

LEGISLATIVE ASSEMBLY OF ALBERTA  
 Member EDR 2017-18  
 047 - Airdrie - Pitt, Angela  
 For Expenses Processed Oct 1 - Dec 31, 2017

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$		\$1,024.10	\$2,545.82
MLA Parking Cap - \$	\$900.00		\$137.28
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$28.50	\$28.50
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$771.57	\$2,037.86
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$17,370.00
Travel Accommodations Allowance			\$401.70
Travel Accommodations Allowance (days; 10 max) - NF	10.0		3.0
<b>Other</b>			
Hosting - \$		\$593.06	\$960.73
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (43.5 cents per km)</b>			
Constituency Travel (Kilometres) - NF	80,000.0	2,459.0	8,461.0
Special Trips (5 trips per year) - NF	5.0		1.0
<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	5.0	14.0
<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

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$67.25

**ESSO**  
7 ELEVEN STORE 37837  
4819 - 184TH STREET  
EDMONTON, AB T6M 2X5

DATE: 2017-09-29 TIME: 10:14:13

Paypoint: 03C TRANS #: 080189  
Station#: 00304207 Cashier: manager  
GST: R119335453

FUEL	(L)	(\$/L)	(\$)
Pump 3			
SUPRM	60.143	1.174	70.61

**TOTAL CAD \$ 70.61**

**CREDIT CARD \$ 70.61**

\* GST INCLUDED IN FUEL \$ 3.35

**PURCHASE**

VISA C \*\*\*\*\* [REDACTED]  
INVOICE NO: TMY63840

Visa Credit  
A0000000031010  
0080008000  
F800

01 Approved - Thank You 027

VERIFIED BY PIN

Reconciliation ID: TMY617092910141345

-- IMPORTANT --

Retain This Copy For Your Records

- Customer's Copy -



The card balance shown does not include any transactions or redemptions completed within the last 72 hours.

B - &GST, - , G - GST

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$66.95

PETRO-CANADA  
217 EDMONTON TR.  
AIRDRIE  
Alberta T4B 1S1

GST: 809568272 (403) 948-6076  
2017-10-03 PC0381096:8541501 13:17  
TERMINAL: 028541552 OPER: A  
PAYPOINT: 028541501

FUEL	(L)	(\$/L)	(\$)
Pump 2 SuperClean	58.144	1.209	70.30*
Total Owed			70.30

**TOTAL PAID**  
**CREDIT CARD \$ 70.30**

\*TAXES INCL. #TAXES EXCL.

GST TOTAL \$ 3.35

Purchase  
C 0010010010 00 027

Visa Credit  
AID: A0000000031010  
0080008000  
F800

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CUSTOMER COPY

\*\*\*\*\*  
PETRO-POINTS

Thank you for being  
a Petro-Points and  
More Rewards member  
\*\*\*\*\*

Survey! Earn Points  
& chance to win gas  
[petro-canada.ca/hero](http://petro-canada.ca/hero)

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$119.37



# All Fitts Automotive

108 First St. N.  
Airdrie / Alberta  
T4B 0R3  
Tel.#: (403) 948-1825

CUSTOMER	VEHICLE	INVOICE ADMIN.
----------	---------	----------------

Angela Pitt

INV # : 17118  
Date : 10/02/2017  
Time :  
PO # :  
REG # : 814994547RT001  
Tech. : SHAWNO/ALLFITTS

Qty	Description	Parts Ea.	Tot.Parts	Labour	Tx	Total	C
	maint service			26.00	GST	26.00	
1.00	Oil Filter	27.82	27.82		GST	27.82	
5.00	castrol edge 5w40	11.99	59.95		GST	59.95	
	ENVIROMENTAL				GST	3.00	
	Shop Supplies			2.60	GST	2.60	

WO# 19375

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I hereby authorize the above work to be done together with all necessary materials. I also acknowledge my indebtedness for the said repairs being the total amount owing, or balance owing as shown hereon.

If wheels were removed during servicing please have wheel nuts rechecked in 75-100km's.

PAID BY:....  
10/02/2017 Visa 125.34

This company does not assume any responsibility whatever for vehicles or equipment left for repairs, storage or other purposes, or for articles left in same. Vehicles driven by our employees are at the owners risk.

Other Charges				3.00
Sub Tot.	87.77	28.60		119.37
			GST	5.97
			PST	0.00
			Deductible	0.00
			Total	125.34

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt  
Claimant Name: Angela Pitt  
Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$70.57

PETRO-CANADA  
148 LEVA AVE  
RED DEER  
ALBERTA T4E 0A5  
(403) 348-5003

GST 8233050650  
PC0070683:3800001  
TERMINAL: 023800058  
PAYPOINT: 023800001

2017-09-19 17:40

PUMP 08  
SUPERCLEAN  
LITRES L 60.289  
PRICE/L \$ 1.229  
FUEL SALES \$ 74.10\*

TOTAL OWED \$ 74.10

TOTAL PAID  
CREDIT CARD \$ 74.10

\* GST INCL. \$ 3.53

VISA  
\*\*\*\*\*  
AUTH  
PURCHASE  
C 0010010010 00 027

VISA CREDIT  
A0000000031010  
0080008000  
F800  
INVOICE 532652

VERIFIED BY PIN

00 APPROVED  
THANK YOU 027

-- IMPORTANT --  
RETAIN THIS COPY  
FOR YOUR RECORDS  
- CUSTOMER'S COPY -

\*\*\*\*\*

PETRO-POINTS

\*\*\*\*\*

\*\*\* BONUS POINTS \*\*\*  
IF APPLICABLE, WILL  
BE UPDATED LATER

SURVEY! EARN POINTS  
& CHANCE TO WIN GAS  
PETRO-CANADA.CA/HERO

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$68.95

WELCOME

Shell Canada  
109 Centre Ave  
T4B 2B6

Airdrie AB  
(403) 948-4115

V-Power  
PUMP No. 04  
LITRES 60.385  
PRICE PER LITRE \$1.199  
TOTAL FUEL \$72.40

TOTAL SALE \$72.40  
VISA \$72.40

FUEL INCLUDES  
GST - Fuel \$3.45  
No. 13740003211

01 APPROVED - THANK  
YOU 001  
APPROVAL No. [REDACTED]  
TERMINAL No.  
89095540  
VERIFIED BY PIN

IMPORTANT  
retain this copy for  
your records

[REDACTED]  
VISA  
PURCHASE C

INV No. 0955495683  
2017/09/14 13:01  
Visa Credit  
AID A0000000031010  
TVR 0080008000  
TSI F800

AIR MILES



\*\*\*\*\*  
Accumulate 95 AIR  
MILES Cash Miles  
and get \$10 off  
your purchase! (51)  
\*\*\*\*\*  
\*5X Miles-Fuel  
\*\*\*\*\*  
get up to 25 Bonus  
Miles every month\*

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

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

Purpose:

\$58.31
---------

BC Fuels Gas Bar #3809  
1050 Yankee Valley Road  
Airdrie AB  
T4A 2E4

Pump #6  
REGULAR \$61.23  
62.228 Litres @ \$0.984/L  

---

TOTAL \$61.23

Taxes included in fuel:  
GST# 733514327 \$2.92

**Approved**  
Pre Auth Completion  
Visa Credit  
AID: A0000000031010

EXP: \*\*/\*\*  
Host Date: 09/14/2017  
Host Time: 07:54:10

3809-6  
Rct#56352 Rcpt  
Batch# 1990-38

\*\*\*\*\*  
TELL US HOW WE DID TODAY  
MONTHLY CHANCES TO WIN \$5000  
VISIT WWW.STOREOPINION.CA  
OR CALL 1-877-234-2322  
FULL CONTEST RULES AT  
WWW.STOREOPINION.CA  
\*\*\*\*\*  
STORE: 03809  
CODE: 091417 075406 6352 03809

Sales Receipt ID:



25707540806

Please come again!



LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$52.10

WELCOME

Shell Canada  
7535 75 STREET  
T6C 4H8  
EDMONTON AB  
(780) 469-7732

V-Power  
PUMP No. 02  
LITRES 48.450  
PRICE/L \$1.129  
TOTAL FUEL \$54.70

TOTAL SALE \$54.70  
VISA \$54.70

FUEL INCLUDES  
GST - Fuel \$2.60  
No. 137400032RT

01 APPROVED - THANK YOU 001  
APPROVAL No. 057001  
TERMINAL No. 89017720  
VERIFIED BY PIN

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VISA PURCHASE C

INV No. 017/29 520  
2017/10/11 14.45  
Visa Credit  
Aid A0000000031010  
TVR 0080008000  
SI F8C0

Accumulate 95 AIR MILES Cash Miles and get \$10 off your purchase! (51)  
\*\*\*\*\*  
\*5X Miles-Fuel  
\*\*\*\*\*  
get up to 25 Bonus Miles every month\*  
\*\*\*\*\*  
Visit roadtorewards.ca for details  
\*\*\*\*\*

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

THANK YOU  
Questions?  
1-800-661-1600

STORE: C01772  
TRAN: 4059471  
10/11/2017 2:47:21

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$36.00
---------

ESSO

7 ELEVEN STORE 37801  
900 MARKET STREET SE  
ATRDRIE, AB T4A 0K9

2017-10-16 16:28:33

TRANS #: 139868  
STATION#: 00302751  
GST #: R119335453

PUMP 2  
SUPRM \$ 37.80  
33.335L AT \$1.134/L

GST INCLUDED \$ 1.88



TYPE: PURCHASE  
VISA



INVOICE NO: TAK54274



VISA CREDIT  
A0000000031010  
0080008000  
F800

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ANK YOU 027

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LOYALTY: NO

YOU COULD HAVE  
EARNED 127 ESSO  
EXTRA POINTS. YOUR  
FIRST REWARD STARTS  
AT 150 POINTS.  
PICK ONE UP IN STORE  
OR VISIT  
ESSOEXTRA.COM

RECONCILIATION ID:  
TAK517101616265128

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LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt  
Claimant Name: Angela Pitt  
Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$57.86

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

V-Power  
PUMP No. 08  
LITRES 51.090  
PRICE/L \$1.189  
TOTAL FUEL \$60.75

TOTAL SALE \$60.75  
VISA \$60.75

FUEL INCLUDES  
GST - Fuel \$2.89  
No. 137400032RT

01 APPROVED - THANK  
YOU 001

APPROVAL No. 099681  
TERMINAL No.  
89106260

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VISA  
PURCHASE C

INV No. 1062691160  
2017/10/29 16:12  
Visa Credit  
AID A0000000031010  
TVR 0080008000  
TSI F800

Accumulate 95 AIR  
MILES Cash Miles  
and get \$10 off  
your purchase! (51)  
\*\*\*\*\*  
\*5X Miles-Fuel  
\*\*\*\*\*  
\* You've filled 99  
.54 L- get up to 25  
Bonus Miles every  
month\*  
\*\*\*\*\*  
Visit roadtorewards  
.ca for details  
\*\*\*\*\*

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

THANK YOU  
Questions?  
1-800-661-1600

STORE: C10626  
TRAN: 2118534  
10/29/2017 4:15:16

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

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

Purpose:

\$65.70

PETRO-CANADA  
2002 LUXSTONE BLVD  
AIRDRIE  
ALBERTA T4B 3K8  
(403) 945-3164

GST  
PC0033037:3897801  
TERMINAL: 023897854  
PAYPOINT: 023897801

2017-08-31 08:06

PUMP 04  
REGULAR  
LITRES L 63.340  
PRICE/L \$ 1.089  
FUEL SALES \$ 68.98\*

TOTAL OWED \$ 68.98

TOTAL PAID  
CREDIT CARD \$ 68.98

\* GST INCL. \$ 3.28

VISA  
\*\*\*\*\*  
AUTH  
PURCHASE  
C 0010010010 00 027

VISA CREDIT  
A0000000031010  
0080008000  
F800  
INVOICE 030909

VERIFIED BY PIN

00 APPROVED  
THANK YOU 027

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SURVEY! EARN POINTS  
& CHANCE TO WIN GAS  
PETRO-CANADA.CA/HERO

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$56.73

BC Fuels Ltd. #3889  
1050 Yankee Valley Road  
Airdrie AB  
T4A 2E4

Pump #2  
REGULAR \$59.57  
58.745 Litres @ \$1.014/l

TOTAL \$59.57

Taxes included in fuel:  
GST# 733514327 \$2.84

**Approved**

Pre Auth Completion  
Visa Credit

AID: 0000000031010

EXP: \*\*/\*\*

Host Date: 10/24/2017

Host Time: 08:10:02

3889-2  
Ret#: 3133 Rcpt  
Batch: 2030-46

\*\*\*\*\*  
TELL US HOW WE DID TODAY  
MONTHLY CHANCES TO WIN \$5,000  
VISIT WWW.STOREOPINION.CA  
OR CALL 1-877-234-2999  
FULL CONTEST RULES AT  
WWW.STOREOPINION.CA  
\*\*\*\*\*  
STORE: 03889  
CODE:102417 081002 3133 03889

Sales Receipt ID:



29708100102

Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$71.43

BC Fuels Gas Bar #3809  
1050 Yankee Valley Road  
Airdrie AB  
T4A 2E4

Pump #6  
PREMIUM \$75.00  
56.647 Litres @ \$1.324/L  

---

TOTAL \$75.00

Taxes included in Fuel: 0  
GST# 733514327 \$3.57

**Approved**

Pre Auth Completion

Visa Credit

AID: 800000000031010



EXP: \*\*/\*\*

Host Date: 11/05/2017

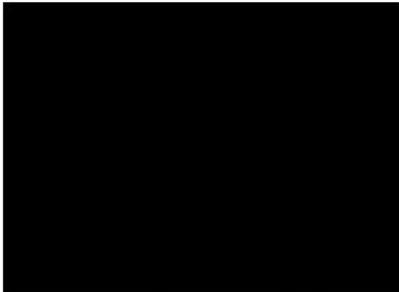
Host Time: 16:43:05



3809-6

Rct#78954 Rcpt

Batch# 2042-213



\*\*\*\*\*

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

\*\*\*\*\*

STORE: 03809

CODE:110517 164306 8954 03809

Sales Receipt ID:



30916430406

Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$74.44

BC Fuels Gas Bar #3809  
1858 Yankee Valley Road  
Airdrie AB  
T4A 2E4

Pump #6  
PREMIUM \$78.16  
68.639 Litres @ \$1.289/L  

---

TOTAL \$78.16

Taxes included in fuel:  
GST# 733514327 \$3.72

**Approved**  
Pre Auth Completion  
Visa Credit  
AID: A0000000031010



EXP: \*\*/\*\*  
Host Date: 11/09/2017  
Host Time: 18:51:13



3809-6  
Rct#80772 Rcpt  
Batch# 2046-387



\*\*\*\*\*  
TELL US HOW WE DID TODAY  
MONTHLY CHANCES TO WIN \$5000  
VISIT WWW.STOREOPINION.CA  
OR CALL 1-877-234-2322  
FULL CONTEST RULES AT  
WWW.STOREOPINION.CA  
\*\*\*\*\*  
STORE: 03809  
CODE:110917 185106 0772 03809

Sales Receipt ID:



31318511106

Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

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

Purpose:

*\$45.90*

WELCOME

Shell Canada  
5830 104 STREET  
T6H 2K3  
EDMONTON AB  
(780) 437-2220

V-Power  
PUMP No. 02  
LITRES 36.825  
PRICE/L \$1.309  
TOTAL FUEL \$48.20

TOTAL SALE \$48.20  
VISA \$48.20

FUEL INCLUDES  
GST - Fuel \$2.30  
No. 137400032RT

01 APPROVED - THANK YOU 001  
APPROVAL No. [REDACTED]  
TERMINAL No. 89000450  
VERIFIED BY PIN

IMPORTANT  
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your records

[REDACTED]  
VISA PURCHASE C

INV No. 0004595811  
2017/11/16 15:50  
Visa Credit  
AID A0000000031010  
TVR 0080008000  
TSI F800

[REDACTED]  
\*\*\*\*\*  
Accumulate 95 AIR  
MILES Cash Miles  
and get \$10 off  
your purchase! (51)  
\*\*\*\*\*  
\* You've filled 36  
.825 L- get up to 25  
Bonus Miles every  
month\*  
\*\*\*\*\*  
Visit shell  
.ca/refuelrewards  
for details  
\*\*\*\*\*

YOUR OPINION COUNTS  
Tell us about your  
recent visit at



LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$69.10

BC Fuels Gas Bar #3889  
1050 Yankee Valley Road  
Airdrie AB  
T4A 2E4

Pump #6  
PREMIUM \$72.55  
61.794 Litres @ \$1.174/L  
TOTAL \$72.55

Taxes included in fuel:  
GST# 733514327 \$3.45

**Approved**

Pre Auth Completion

Visa Credit

AID: A00000000031010

EXP: \*\*/\*\*

Host Date: 11/25/2017

Host Time: 13:49:29

3889-6

Rct#87540 Rcpt

Batch# 2062-172

\*\*\*\*\*  
TELL US HOW WE DID TODAY  
MONTHLY CHANCES TO WIN \$5000  
VISIT WWW.STOREOPINION.CA  
OR CALL 1-877-234-2322  
FULL CONTEST RULES AT  
WWW.STOREOPINION.CA  
\*\*\*\*\*  
STORE: 03809  
CODE:112517 134906 7540 03809

Sales Receipt ID:



32913492806

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$43.44

BC Fuels Gas Bar #3809  
1050 Yankee Valley Road  
Airdrie AB  
T4A 2E4

Pump #6  
REGULAR \$45.61  
44.106 Litres @ \$1.034/L  

---

TOTAL \$45.61

Taxes included in Fuel:  
GST# 733514327 \$2.17

**Approved**

Pre Auth Completion  
Visa Credit

AID: A0000000031010

EXP: \*\*/\*\*

Host Date: 11/26/2017

Host Time: 10:05:41

3809-6

Rct#87788 Rcpt

Batch# 2063-31

\*\*\*\*\*  
TELL US HOW WE DID TODAY  
MONTHLY CHANCES TO WIN \$5000  
VISIT [WWW.STOREOPINION.CA](http://WWW.STOREOPINION.CA)  
OR CALL 1-877-234-2322  
FULL CONTEST RULES AT  
[WWW.STOREOPINION.CA](http://WWW.STOREOPINION.CA)  
\*\*\*\*\*  
STORE: 03809  
CODE:112617 100506 7788 03809

Sales Receipt ID:



33010053906

Please come again!

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Taxi, Bus Travel

For hosting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

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

Purpose:

\$10.41
---------

Add a tip

Did you know you can order food delivery through Uber? Try UberEATS and get 20% off your first order with the code 20ubereats. Download the app today.



Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.

Your Fare



Trip Fare

5.93



Subtotal

\$5.93

Booking Fee (?)

2.65

Per-Trip Fee (?)

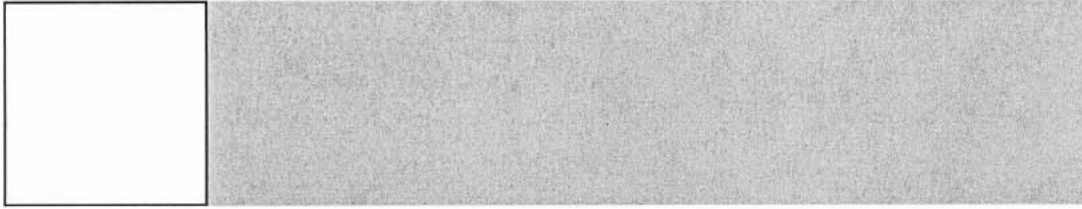
0.30

GST

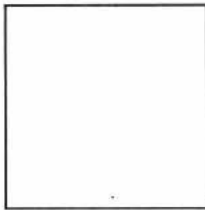
0.52

Wait Time (?)

1.53

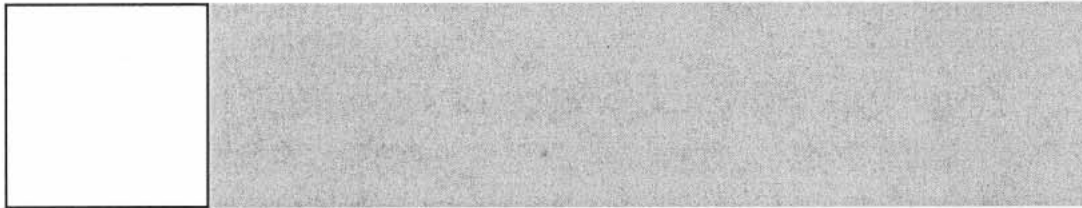


CHARGED



\$10.93

Personal \*\*\*\*



A temporary hold of \$9.32 was placed on your payment method Personal \*\*\*\* [redacted] at the start of the trip. This is not a charge and has or will be removed. It should disappear from your bank statement shortly. [Learn More](#)

[Visit the trip page](#) for more information, including invoices (where available)

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

\$ 9.00

Add a tip

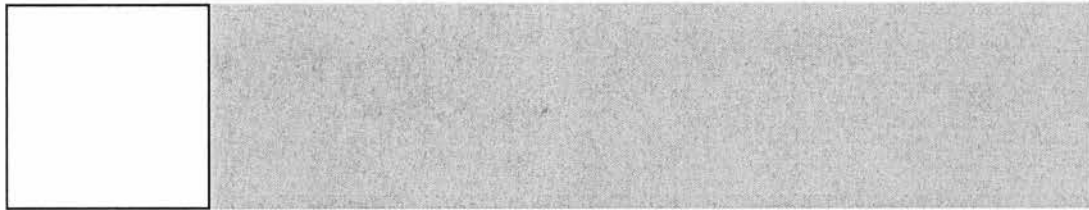


Did you know you can order food delivery through Uber? Try UberEATS and get 20% off your first order with the code 20ubereats. Download the app today.

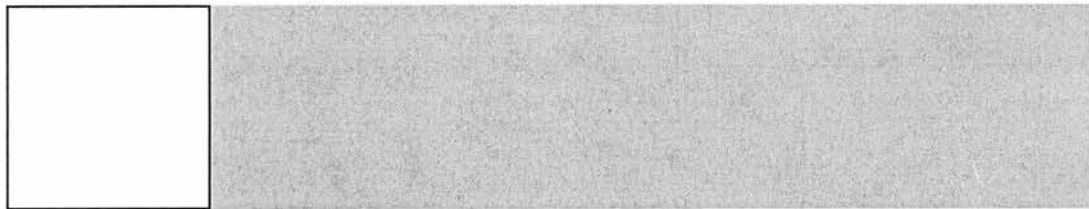


Fare does not include fees that may be charged by your bank.  
Please contact your bank directly for inquiries.

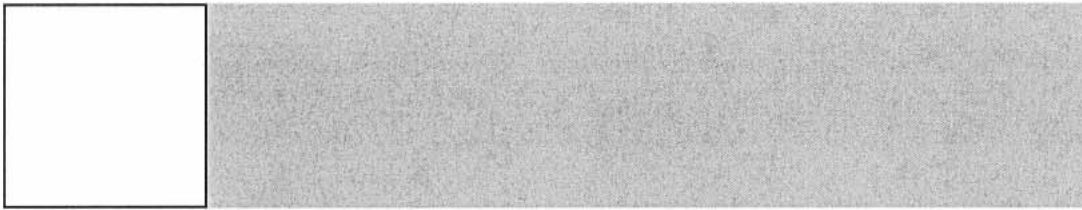
Your Fare



Trip Fare 6.11



Subtotal	\$6.11
Booking Fee (?)	2.65
Per-Trip Fee (?)	0.30
GST	0.45



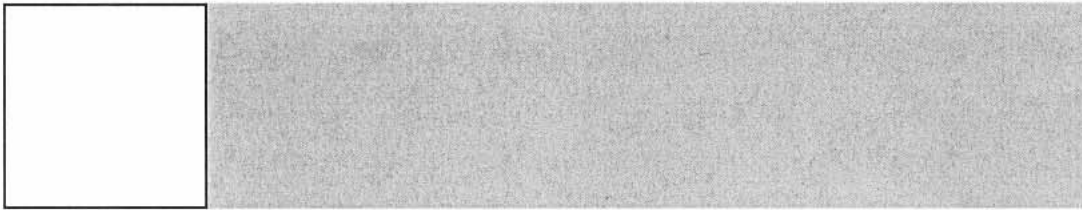
CHARGED



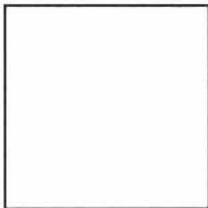
Personal \*\*\*\*



\$9.51



[Visit the trip page](#) for more information, including invoices (where available)



Invite your friends and family. Get a free ride worth up to \$15 when you refer a friend to try Uber.

Share code: angelap3147ue



LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Taxi, Bus Travel

For hosting, select one:

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

Purpose:

\$9.03
--------

Add a tip

Did you know you can order food delivery through Uber? Try UberEATS and get 20% off your first order with the code 20ubereats. Download the app today.



Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.

Your Fare



Trip Fare

6.08



Subtotal

\$6.08

Booking Fee (?)

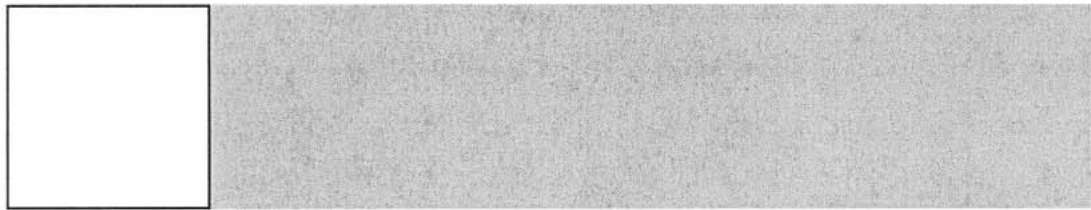
2.65

Per-Trip Fee (?)

0.30

GST

0.45



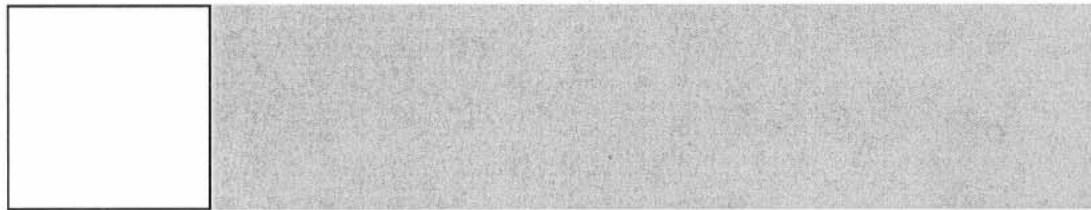
CHARGED



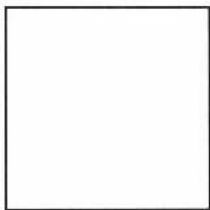
Personal \*\*\*\*



\$9.48



[Visit the trip page](#) for more information, including invoices (where available)



Invite your friends and family. Get a free ride worth up to \$15 when you refer a friend to try Uber.

Share code: angelap3147ue



# 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)

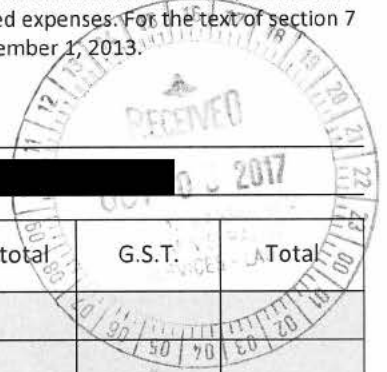
Member Name: Pitt, Angela

Constituency: Airdrie

For the Month of: September

Year: 2017

Employee #: [REDACTED]



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			<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			<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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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"/>			
<b>Grand Total</b>						<b>\$39.57</b>	<b>\$1.98</b>	<b>\$41.55</b>

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

5 OCT 2017  
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)

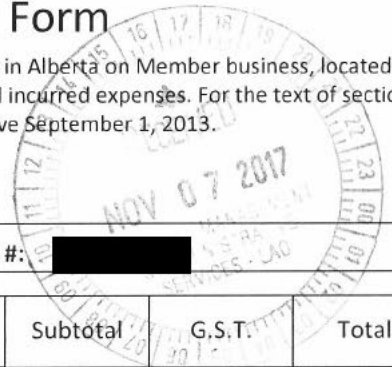
Member Name: Pitt, Angela

Constituency: Airdrie

For the Month of: October

Year: 2017

Employee #: [REDACTED]



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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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			<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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
<b>Grand Total</b>						<b>\$118.71</b>	<b>\$5.94</b>	<b>\$124.65</b>

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

4 Nov 2017  
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)

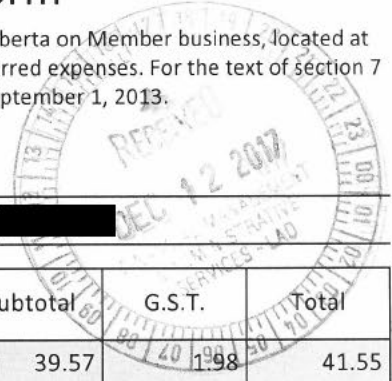
Member Name: Pitt, Angela

Constituency: Airdrie

For the Month of: November

Year: 2017

Employee #: [REDACTED]



Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
2	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
6	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
7	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
8	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
9	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
13	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
14	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
15	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
16	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
17			<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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
27	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
28	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
29	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
30	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Grand Total</b>						<b>\$613.29</b>	<b>\$30.66</b>	<b>\$643.95</b>

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.

*Angela Pitt*  
Member Signature

7/12/2017  
Date M J



# Members' Temporary Accommodation Allowance Claim Form

47

**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:** Pitt, Angela **Constituency:** Airdrie

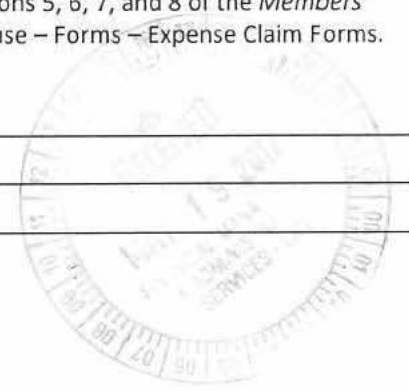
---

**Employee #:** [REDACTED] **Date:** 5/12/2017

---

**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)** \$ 1,930.00 **x 12 = \$ 23,160.00**

---

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.

OCTOBER 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

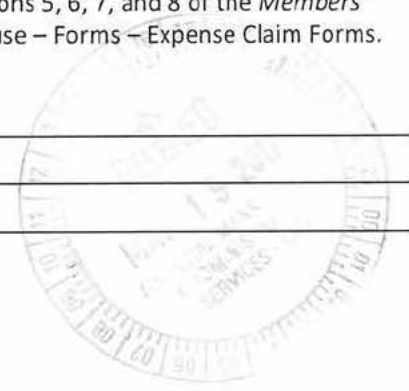


# Members' Temporary Accommodation Allowance Claim Form

47

**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

<b>Member Name:</b> Pitt, Angela	<b>Constituency:</b> Airdrie
<b>Employee #:</b> [REDACTED]	<b>Date:</b> 5/12/2017
<b>Claim Type:</b> 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

<b>Monthly Amount (maximum \$1,930 or less)</b>	\$ 1,930.00	<b>x 12 =</b>	<b>\$ 23,160.00</b>
---	-------------	---------------	---------------------

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.

NOVEMBER 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





# Members' Temporary Accommodation Allowance Claim Form

47

**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

<b>Member Name:</b> Pitt, Angela	<b>Constituency:</b> Airdrie
<b>Employee #:</b> [REDACTED]	<b>Date:</b> 5/12/2017
<b>Claim Type:</b> 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

<b>Monthly Amount (maximum \$1,930 or less)</b>	\$ 1,930.00	<b>x 12 =</b>	<b>\$ 23,160.00</b>
---	-------------	---------------	---------------------

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.

DECEMBER 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

LEGISLATIVE ASSEMBLY OF ALBERTA  
**Personal Expense Claim Receipt Description**

Member Name: Angela Pitt  
 Claimant Name: Angela Pitt  
 Expense Category: Hosting

For hosting, select one:

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

Purpose:

Meeting of constituent concern  
\$49.61

STATE & MAIN AIRDRIE  
 30 MARKET BLVD UNIT 201  
 AIRDRIE AB

CARD \*\*\*\*\*  
 CARD TYPE VISA  
 DATE 2017/09/27  
 TIME 2577 12:52:38  
 CLERK ID 102  
 RECEIPT NUMBER  
 C82026951-001-049-003-0

PURCHASE  
 AMOUNT \$43.05  
 TIP \$8.61  
 TOTAL  
\$51.66

Visa Credit  
 A0000000031010  
 9DA9968CF4CE673D  
 0080008000-E800  
 4C5CF3C3D1044562  
 0080008000-F800

**APPROVED**

01-027

THANK YOU

*Thank you!*



State and Main Airdrie  
 Unit 201 30 Market Blvd  
 Airdrie, AB T4A 0K9

Phone: 403-948-0071  
 GST: 81068 7996

Table #73

Trans #: 86428 Serv: A/TX 102  
 9/27/2017 12:51 PM # Cust: 2

Quan	Descript	Cost
1	Reuben	\$15.25
1	->\$Cup Bacon Tom soup	\$2.00
2	Dip	\$2.00
1	The Main Burger	\$15.50
1	->\$Add Bacon	\$2.00
1	->\$French Onion	\$4.25

Net Total: \$41.00  
 GST \$2.05

**TOTAL: \$43.05**  
**Amount Due: \$43.05**

Happy Hour Every Day!!  
 3-6PM and 9-Close  
 New Menu Oct 2nd!!

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Meeting of constituent concern

\$43.99

HAYLOFT RESTAURANT  
403 MACKENZIE WAY SW  
UNIT  
AIRDRIE AB

CARD \*\*\*\*\* [REDACTED]  
CARD TYPE VISA  
DATE 2017/09/15  
TIME 8353 12:40:50  
RECEIPT NUMBER  
C82037403-001-416-001-0  
-----  
PURCHASE  
AMOUNT \$38.85  
TIP \$6.99  
TOTAL  
**\$45.84**  
-----

Visa Credit  
A0000000031010  
AB986D82A1F1271E  
0080008000-E800  
69FB67AA44FC3102  
0080008000-F800

**APPROVED**

[REDACTED] 01-027  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

5101 403 MacKenzie Way SW  
Hayloft Restaurant  
www.haylofton8th.com  
#hayloftairdrie

Table #14

Trans #: 13550 Serv: KATHRYN  
9/15/2017 12:32 PM # Cust:2

Quan	Descript	Cost
1	Coffee	\$3.00
1	TUNA MELT	\$17.00
1	FLATBREAD	\$17.00
Net Total:		\$37.00
GST		\$1.85

**TOTAL: \$38.85**  
**Amount Due: \$38.85**

Food: \$34.00  
Beverage: \$3.00

<-REPRINTED->

COME JOIN US FOR BREAKFAST/LUNCH  
DINNER OR AFTERNOON TEA  
TUESDAY - SUNDAY  
10:00AM-3:00PM, 5:00PM-10:00PM  
403,980,8123  
GST#: 8707573522 RT0001







LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Member of constituent concern

\$49.61

BREWSTERS #13  
200 3 Stonegate Drive  
Airdrie AB T4B 0N2  
403-945-2739

\*\* TRANSACTION RECORD \*\*

Tran. #: 1250  
Check #: 20  
Employee #: 22  
Employee Name: SAMANTHA  
Merch. ID: 23175380

Purchase  
Visa (VI)  
Card #:  
[REDACTED]

Amount \$43.81  
Tip \$7.89  
=====

TOTAL CAD\$51.70

BRW13S13 001  
Terminal No. F12317538003  
[REDACTED]

Reference #: 001459009  
2017/10/26 13:13:00

App Label: Visa Credit  
AID: A0000000031010  
TSI: F800

00 APPROVED - THANK YOU

Customer Copy

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for your records

THANK YOU  
Come Again

BREWSTERS BREWING CO  
& RESTAURANT

0020 Table 62 #Party 1  
SAMANTHA M SvrCk: 5 12:12 10/26/17  
Separate checks: 1-of-2

1 BAVARIAN PRETZELS BRE	11.99
1 ONION RING POUTINE	12.99
1 CALAMARI	12.99
1 TEA	3.75

Sub Total: 41.72

Tax: 2.09

10/26 13:10 TOTAL : 43.81

GST(5%) # 86281 2112  
200 - 3 STONEGATE DR NW  
AIRDRIE ALBERTA  
T2B 0N2  
www.brewsters.ca

NEW OFFSALE BOMBERS!!  
ASK YOUR SERVER FOR DETAILS!!

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Water for office use

\$22.50

VISTA WATER  
Remit payment to  
PO BOX 80020, DOWNTOWN PO  
AIRDRIE, ALBERTA, T4B3K3

Invoice #134629

PO #

Vendor #

11/14/2017  
Driver  
System Admin

11:16:33  
Route  
10026

Sold To:

Angella Pitt Office - MLA  
209 Bowers Street  
Airdrie, AB T4B 2B6

Desc	Qty	Unit \$	Total
Water 18.9L Purified 150	3	\$7.50	\$22.50
Subtotal			\$22.50
Tax			\$0.00
Invoice Total			\$22.50
Previous Balance			\$0.00
Payments: None			
Net Due			\$22.50

Next Delivery: 01/12/2018

For delivery or account inquiries  
please contact Shane @ 852-8632

Payment due 30 days from invoice date  
Thank-you for your business

GST # 849 941 954 RT0001





LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Cindy Koch

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Coffee for Constituency office

*\$11.98*



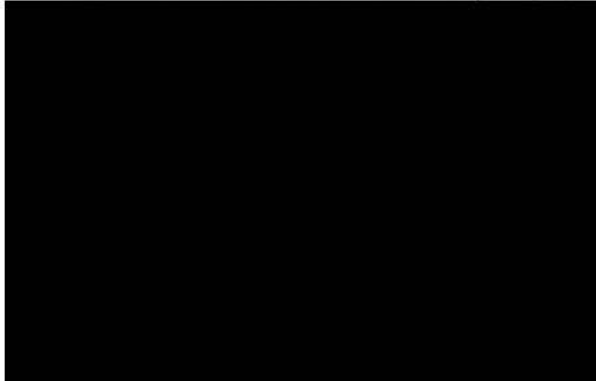
Safeway Tower Lane Mall  
505 Main Street Airdrie AB  
Phone: 403.948.4838  
GST# 817093735

Served by: SCO 20

Welcome to Safeway

GROCERY

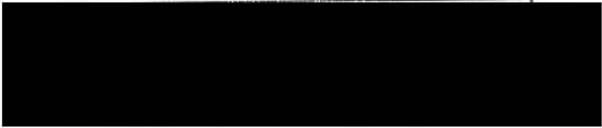
MH Coffee Decaf	\$13.59	C
INSTANT SAVINGS	-\$7.60	
MH Coffee Decaf	\$13.59	C
INSTANT SAVINGS	-\$7.60	



\*\*\*\*\*YOUR SAVINGS\*\*\*\*\*

Discounts & Specials	\$15.20
Your Total Savings	\$15.20
Percentage Savings	41%

\*\*\*\*\*



MERCHANT 22256677 C  
TERM SB2225667720 RCPT 5904000

\*\* Purchase \*\* 21.62  
MERCHANT 22256677 C



DATE 07/11/2017 TIME 18:11:23



APPL. Interac  
ATD 0000002771010

00 APPROVED - THANK YOU

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

Retain this copy for your record

Term	Tran	Store	Oper	07/11/17
20	5904	8830	120	13:11:05

Thank you for shopping at Our Store  
Come Again Soon

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Water for office use

\$15.00

VISTA WATER  
Remit payment to  
PO BOX 80020, DOWNTOWN PO  
AIRDRIE, ALBERTA, T4B3K3

Invoice #134352

PO #

Vendor #

10/13/2017  
Driver  
Shane Mooney

12:48:14  
Route  
10026

Sold To:

Angella Pitt Office - MLA  
209 Bowers Street  
Airdrie, AB T4B 2B6

Desc	Qty	Unit \$	Total
Water 18.9L Purified			
150	2	\$7.50	\$15.00
Subtotal			\$15.00
Tax			\$0.00
Invoice Total			\$15.00
Previous Balance			\$0.00
Payments: None			
Net Due			\$15.00

Next Delivery: 11/10/2017

For delivery or account inquiries  
please contact Shane @ 852-8632

Payment due 30 days from invoice date  
Thank-you for your business

GST # 849 941 554 RT0001

LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt

Claimant Name: Angela Pitt

Expense Category: Hosting

For hosting, select one:

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

Purpose:

Meeting of stakeholder concern

\$49.00

BREWSTERS #13  
200 3 Stonegate Drive  
Airdrie AB T4B 0N2  
403-945-2739

\*\* TRANSACTION RECORD \*\*

Tran. #: 1208  
Check #: 12  
Employee #: 22  
Employee Name: SAMANTHA  
Merch. ID: 23175380

Purchase  
Visa (VI)  
Card #: \_\_\_\_\_

Amount \$44.05  
Tip \$7.05  
=====

TOTAL CAD\$51.10

BRW13S15 001  
Terminal No. FI2317538005

Reference #: 001484002  
2017/11/20 12:58:36

App Label: Visa Credit  
AID: A0000000031010  
TSI: F800

00 APPROVED - THANK YOU

Customer Copy

Retain this copy  
for your records

THANK YOU  
Come Again

BREWSTERS BREWING CO  
& RESTAURANT

0012 Table 54 #Party 2  
SAMANTHA M SvrCk: 6 12:13 11/20/17

1 GYOZA	13.99
1 SIDE SIGNATURE SALAD	5.99
1 BAVARIAN PRETZEL SINGLE	3.99
1 TEMPURA GREEN BEANS	7.99
1 HAMMERHEAD FRENCH ONION	9.99

Sub Total: 41.95

Tax: 2.10

11/20 12:54 TOTAL: 44.05

GST(5%) # 86281 2112  
200 - 3 STONEGATE DR NW  
AIRDRIE ALBERTA  
T2B 0N2  
www.brewsters.ca

NEW OFFSALE BOMBERS!!  
ASK YOUR SERVER FOR DETAILS!!



ASSEMBLY OF ALBERTA  
Expense Claim Receipt Description

Angela Pitt

Name: Cindy Koch

Category: Hosting

Posting, select one:

Individual Constituent(s)

Individual Stakeholder(s)

Group: Volunteer Parade Committee

Purpose:

Provide meal for parade committee members

\$11.82

# Sobeys

Sobeys Airdrie  
100, 65 MacKenzie Way  
403.945.3056  
GST 817664782 RT0001

Served by: Marsha

Welcome to Sobeys

PRODUCE

Mandarin  
0.690 kg @ \$4.39 / kg

DELI

NbrMini  
2pc Chck Cold  
2pc Chck Cold  
2pc Chck Cold  
2pc Chck Cold  
Coleslaw Creamy  
YOU SAVED \$0.30

RMOO APPROVED

Approval Code:

Gift Card Balance:

\$0.00

MasterCard  
Cash

TENDER  
CHANGE

\$11.82  
\$0.00

NUMBER OF ITEMS

7

\*\*\*\*\*YOUR SAVINGS\*\*\*\*\*  
Discount

ASSEMBLY OF ALBERTA  
Expense Claim Receipt Description

Name: Angela Pitt

Name: Cindy Koch

Category: Hosting

Hosting, select one:

- Individual Constituent(s)  
 Individual Stakeholder(s)  
 Group: Volunteer Parade Committee

Purpose:

Provide meal for parade committee members

\$87.50

ALEXANDERS STEAK HOUSE  
& PIZZERIA  
800 VETERANS BLVD NW  
SUITE 310  
AIRDRIE AB T4B 3G9  
(587) 775-8990

SALE

Batch #: 034      REC #: 00000021  
 12/02/17      SEC#: 034001001021      19:58:09

MASTERCARD  
 [Redacted]

AMOUNT 76.12  
 TIP 15.00      \$15.00  
 TOTAL 91.12

00 - APPROVED - 001

MasterCard  
 AID: A0000000043010  
 TVR: 00 00 00 50 00  
 TSE: E8 00

CUSTOMER COPY

Alexander's Steak House

310 - 800 Veterans Blvd NW

Table #22

Trans #: 44167      Serv: Tiffany  
 12/2/2017 7:56 PM      # Cust: 4

Quan	Descript	Cost
1	Lasagna	\$16.50
1	Spaghetti & Meatballs	\$17.50
1	Atlantic Salmon	\$23.00
1	Sm Cattleman's Choice	\$15.50

Net Total: [Redacted]  
 GST: [Redacted]

TOTAL: [Redacted]  
 Amount Due: [Redacted]

Thank You 76.12





An Office DEPOT, Inc. Company  
 une société d'Office DEPOT, Inc

COST CENTRE BILLING REPORT

REQUISITION REPORT

SOLD TO ACCOUNT NO. [REDACTED]  
 AB LEGISLATIVE ASSEMBLY (ML  
 FINANCIAL MGMT & ADMIN SERV  
 9820 107 ST NW  
 4TH FLR  
 EDMONTON, AB T5K 1E7

G.S.T. R894032192  
 Q.S.T 1001640701TQ0009

PERIOD ENDING 11/30/2017  
 ACCT MGR NO. [REDACTED]

INVOICE NO. L675050  
 COST CENTRE [REDACTED]

SHIP TO ACCOUNT NO. [REDACTED]

ALTA LEGISLATIVE ASSEMBLY  
 AIRDIRE  
 209 BOWERS ST  
 AIRDIRE, AB T4B 0R6

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
REQ NO.	G317607	DATE	11/06/2017	ATTENTION	Airdrie Airdrie	P.O.#	MLA202319	G&T ORDER NO	556210-00	

2	1	1	EX	12273373	COFFEE-MATE FREVAN LIQ Approved By: Diana de Ocampo	8.62	CONTRACT	8.62	8.62	
---	---	---	----	----------	--	------	----------	------	------	--

1	1	0	BX	12273373	COFFEE-MATE FREVAN LIQ Approved By: Diana de Ocampo	8.62	CONTRACT	8.62	8.62	
---	---	---	----	----------	--	------	----------	------	------	--

REQ TOTAL 8.62  
 HST TOTAL 0.00  
 PST TOTAL 0.00  
 SUB-TOTAL 8.62  
 GST TOTAL 0.00  
 TOTAL THIS ORDER 8.62

COST CENTRE DEPT.

Hosting = \$17.24



LEGISLATIVE ASSEMBLY OF ALBERTA  
Personal Expense Claim Receipt Description

Member Name: Angela Pitt  
Claimant Name: Angela Pitt  
Expense Category: Hosting

For hosting, select one:

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

Purpose:

Water for office use

\$7.50

VISTA WATER  
Remit payment to  
PO BOX 80020, DOWNTOWN PO  
AIRDRIE, ALBERTA, T4B3K3

Invoice #135854

PO #  
Vendor #

12/08/2017 11:08:34  
Driver Route  
Shane Mooney 10026

Sold To:  
Angella Pitt Office - MLA  
209 Bowers Street  
Airdrie, AB T4B 2B6



Desc	Qty	Unit \$	Total
Water 18.9L Purified 150	1	\$7.50	\$7.50
Subtotal			\$7.50
Tax			\$0.00
Invoice Total			\$7.50
Previous Balance			\$0.00
Payments: None			
Net Due			\$7.50

Next Delivery: 01/12/2018

For delivery or account inquiries  
please contact Shane @ 852-8632

Payment due 30 days from invoice date  
Thank-you for your business

GST # 849 941 554 RT0001