.96

MasterCard  
APPROVAL # [REDACTED]  
REF # 716700512887  
PAYMENT SERVICE - A

AID A0000000041010  
TC 950CE3FE655C6EE2  
TERMINAL # WMTJ022562  
\*Pin Verified

06/16/17 17:48:16

CHANGE DUE \$0.00  
GST/HST 137466199 RT 0001  
QST 1016551356 TQ 0001

# ITEMS SOLD 4

TC# 4135 1653 0874 6001 983



New Thursday flyer start date  
Circulaire maintenant en vigueur Jeudi  
06/16/17 17:48:21

\*\*\*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:

\$59.63

TIV I GARDEN CAFE  
GST #

08/31/17 000000 BILL#7933  
#4844 7:06PM LAIZA0007

GLU#000000002

\*\*\*PBAL \$0.00

LG FISH & CHIP \$15.99

FRIES

GRAVY \$1.99

SM LIVER \$17.99

BAKED

Red Cabbage

SM LIVER \$17.99

BAKED

Red Cabbage

BAL FWD \$53.96

MDSE ST \$53.96

TAX1 \$2.70

\*\*\*TOTAL \$56.66

T I GARDEN CAFE  
10TH AVE  
SPRUCE VIEW, AB. T0M 1V0  
403-728-3555

DEBIT SALE

Server #: 000077

REF#: 00000070

Batch #: 058 RRN: 000792790831

08/31/17 20:01:19

Trace: 70

DEBIT/CHEQUING Chip

AMOUNT	\$56.66
TIP	\$5.67
TOTAL	\$62.33

APPROVED - 00

INTERAC

AID: A0000002771010

TVR: 80 80 00 80 00

TSI: 68 00

THANK YOU / MERC

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:

\$7.36

*Tim Hortons*

Your Friends at Restaurant #4211  
1101 HWY 9 South Drunheller AB T0J 0Y0  
Owners: B Carey/K Lusk

Take Out  
342

1 Large Cafe Mocha	\$2.09
1 WITH Whipped Topping	\$0.60
1 Medium Cafe Mocha	\$1.89
1 Raisin Bran - Muffin	\$1.39
1 Raisin Bran - Muffin	\$1.39

Subtotal: \$7.36

GST: \$0.37 PST: \$0.00

~~Grand Total:~~ ~~\$7.73~~

Debit: \$7.73

Change Due: \$0.00

Take Out # 342 300 Cashier

Thanks for stopping by!

Tell us how we did at

[www.telltimhortons.com](http://www.telltimhortons.com) 1-888-601-1616

Thu Aug 31, 2017 14:26:49

Receipt #: 5381413

GST #801131855RT0001

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:

\$13.57

*Tim Hortons*

TH # 102146  
1315 - 2nd St W, Brooks AB, T1R 1P7  
(403) 362-2077

Eat In

1 Sausage - Brek Sand	\$3.89
1 Pinched Croissant	
1 MD Original Blend	\$1.69
1 Cream	
1 China	
1 Sausage - BELT	\$3.99
1 Bgl-Blueberry	
1 LG Orng Steep Tea	\$1.89
1 Milk	
1 China	
1 Milk	
2 Honey	
1 Btl Orange Juice	\$1.99
1 Deposit	\$0.10
1 Recycling	\$0.02

Subtotal: \$13.57

GST: \$0.67

Total Tax: \$0.67

**Grand Total: \$14.24**

Debit Card: \$14.24

Change Due : \$0.00

Order #:390

Cashier:SHIFT 3