#### LEGISLATIVE ASSEMBLY OF ALBERTA Member EDR 2018-19 066 - Lacombe-Ponoka - Orr, Ron For Expenses Processed April 1 - June 30, 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation Fuel and Minor Maintenance - \$ MLA Parking Cap - \$ Other Travel - Parking - \$ Member Travel (overnight stay in constituency) - \$	\$900.00	\$404.01	\$404.01
Taxi, Bus Travel - \$		\$9.58	\$9.58
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$ Member Travel (Meal Per Diems) - \$		\$1,167.23	\$1,167.23
Accommodation Edmonton Accommodation Allowance (\$23,160.00/yr max) Travel Accommodations Allowance	\$23,160.00	\$3,803.70	\$3,803.70
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other Hosting - \$		\$264.11	\$264.11
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km) Constituency Travel (Kilometres) - NF Special Trips (5 trips per year) - NF	80,000.0 5.0	1,484.0	1,484.0
Travel To and From the Capital Travel by Air, Bus or Train (Unlimited Trips) - NF Use of a Private Automobile (52 trips per year) - NF	52.0	8.0	8.0
Other Travel Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		
\$ - Reported on CAD dollar amount of actual expense			

NF - Reported based on number of trips, number of kilometres, or number of days Budget reported is the maximum annual amount that may be claimed

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

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

#### For hosting, select one:

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

#### Purpose:



Fas Gas Calgary Tr. 3006 Calgary Trail S Edmonton AB T6J 6V4 780.461.4338				
DATE: 2018-04	-05 TIME: 17:43:52			
STORE #: 50147 Paypoint: 02K GST: R747690	TRANS #: 244039 0493			
FUEL	(L) (\$/L) (\$)			
Pump 7 Regular	73.487 1.219 89.58			
TOTAL CA	AD			
DEBIT				
* GST INCLUDED	D IN FUEL \$ 4,27			
PURCHASE INTERAC ACCT: PETERENCE #: 55 AUTH #:	5277340 0010590150 C			
Interac A0000002771010 0080008000 F800				
00/001 APPROVED	- THANK YOU			
Retain This Co	MPURTANT opy For Your Records			
Custo LitreLog: ****** Terminal ID: BATCH NUMBER: PURCHASE REFERENCE #: REFERENCE #: CURRENT BALANCE LIFETIME BALANCE 000 APPROVED				
Register your Litre L Today at fasgasplus.c With initial password				
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B - (null)&GST, - (null), G - GST

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Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

### For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

#### Purpose:

\$58.34 + GST

Fac Cas I .
Fas Gas Lacombe 4576 50th Avenue Lacombe, AB T4L 2B6 4037824244
DATE: 2018-04-07 TIME: 16:05:13
STORE #: 40003 TRANS #: 141035 Paypoint: 01K GST: R101745552
FUEL (L) (\$/L) (\$) Pump 4 (L) (\$/L) (\$) Regular 50.252 1.219 61.26
TOTAL CAD \$ 61.26
DEBIT \$ 61.26
* GST INCLUDED IN FUEL \$ 2.92
PURCHASE INTERAC ACCT: CHEQUING REFERENCE #: 65277207 0010270650 C AUTH #:
Interac A0000002771010 C080008000 F800
00/001 APPROVED - THANK YOU
Retain This Copy For Your Records
itreLog: erminal ID: ATCH NUMBER: URCHASE REFERENCE #: REWARD: CURRENT BALANCE: LIFETIME BALANCE: 00 APPROVED
egister your Litre L oday at fasgasplus.c With initial password
Tell us how we're doing. You could WIN 1 OF 20 \$100 GIFT CARDS Visit TELLFASGASPLUS.CA for full details.

O

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

### For hosting, select one:



Individual Stakeholder(s)

Group:

#### Purpose:



Fas Gas Lacombe 4576 50th Avenue Lacombe, AB T4L 2B6 4037824244
DATE: 2018-04-13 TIME: 20:13:56
STORE #: 40003 TRANS #: 005824 Paypoint: 02K GST: R101745552
FUEL (L) (\$/L) (\$) Pump 3 Regular 42.477 1.219 51.78
TOTAL CAD \$ 51.78
CREDIT \$ 51.78
* GST INCLUDED IN FUEL \$ 2.47
PURCHASE MasterCard REFERENCE #: 66256799 0014400070 C AUTH #:
MasterCard A0000000041010 000008000 E800
01/027 APPROVED - THANK YOU
Retain This Copy For Your Records
Customer's Copy
NO SIGNATURE REDUIRED LitreLog: ************************************
Register your Litre L Today at fasgasplus.c With initial
Tell us how we're doing. You could Will OF 20 \$100 GIFT CARDS Visit TELLFASGASPLUS.CA for full details.

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

## For hosting, select one:

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

### Purpose:



WELCOME .	
Shell Canada 708 PARSONS RD SW T6X 1N4 EDMONTON (780) 450-2334	B
Bronze PUMP No. 01 LITRES 36.577 PRICE/L \$1.229 TOTAL FUEL \$44.95	1
TOTAL SALE \$44.95 INTERAC \$44.95	
FUEL INCLUDES GST - Fuel \$2.14 No. 137400032R1	1
00 APPROVED - THANK You og	
APPROVAL NO. CHEQUING PINPAD NO. VERIFIED BT FIN	
IMPORTANT retain this copy for your records	•
your records	
INTERAC PURCHASE INV No. 2200698961 2018/05/10 21:28 Interac AID A0000002771010 TVR 0080008000	5
INTERAC PURCHASE INV No. 2200698961 2018/05/10 21:28 Interac AID A0000002771010 TVR 0080008000 TSI F800 YOUR OPINION COUNTS Tell us about your recent visit at www.shell.ca/opinior and you could win a FUEL FOR A YEAR	-
INTERAC PURCHASE INV No. 2200698961 2018/05/10 21:28 Interac AID A0000002771010 TVR 0080008000 TSI F800 YOUR OPINION COUNTS Tell us about your recent visit at www.spell ca/copinion	-
INTERAC PURCHASE INV No. 2200698961 2018/05/10 21:28 Interac AID A0000002771010 TVR 0080008000 TSI F800 YOUR OPINION COUNTS Tell us about your recent visit at www.shell.ca/opinior and you could win a FUEL FOR A YEAR *Receipt Required	-

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

#### Purpose:

Fuel \$ 44.37+ GST Fas Gas Bowden Hwy 2 Bowden, AB \* 2018-05-12 22:52:38 STORE #: 40083 TRANS #: 280949 GST #: R101745552 PUMP 3 Regular 35.86L AT \$1.299/L ACCT: MasterCard \$ 46.59 GST INCLUDED \$ 2.22 TOTAL \$ 46.59

Type: PURCHASE

# 66256013 0016160010 C

MasterCard A0000000041010 0400008000 E800

VERIFIED BY PIN 01/027 APPROVED THANK YOU

-- IMPORTANT --Retain This Copy For Your Records - Customer's Copy -

Tell us how we're doing. You could WIN 1 OF 20 \$100 GIFT CARDS Visit TELLFASGASPLUS.CA for full details.

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

## For hosting, select one:

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

#### Purpose:



Fas Gas L 4576 50th Lacombe T4L 2 403782	Avenue
DATE: 2018-05-24	TIME: 11:12:26
STORE #: 40003 Paypoint: 01K GST: R101745552	TRANS #: 154991
Pump 3	(L) (\$/L) (\$) 547 1.269 37.50
TOTAL CAD	
CREDIT	
* GST INCLUDED IN	FUEL \$ 1.79
PURCHASE MasterCard REFERENCE #: 562567 AUTH #:	98 0016800210 C
MasterCard A0000000041010 0000008000 E800	
01/027 APPROVED - THA	NK YOU
IMPORTA Retain This Copy F	ANT or Your Records
Customer's	s Copy
NO SIGNATUDE LitreLog: ***** Terminal ID: BATCH NUMBER: PURCHASE REFERENCE #: REWARD: CURRENT BALANCI LIFETIME BALANO 000 APPROVED	
Register yo Today at fa With ir passwor	our Litre L asgasplus.c nitial d
Tell us ho doing. Yo WIN 1 C \$100 GIFT Visi TELLFASGAS for full c	DU COUld DF 20 F CARDS it SPLUS.CA details.
B - (null)&GST, - (	nunn), u - uəl

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

#### For hosting, select one:



Individual Stakeholder(s)

Group:

#### Purpose:



Fas Gas Ri 3218 49th J Red Deer T4N 6R	ed Deer Avenue AB
2018-05-26	21:41:53
STORE#: TRANS#: GST#: R10	40044 387214 01745552
PUMP 8 Regular 38.51L AT s	1.269/L
ACC⊺: MasterCard	\$ 48.88
GST INCLUDED	\$ 2.33
TOTAL	\$ 48.88

Type: PURCHASE

## MasterCard

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Member Name: Ron Orr	
Claimant Name: Ron Orr	
Expense Category: Fuel and Minor Maintenance	
For hosting, select one:	
Individual Constituent(s)	
Individual Stakeholder(s)	

.

Purpose:

\$9.95 + GST

Group: \_\_\_\_\_

# Soapy's Car Wash

•

4876 46th Street Lacombe, AB Tel: 403-782-6268

Date: Apr 29/18 9:51 AM

GST# 812016889

Time Charge	11 Min	10.45
Cash:		20.45
Change:		10.00

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

### For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

#### Purpose:



# Soapy's Car Wash

4876 46th Street Lacombe, AB Tel: 403-782-6268

Date: May 11/18 3:48 PM

GST# 812016889

Time Charge	13 Min	12.35
Cash:		20.00
		353233
Change:		7.65

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

### For hosting, select one:

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

### Purpose:

Car Wash \$9.95+.65T

# Soapy's Car Wash

4876 46th Street Lacombe, AB Tel: 403-782-6268

Date: May 24/18 9:40 AM

#### GST# 812016889

Time Charge	11 Min	10.45
Cash:		20.45
Change:		10.00

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Fuel and Minor Maintenance

#### For hosting, select one:

Individual Constituent(s)

- Individual Stakeholder(s)
- Group:

#### Purpose:



Soapy's Car Wash

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-

4876 46th Street Lacombe, AB Tel: 403-782-6268

Date: Jun 8/18 12:44 PM

GST# 812016889

Time Charge	11 Min	10.45
Cash:		10.45
-		=====
Change:		0.00

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Taxi, Bus Travel

#### For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

#### Purpose:

Taxi for Awards Ceremony with Constituents at Government House

\$9.58 +GST

GREATER EDMONTON TAXI SERVICE 10135 31 AVE NW EDMONTON AB

CARD
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2018/04/04
TIME 7492 15:02:04
INVOICE # 558584
RECEIPT NUMBER
C85049994-001-001 680-0
PURCHASE
AMOUNT \$8.80
TIP \$1.20
TOTAL

\$10.00

### Interac

A0000002771010 ACDA800BF3B2D013 0280008000-E800 774298296ADF45F3 0280008000-F800

# **APPROVED**

AUTH# THANK YOU

00-001

CARDHOLDER COPY

YELLOW CAB 780.462.3456 BARREL TAXI 780.489.7777 EDMTAXI.COM GST 100403070



Member Name: Orr, Ronald

# 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.

Constituency: Lacombe-Ponoka

B = Breakfast (\$9.20) | L = Lunch (\$11.60) | D = Dinner (\$20.75)

For the Month of: April		Year: 2018	Year: 2018 Employee #:					
Day of Month	Reason for Travel	Meal Purchase Location(s)	8	Meal	D	Subtotal	G.S.T.	Total
1							A CONTRACTOR	
2	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.7
3	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.5
4	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.55
5	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.5
6							1999 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 - 1996 -	
7						and the second second		
8	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.75
9	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
10	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
11	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
12	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.5
13						na ene steatoù	tellater al	
14						10000		
15	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.7
16	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.5
17	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.5
18	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.5
19	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.5
20								
21								
22								19. 19.
23								
24								
25								
26								
27								
28								
29	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.7
30	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.5
31	,							
I certify that	I have met the requirements of s	ection 7 of the AL.	Gran	d To	tal	\$553.90	\$27.70	\$581.60

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 Sig

Date



# 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)

For the Mo	onth of: May	Year: 2018	Er	nplo	yee #	t:		
Day of Month	Reason for Travel	Meal Purchase Location(s)	в	Meal L	D	Subtotal	G.S.T.	Total
1	60 km from Perm. Res.	Edmonton	$\boxtimes$	$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
2	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
3	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
4								
5								
6	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.75
7	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
8	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
9	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
10	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
11								
12								
13	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.75
14	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.55
15	60 km from Perm. Res.	Edmonton		$\boxtimes$	$\boxtimes$	39.57	1.98	41.55
16	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.55
17								
18								
19								
20						•		
21								
22								
23								
24	Travel to/from Capital	Edmonton			$\boxtimes$	19.76	0.99	20.75
25	60 km from Perm. Res.	Edmonton		<u> </u>		19.81	0,99	20.80
26								
27								
28	Travel to/from Capital	Edmonton				19.81	0.99	20.80
29	60 km from Perm. Res.	Edmonton			$\boxtimes$	39.57	1.98	41.55
30	60 km from Perm. Res.	Edmonton		+	$\boxtimes$	39.57	1.98	41.55
31	60 km from Perm. Res.	Edmonton		<u>t</u>		39.57	1.98	41.55
	l have met the requirements of s			1	L	\$613.33	\$30.67	\$644.00

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



# Atta Darran Joy. 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: Orr, Ronald		Constituency: Lacombe-Ponoka	
Employee #:		Date: April 23, 2018	
Claim Type: Ten	nporary Residence Acco	nmodation Allowance in Edmonton - Claimed Annually	

## Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal	Year:
--------	-------

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)	\$ 1267 90 x12= \$ 0,00 15,214.80
Please Note: The Member is responsible for retaining all rec	ords which support the annual amount identified above.
Claim Payment Authorization (please check)	<b>12 Monthly Payments</b> 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.
	entire instal year. This monthly amount is state for the entire instal 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.

## April 2018

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.

Non

Member Signature

Updated March 2018



# Atta Darran Joy. 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: Orr, Ronald		Constituency: Lacombe-Ponoka
Employee #:		Date: April 23, 2018
Claim Type: Te	mporary Residence Accom	nodation Allowance in Edmonton - Claimed Annually

### Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

#### Fiscal Year:

Have you provided documents evidencing your Temporal Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.	
	\$ 1267 90 x12= \$ 0.00 15,214.80
Please Note: The Member is responsible for retaining all re	ecords 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.

## May 2018

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.

Non

Member Signature

Updated March 2018



# 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: Orr, Ronald	Constituency: Lacombe-Ponoka	
Employee #:	Date: April 23, 2018	
Claim Type: Temporary Residence Accommoda	tion Allowance in Edmonton - Claimed Annually	
Temporary Residence Accommodation Allowan Maximum of \$23,160 per fiscal year.	ce in Edmonton - Claimed Annually	

### **Fiscal Year:**

Have you provided documents evidencing your Temporar Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.	Vo changes to previous Ves INO
Monthly Amount (maximum \$1,930 or less)	\$ 1267 90 x12= \$ 0,00 15,214.80
Please Note: The Member is responsible for retaining all re	cords 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.

June 2018

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.

Non

Member Signature

Updated March 2018

Member Name: Ron Orr

Claimant Name: Ron Orr

Expense Category: Hosting

#### For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group:

#### Purpose:

Parade Candy		
	\$264.11	



C0403 #0193 11:52:30 11MAY2018 S02142 R003

## OUR FLYER DATES ARE CHANGING!

Starting Thursday May 17 our flyers will begin on Thursdays!

BRING HOME SAVINGS