

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2024-25
048 - Airdrie-East - MLA Angela Pitt
For Expenses Processed APR 1 - JUN 30, 2024

	Budget	Reimbursed This Qtr	Reimbursed To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00	\$23.81	\$23.81
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$		\$154.14	\$154.14
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$1,488.67	\$1,488.67
Member Travel (Meal Per Diems) - \$			
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$5,790.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$181.49	\$181.49
Event Tickets Disclosable - \$			
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.0	6,455.0	6,455.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	<u>80,000.0</u>	<u>6,455.0</u>	<u>6,455.0</u>
Adverse Driving Conditions			
Special Trips (5 trips per year) - NF	5.0		
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	9.0	9.0
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

Note:

Expenses are reported in the Quarter the expense is reimbursed and not necessarily the Quarter the expense was incurred.

The reader should take this into account when reviewing the disclosure



Legislative Assembly of Alberta

ME41337 - Members' Other Expenses Claim Form

Receipt Description	Parkplus
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Member Parking

Airdrie-East

From: Angela Pitt [REDACTED]
Sent: Wednesday, June 5, 2024 8:17 PM
To: Airdrie-East
Subject: Fwd: ParkPlus Receipt

----- Forwarded message -----
 From: <do-not-reply@parkplus.ca>
 Date: Wed, Jun 5, 2024, 5:36 p.m.
 Subject: ParkPlus Receipt
 To: [REDACTED]

ParkPlus Deposit

Date: Wed Jun 05 17:35:50 MDT 2024
Receipt Number: 4785441
Bank Transaction ID: 59834-0_417
Bank Auth Number: [REDACTED]
Total Amount: 25.00 CAD

Company Information

Calgary Parking 620-9th Ave SW
 (403) 537-7000 Calgary AB, T2P 1L5, CA
www.calgaryparking.com
 GST number: 119457869

Thank you for using ParkPlus. Keep this email as your official receipt.
 If you need any assistance, you can email us at parkplus@calgary.ca.

Sincerely,

Calgary Parking

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



American Express® Corporate Card Statement of Account

www.americanexpress.ca
Amex Bank of Canada
Corporate Service Centre
PO Box 7000 Station B
Willowdale (Ontario) M2K 2R6

Prepared For
ANGELA PITT
LEGIS ASSEMBLY OF AB

Account Number
XXXX-XXXX-XXXX-XXXX

Date
April 16, 2024

Page 1 of 3

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
XXXX-XXXX	XXXX-XXXX	XXXX-XXXX	XXXX-XXXX

Taxi, Bus Travel - \$71.21 + GST

Statement includes payments and charges received by April 16, 2024

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

Credit Limit Summary On April 16, 2024

Total Credit Limit \$

Available Credit Limit \$

Listing of Charges and Credits

Amount \$

March 18 Payment Received Thank You

New Transactions for ANGELA PITT

Card XXXX-XXXX

Amount \$

March 19

March 20

UBER TRIP HTTPS://HELP.UBER.
TAXICABS AND LIMOUSINES

35.78

March 20

UBER TRIP HTTPS://HELP.UBER.
TAXICABS AND LIMOUSINES

7.39

March 20

AMERICAN EXPRESS®

Payment Options

PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. Learn about all of your payment options, including how to enroll your bank account, make a one-time payment or enroll in our pre-authorized payment plan by visiting www.amex.ca/paymentmethods. Go paperless and get your full statements faster: www.amex.ca/paperless. DETAILS ENCLOSED.

Account Number

Amount Due \$

Amount Paid \$

ANGELA PITT
LEGIS ASSEMBLY OF AB
10 WILLIAMSTOWN GROV
AIRDRIE AB
T4B 3Y9

American Express® Corporate Card
Statement of Account

New Transactions for ANGELA PITT Continued

Card XXXX-XXXX-XXXX-XXXX

Amount \$

March 27

March 28 UBER TRIP HTTPS://HELP.UBER. 7.89
TAXICABS AND LIMOUSINES

March 28 UBER TRIP HTTPS://HELP.UBER. 8.22
TAXICABS AND LIMOUSINES

April 5 UBER TRIP HTTPS://HELP.UBER. 6.56
TAXICABS AND LIMOUSINES

April 11 UBER TRIP HTTPS://HELP.UBER. 9.29
TAXICABS AND LIMOUSINES

Total New Transactions for ANGELA PITT



American Express® Corporate Card
Statement of Account

www.americanexpress.ca
Amex Bank of Canada
Corporate Service Centre
PO Box 7000 Station B
Willowdale (Ontario) M2K 2R6

Prepared For
ANGELA PITT
LEGIS ASSEMBLY OF AB

Account Number
XXXX-XXXX-XXXX-XXXX

Date
May 16, 2024

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
[REDACTED]	0.00	46.74	[REDACTED]

Statement includes payments and charges received by May 16, 2024

Please see "About Your Statement" section for important information.

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

Credit Limit Summary On May 16, 2024	Total Credit Limit \$	Available Credit Limit \$
	[REDACTED]	[REDACTED]

New Transactions for ANGELA PITT

Card	Description	Amount \$
XXXX-XXXX-XXXX-XXXX		
April 17	UBER TRIP TAXICABS AND LIMOUSINES HTTPS://HELP.UBER.	10.35
April 25	UBER TRIP TAXICABS AND LIMOUSINES HTTPS://HELP.UBER.	9.37
May 14	UBER TRIP TAXICABS AND LIMOUSINES HTTPS://HELP.UBER.	9.95
May 15	UBER TRIP TAXICABS AND LIMOUSINES HTTPS://HELP.UBER.	10.22
May 16	UBER TRIP TAXICABS AND LIMOUSINES HTTPS://HELP.UBER.	6.85
Total New Transactions for ANGELA PITT		46.74

AMERICAN EXPRESS®

Payment Options
PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. Learn about all of your payment options, including how to enroll your bank account, make a one-time payment or enroll in our pre-authorized payment plan by visiting www.amex.ca/paymentmethods. Go paperless and get your full statements faster: www.amex.ca/paperless. DETAILS ENCLOSED.

Account Number [REDACTED]	
Amount Due \$ [REDACTED]	Amount Paid \$ [REDACTED]

ANGELA PITT
LEGIS ASSEMBLY OF AB
10 WILLIAMSTOWN GROV
AIRDRIE AB
T4B 3Y9



Legislative Assembly of Alberta
ME41089 - Members' Other Expenses Claim Form

Table with 2 columns: Receipt Description, Member Name, Claimant, Expense Category. Values include Uber, Angela Pitt, Taxi, Bus Travel.

Airdrie-East

From: Angela Pitt
Sent: Thursday, May 16, 2024 4:45 AM
To: Airdrie-East
Subject: Fwd: Your Wednesday evening trip with Uber

----- Forwarded message -----
From: Uber Receipts <noreply@uber.com>
Date: Wed, May 15, 2024, 7:35 p.m.
Subject: Your Wednesday evening trip with Uber
To: [Redacted]

Uber

Total CA\$6.85
May 15, 2024

Thanks for riding, Angela

We hope you enjoyed your ride
this evening.



Total CA\$6.85

Trip fare CA\$5.35

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta

ME41089 - Members' Other Expenses Claim Form

Receipt Description	Uber
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Taxi, Bus Travel

Subtotal	CA\$5.35
Booking Fee	CA\$0.87
Per-Trip Fee	CA\$0.30
GST	CA\$0.33

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

[Download PDF](#)

This is not a payment receipt. It is a trip summary to acknowledge the completion of the trip. You will receive a trip receipt when the payment is processed with payment information.

You rode with ABDULLAH

4.90 ★ Rating

Has passed a multi-step safety screen

Rate or tip



Every rideshare trip in Edmonton is insured for a covered auto accident by Economical Insurance.

[Learn more >](#)

UberX 1.00 kilometers | 4 min

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta
ME41089 - Members' Other Expenses Claim Form

Table with 2 columns: Receipt Description, Member Name, Claimant, Expense Category. Values include Uber, Angela Pitt, Taxi, Bus Travel.

Airdrie-East

From: Angela Pitt
Sent: Monday, May 13, 2024 7:03 PM
To: Airdrie-East
Subject: Fwd: Your Monday evening trip with Uber

----- Forwarded message -----
From: Uber Receipts <noreply@uber.com>
Date: Mon, May 13, 2024, 6:49 p.m.
Subject: Your Monday evening trip with Uber
To:

Uber

Total CA\$9.95
May 13, 2024

Thanks for riding, Angela

We hope you enjoyed your ride
this evening.



Total CA\$9.95

Trip fare CA\$8.31

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta

ME41089 - Members' Other Expenses Claim Form

Receipt Description	Uber
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Taxi, Bus Travel

Subtotal	CA\$8.31
Booking Fee	CA\$0.87
Per-Trip Fee	CA\$0.30
GST	CA\$0.47

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

[Download PDF](#)

This is not a payment receipt. It is a trip summary to acknowledge the completion of the trip. You will receive a trip receipt when the payment is processed with payment information.

You rode with VASYI

4.91 ★ Rating

Has passed a multi-step safety screen

Rate or tip



Every rideshare trip in Edmonton is insured for a covered auto accident by Economical Insurance.

[Learn more >](#)

UberX 3.55 kilometers | 9 min

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta
ME41089 - Members' Other Expenses Claim Form

Table with 2 columns: Receipt Description, Member Name, Claimant, Expense Category. Values include Uber, Angela Pitt, Taxi, Bus Travel.

Airdrie-East

From: Angela Pitt
Sent: Monday, April 29, 2024 5:55 PM
To: Airdrie-East
Subject: Fwd: Your Wednesday evening trip with Uber

----- Forwarded message -----
From: Uber Receipts <noreply@uber.com>
Date: Wed, Apr 24, 2024, 6:12 p.m.
Subject: Your Wednesday evening trip with Uber
To: [Redacted]

Uber

Total CA\$9.37
April 24, 2024

Thanks for riding, Angela

We hope you enjoyed your ride
this evening.



Total

CA\$9.37

Trip fare

CA\$7.42

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta

ME41089 - Members' Other Expenses Claim Form

Receipt Description	Uber
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Taxi, Bus Travel

Subtotal	CA\$7.42
Booking Fee	CA\$0.87
Wait Time	CA\$0.33
Per-Trip Fee	CA\$0.30
GST	CA\$0.45

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

[Download PDF](#)

This is not a payment receipt. It is a trip summary to acknowledge the completion of the trip. You will receive a trip receipt when the payment is processed with payment information.

You rode with RUCHITKUMAR

5.00 ★ Rating

Has passed a multi-step safety screen

Rate or tip



Every rideshare trip in Edmonton is insured for a covered auto accident by Economical Insurance.

[Learn more >](#)

UberX 2.01 kilometers | 7 min

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta
ME41089 - Members' Other Expenses Claim Form

Taxi, Bus Travel - \$6.96 + GST

Receipt Description	Uber
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Taxi, Bus Travel

Airdrie-East

From: Angela Pitt [REDACTED]
Sent: Monday, April 29, 2024 5:56 PM
To: Airdrie-East
Subject: Fwd: Your Tuesday evening trip with Uber

----- Forwarded message -----
From: Uber Receipts <noreply@uber.com>
Date: Tue, Apr 16, 2024, 6:09 p.m.
Subject: Your Tuesday evening trip with Uber
To: [REDACTED]

Uber

Total CA\$7.35
 April 16, 2024

Thanks for riding, Angela

We hope you enjoyed your ride
 this evening.



Total

CA\$7.35

Trip fare

CA\$6.56

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta

ME41089 - Members' Other Expenses Claim Form

Receipt Description	Uber
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Taxi, Bus Travel

Subtotal	CA\$6.56
Booking Fee	CA\$0.87
Per-Trip Fee	CA\$0.30
Promotion	-CA\$0.77
GST	CA\$0.39

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

[Download PDF](#)

This is not a payment receipt. It is a trip summary to acknowledge the completion of the trip. You will receive a trip receipt when the payment is processed with payment information.

You rode with NAVTEJ

4.97 ★ Rating

Has passed a multi-step safety screen

Rate or tip



Every rideshare trip in Edmonton is insured for a covered auto accident by Economical Insurance.

[Learn more >](#)

UberX 1.55 kilometers | 6 min

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta
ME41089 - Members' Other Expenses Claim Form

Taxi, Bus Travel - \$6.44 + GST

Receipt Description	Uber
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Taxi, Bus Travel

Airdrie-East

From: Angela Pitt [REDACTED]
Sent: Monday, April 29, 2024 5:57 PM
To: Airdrie-East
Subject: Fwd: Your Tuesday evening trip with Uber

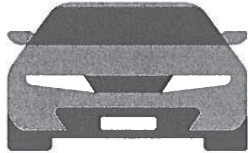
----- Forwarded message -----
From: Uber Receipts <noreply@uber.com>
Date: Tue, Mar 19, 2024, 7:06 p.m.
Subject: Your Tuesday evening trip with Uber
To: [REDACTED]



Total CA\$6.84
 March 19, 2024

Thanks for riding, Angela

We hope you enjoyed your ride
 this evening.



Total CA\$6.84

Trip fare CA\$5.81

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta

ME41089 - Members' Other Expenses Claim Form

Receipt Description	Uber
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Taxi, Bus Travel

Subtotal	CA\$5.81
Booking Fee	CA\$2.24
Promotion	-CA\$1.61
GST	CA\$0.40

Payments

Google Pay	CA\$6.84
3/19/24 7:06 PM	

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

[Switch Payment Method](#)

[Download PDF](#)

You rode with Mbua

4.97 ★ Rating

Has passed a multi-step safety screen

Rate or tip

TNDL License Number:

Please call 3-1-1 with any Compliments/Concerns



Every rideshare trip in Calgary is insured for a covered auto accident by Economical Insurance.

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta

MP41071 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP41071
Description	May 2024 - Per-Diems
Claimant	Angela Pitt
Employee Number	██████████
Constituency	Airdrie-East 48 (Angela Pitt)
Date Submitted	May 28, 2024
Date Received	May 29, 2024
Mailing Address	██████████ ██████████

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
7854	May 5, 2024	Travel to/from Capital	Edmonton			X	25.71	1.29	27.00
7855	May 6, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7856	May 7, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7857	May 8, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7858	May 9, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7859	May 12, 2024	Travel to/from Capital	Edmonton			X	25.71	1.29	27.00
7860	May 13, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7861	May 14, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7862	May 15, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7863	May 21, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7864	May 22, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7865	May 23, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7866	May 26, 2024	Travel to/from Capital	Edmonton			X	25.71	1.29	27.00
7867	May 27, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7868	May 28, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7869	May 29, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7870	May 30, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							837.19	41.81	879.00

This Claim Form has been certified by the Member to 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.



Legislative Assembly of Alberta

MP39575 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP39575
Description	April 2024 - Per-Diems
Claimant	Angela Pitt
Employee Number	██████████
Constituency	Airdrie-East 48 (Angela Pitt)
Date Submitted	April 30, 2024
Date Received	May 1, 2024
Mailing Address	██████████ ██████████

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
7159	Apr 8, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7160	Apr 9, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7161	Apr 10, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7162	Apr 11, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7163	Apr 15, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7164	Apr 16, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7165	Apr 17, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7166	Apr 18, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7167	Apr 22, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7168	Apr 23, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7169	Apr 24, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
7170	Apr 25, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							651.48	32.52	684.00

This Claim Form has been certified by the Member to 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.



Legislative Assembly of Alberta

MR41070 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR41070
Description	Claim for June 2024
Claimant	Angela Pitt
Employee Number	██████████
Constituency	Airdrie-East 48 (Angela Pitt)
Date Submitted	May 28, 2024
Date Received	May 28, 2024
Mailing Address	██████████ ██████████

Month	Year	Monthly Claim Amount
June	2024	1930.00
	Grand Total	1930.00

Office Use Only	██████████
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I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

I certify that I have met the requirements of the Members' Allowances Order, RMSC 1992, c. M-1, as amended, have incurred accommodation expenses on the dates or months selected, and have not previously claimed or been paid for these expenses.



Legislative Assembly of Alberta

MR41070 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR41070
Description	Claim for June 2024
Claimant	Angela Pitt
[Redacted]	
Constituency	Airdrie-East 48 (Angela Pitt)
Date Submitted	May 28, 2024
Date Received	May 28, 2024
[Redacted]	

Month	Year	Monthly Claim Amount
June	2024	1930.00
	Grand Total	1930.00

Office Use Only	[Redacted]
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I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

I certify that I have met the requirements of the Members' Allowances Order, RMSC 1992, c. M-1, as amended, have incurred accommodation expenses on the dates or months selected, and have not previously claimed or been paid for these expenses.



Legislative Assembly of Alberta

MR39194 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR39194
Description	Claim for April 2024
Claimant	Angela Pitt
Employee Number	[REDACTED]
Constituency	Airdrie-East 48 (Angela Pitt)
Date Submitted	April 2, 2024
Date Received	April 4, 2024
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
April	2024	1930.00
	Grand Total	1930.00

Office Use Only	[REDACTED]
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I confirm that I have completed declarations evidencing: (1) my current permanent residence and (2) my current temporary residence, with supporting documentation as required, and have either provided these documents to Financial Management.

Pursuant to section 6.1 of the Members' Allowance Order [Short-term Rental of Temporary Residence], I confirm that I have not, during the period for which the allowance is claimed, used any commercial service through which I, or a third party on my behalf, has rented out my temporary residence for a fee as a vacation rental or any other type of short-term accommodation.

I confirm that the amount being claimed does not exceed my costs of maintaining the temporary residence and acknowledge that I will be personally responsible for reimbursing the Legislative Assembly Office for any payment received that exceeds this amount.

I certify that I have met the requirements of the Members' Allowances Order, RMSC 1992, c. M-1, as amended, have incurred accommodation expenses on the dates or months selected, and have not previously claimed or been paid for these expenses.



Legislative Assembly of Alberta
ME41089 - Members' Other Expenses Claim Form

Receipt Description	Main Street BBQ
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Hosting - Individual Constituent(s) Hosting Purpose - Meeting of Constituent Concern

Hosting - \$60.50 + GST

TRANSACTION RECORD
MAIN STREET BEER & BBQ
505 MAIN ST SW UNIT 304 U
AIRDRIE AB

Purchase

May 02, 2024 12:48:49
MASTERCARD *****
TID: V4673992 Entry: Tap EMV (H)
Sequence: 041.023
Auth# [redacted] Response: 01-027
Batch: 041 Clerk: 11

Amount \$52.50
Tip \$10.50
Total \$63.00

A000000041010 MASTERCARD
TVR 000008001

Approved

Signature Not Required

Important: Retain this copy for your record

Cardholder copy

Main St BBQ

304-505 Main Street
Airdrie, AB T4B 3K3
(403)946-4741

GST #R5355100 RT0001

Table Q#7

Trans #: 1018475 Serv: AM BAK1
5/2/2024 12:47 PM # Cust: 1

Item	Description	Cost
1	half pound turkey breast	\$17.00
1	half pound brisket	\$17.00
1	side coleslaw	\$6.00
1	side broccoli salad	\$6.00
2	Combread & Honey Butter	\$4.00
Net Total:		\$50.00
GST		\$2.50

TOTAL : \$52.50
Amount Due: \$52.50

Happy Hour Everyday
3pm-6pm
\$2.00 Off All Pints
And All Day Sunday

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta
ME41089 - Members' Other Expenses Claim Form

Hosting - \$72.01 + GST

Receipt Description	Sorso
Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Hosting - Individual Constituent(s) Hosting Purpose - Meeting of Constituent Concern

SORSO LOUNGE
 401, 800 YANKEE VALLEY
 BLVD SW
 AIRDRIE, AB T4B3Y2
 4039804333

SALE

MID: 6784687
 TID: 001 REF#: 00000020
 Batch #: 121001 RRN: 00000020
 04/30/24 13:44:30
 APPR CODE: [REDACTED]
 MASTERCARD Proximity
 ***** [REDACTED] **/*

AMOUNT 61.42 \$68.25
 TIP 13.51 \$15.02
 TOTAL 74.93 \$83.27

APPROVED

MASTERCARD
 AID: A0000000041010
 TVR: 00 00 00 80 01

I AGREE TO PAY ABOVE TOTAL AMOUNT
 IN ACCORDANCE WITH CARD ISSUER'S
 AGREEMENT
 (MERCHANT AGREEMENT IF CREDIT VOUCHER)
 RETAIN THIS COPY FOR STATEMENT
 VERIFICATION

THANK YOU! / MERCI!

CUSTOMER COPY



Sorso Lounge
 401, 800 Yankee Valley Blvd SW
 Airdrie, AB
 Canada T4B 2E4
 Tel: 416 403 9804 333
 Printed April 30, 2024 at 1:43 PM

April 30, 2024 at 1:43 PM Order #: 4452
 Tables: 02, 2 guests Server: Laura

Pop \$1.50
 Korean Chicken Sammy \$21.00
 Pretzel Bites \$16.00
 Shrimp Tacos \$17.00
 London Fog \$6.50
 + \$0.50: 16oz

4.50 ← NA Beverage Total \$11.00
 54.00 ← Food Total \$54.00
 58.50 ← Sub Total \$65.00
 2.92 ← GST, 5% \$3.25
 61.42 ← Total \$68.25

THANK YOU FOR VISITING SORSO PLEASE
 LEAVE US A 5 STAR OR EMAIL US AT
 INFO@SORSO.CA

Tip Guide:
 22%=\$15.02 20%=\$13.55 18%=\$12.28

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to me or on my behalf.



Legislative Assembly of Alberta
SE40944 - Staff Other Expenses Claim Form

Hosting - \$22.99 + GST

Receipt Description	Coffee for office use
Member Name	Angela Pitt
Claimant	Donna Wilshusen
Expense Category	Hosting - Individual Constituent(s)



Safeway Tower Lane Mall
 505 Main Street Airdrie AB
 Phone: 403.948.4838
 GST# 895588788RT0001

Served by: SC0 24

Member card number: ***** [REDACTED]

GROCERY
 Premium Rst Decaf \$22.99 C

SUBTOTAL \$22.99
 TOTAL TAX \$0.00
TOTAL \$22.99

Master Card TENDER \$22.99
 Cash CHANGE \$0.00

NUMBER OF ITEMS 1

SCENE+ POINTS
 Member number: ***** [REDACTED]
 Your SCENE+ POINTS Balance [REDACTED]
 Scene+ Balance [REDACTED]

Earn 2 Scene+ points for every \$1 spent when using the Scotiabank Scene+ Visa Card. Learn more at scotiabank.com/2xthepoints

MERCHANT 22256677 RF
 TERMINAL ID S02225667724
 ** Purchase ** \$ 22.99
 CARD MC [REDACTED] RCPT 3337000
 NO. ***** [REDACTED] RESP 001
 DATE 05/08/2024 TIME 17:12:12
 AUTH # [REDACTED]
 REF# 001724105
 APPL MASTERCARD
 AID A0000000041010

00 APPROVED - THANK YOU

Term Tran Store Oper 05/08/24
 24 3337 8830 124 17:12:14

Thank you for shopping at Our Store
 Come Again Soon

 SHARE YOUR THOUGHTS
 FOR A CHANCE TO
WIN 1 OF 3 \$500
 SAFEWAY GIFT CARDS!

Hold on to this receipt and complete our online Customer Survey by visiting:

www.Safeway.ca/MySafeway

NO PURCHASE NECESSARY.

Rules on Contest website. Eligible for residents over the age of majority of Alberta; Western Ontario; Manitoba; and Saskatchewan.
 Contest ends Aug 3 2024.

Skill testing question to be correctly answered to win.

Odds of winning depend on number of entries received.

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



Legislative Assembly of Alberta
SE40944 - Staff Other Expenses Claim Form

Receipt Description	door prize (antenn)
Member Name	Angela Pitt
Claimant	Donna Wilshusen
Expense Category	Other

Hosting - \$10.99

COSTCO WHOLESALE
 Rocky View #1076
 300-293020 Crossiron Common
 Rocky View, AB T4A 0J6

62 Member [REDACTED]
 1046328 CHOC COOKIE 10.99
 SUBTOTAL [REDACTED]
 TAX [REDACTED]
 **** TOTAL [REDACTED]

XXXXXXXXXXXX [REDACTED]
 ACCT: MASTERCARD
 REFERENCE #: 0010017690 H
 AUTH #: [REDACTED] 2024/04/23 17:54:50
 Invoice Number: 014769
 Purchase - MASTERCARD
 A0000000041010
 0000008000 E800

01 APPROVED - THANK YOU 027
 AMOUNT: [REDACTED]

IMPORTANT - retain this copy
 for your records
 CUSTOMER COPY [REDACTED]
 MasterCard [REDACTED]
 CHANGE 0.00

G GST 5% [REDACTED]
 TOTAL NUMBER OF ITEMS SOLD = [REDACTED]
 2024/04/23 17:54:51 1076 14 440 635

22107601404402404231754
 OP#: 635 Name: Gisela G

Thank You!
 Please Come Again

G = GST P=PST
 GST #121476329RT
 Whse:1076 Trn:14 Trn:440 OP:635

Items Sold: [REDACTED]
62 2024/04/23 17:54

I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



Legislative Assembly of Alberta
VF25044 - Vendor Payment Submission Form

Hosting - \$15

Member Name	Angela Pitt
Claimant	Angela Pitt
Expense Category	Hosting - Individual Constituent(s)

VISTA WATER
 REMIT PAYMENT TO
 PO BOX 80020, DOWNTOWN PO
 AIRDRIE, ALBERTA, T4B3K3

Invoice #177543

PO #

Vendor #

05/10/2024 14:05:12
 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	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: 06/14/2024

For delivery or account inquiries
 please contact Shane @403-852-8632

Payment due 30 days from invoice date
 Thank-you for your business
 info@vistawater.ca
 GST # 849 941 554 RT0001

I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.