

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2018-19
064 - Innisfail-Sylvan Lake - Dreeshen, Devin
For Expenses Processed Oct 1 - Dec 31 2018

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$1,587.46	\$1,587.46
MLA Parking Cap - \$	\$900.00	\$20.95	\$20.95
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$633.24	\$633.24
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$6,886.05	\$6,886.05
Travel Accommodations Allowance		\$252.48	\$252.48
Travel Accommodations Allowance (days; 10 max) - NF	10.0	3.0	3.0
Other			
Hosting - \$		\$320.10	\$320.10
Event Tickets Disclosable - \$			
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.0	2,445.0	2,445.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	80,000.0	2,445.0	2,445.0
Special Trips (5 trips per year) - NF	5.0	2.0	2.0
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

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$95.24 + GST

Central Alberta Coop
4303 50TH Street
Innisfail Alberta
T4G 1B6
(403) 227 6663
GST# R104438411

Member # 00000000

Pump	Litres	Price/L
9	79.430	\$1.259
Product		Amount
Regular		\$100.00

Total \$100.00

GST (Inc Pumps) \$4.76

Purchase
VISA

DATE: 10/04/2018
TIME: 09:53:44
REF: 0011580060
TERM: 35B047XI

RESP: 027 ISO:01

SCOTIABANK VISA
A00000000031010
TVR: 0080008000
TSI: F800
VERIFIED BY PIN

Approved - Thank you

IMPORTANT:
retain this copy
for your records

CUSTOMER COPY

Store # 214227
Receipt # 05693

Thank You !!!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$95.24 + GST

7
WELCOME
Shell Canada
169 EAST LAKE CRESCENT
T4B 2B5
AIRDRIE AB
(403) 948-6988

Bronze
PUMP No. 05
LITRES 74.130
PRICE/L \$1.349
TOTAL FUEL \$100.00

TOTAL SALE \$100.00
VISA \$100.00

FUEL INCLUDES
GST - Fuel \$4.76
No. 137400032RT

01 APPROVED - THANK
YOU 001

APPROVAL No. [REDACTED]

TERMINAL No. [REDACTED]

89442310

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IMPORTANT
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your records

[REDACTED]
VISA
PURCHASE

C

INV No. 4423198059
2018/10/06 05:09
SCOTIABANK VISA
AID A0000000031010
TVR 0080008000
TSI F800

YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
FUEL FOR A YEAR
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

STORE: C44231
TRAN: 5155397
10/6/2018 5:12:26

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$95.24 + GST

ESSO EXPRESS PAY

2018-10-01 13:11:29

TRANS #: 205852
STATION#: 00302338
GST #: R119335453

PUMP 2
EREG \$100.00
80.065L AT \$1.249/L

GST INCLUDED \$ 4.76
TOTAL : CAD\$100.00

TYPE: PURCHASE
VISA

INVOICE NO: YN054346

SCOTIABANK VISA
A0000000031010
0000000000
F000

01 APPROVED - TH
ANK YOU 027

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RECEIVED COPY

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$47.62 + GST

TRANSACTION RECORD

ESSO
DELBURNE ESSO
1811 28TH AVE
DELBURNE, AB T0M 0V0

DATE: 2018-10-09 TIME: 16:17:30

Paypoint: 01K TRANS #: 042788
Station#: 00325149 Cashier: manager
GST: R730806296

*** DUPLICATE ***

** PREAUTH RECEIPT ONLY **

FUEL	(L)	(\$/L)	(\$)
Pump 3 PREPAID			
EREG	40.032	1.249	50.00

* GST INCLUDED IN FUEL \$ 2.38

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$88.59 + GST

ou payées lors du paiement afin
d'obtenir des points sur le carburant.

TRANSACTION RECORD
RELEVÉ DE
TRANSACTION

MOBIL
@ #3826
4734 - 50TH AVENUE
UEGREVILLE, AB T9C 1L1

TRANSACTION RECORD

MOBIL

2018-10-10 13:07:16

TRANS #: 044397
Station#: 00324440
GST #: R733514327

PUMP 5
EREG \$ 93.02
78.562L AT \$1.184/L

GST INCLUDED \$ 4.43
TOTAL : CAD\$ 93.02

Type: PURCHASE
VISA

INVOICE NO: TC084616
AUTH: [REDACTED]

SCOTIABANK VISA
A0000000031010
0080008000

7000

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$84.85

POSTED
30298



Want great rewards? Visit myHuskyRewards.ca

South Edmonton Husky Car Wash\~b
3105 Calgary Trail S
Edmonton AB
(780) 434-9593
GST# 833329964RT0001
Retailer ID 4507810
Retailer ID 4507810
Act:61273 2804-7
Batch:5312-77

2018/10/12 15:03:32

Pump# 7

Eth Regular \$89.09

73.685 L @ \$1.209/L

AMOUNT \$89.09

GST(Inc Pump) \$4.24

Pre Auth Completion

SCOTIABANK UISA

AID: A0300100031010

Date: 10/12/2018

Time: 15:03:32

AUTHCODE: [REDACTED]

S473001001018 00 000

TUR: 000000000 TSI: F800

Approved



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HOW WE DID!

myHusky.ca/Feedback

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$94.77 + GST

TRANSACTION RECORD

ESSO

PENHOLD ESSO
HWY 2 A & HAWKRIIDGE BLVD
PENHOLD, AB T0N 1R0

ESSO EXPRESS PAY

2018-10-20 21:56:01

TRANS #: 042982

STATION#: 00324233

GST #: R768192726

PUMP 4

REGLR \$ 99.51

82.306L AT \$1.209/L

GST INCLUDED \$ 4.74

TOTAL : CAD\$ 99.51

TYPE: PURCHASE

USA

INVOICE NO: TMW75074

AUTH:

SCOTIABANK USA

A0000000031010

0080008000

F800

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ANK YOU 027

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LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$92.86 + GST

TRANSACTION RECORD

ESSO

PENHOLD ESSO
HWY 2 A & HAINKRIE BLVD
PENHOLD, AB T0N 1R0

ESSO EXPRESS PAY

2018-10-28 20:20:39

TRANS #: 044446
STATION#: 00324233
GST #: R768192726

PUMP 4
REGLR \$ 97.50
80.647L AT \$1.209/L

GST INCLUDED \$ 4.64
TOTAL : CAD\$ 97.50

TYPE: PURCHASE
VISA

INVOICE NO: TMW78708
AUTH: _____

SCOTIABANK VISA
A0000000031010
0080008000
F800

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ANK YOU 027

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LEGISLATIVE ASSEMBLY OF ALBERTA

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

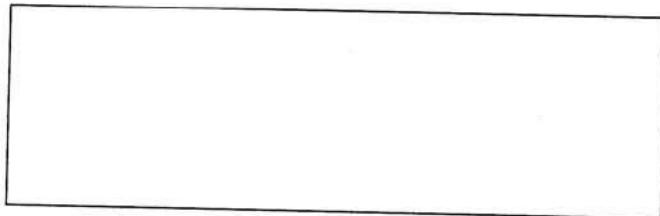
For hosting, select one:

- ☒
- Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:



Husky



Want great rewards? Visit myHuskyRewards.ca

South Edmonton Husky Car Wash\ -b

3105 Calgary Trail S

Edmonton AB

(780) 434-9593

GST# 833329964RT0001

Retailer ID 4507810

Retailer ID 4507810

Rct:52127 2804-7

Batch:5242-109

2018/08/03 20:38:08

Pump# 7

Eth Regular \$100.00

76.982x\$1.299L

~~QUICK WASH \$8.99~~

1 x \$10.99

Discount \$2.00

GST	\$0.45
-----	--------

AMOUNT \$189.44

GST(Inc Pump) \$4.76

Pre Auth Completion

SCOTIABANK VISA

AID: A000000000021010

Date: 08/03/2018

Time: 20:38:08

S403001001038 00 000

TUR: 0080008000 TSI: F800

Approved

WASH CODE 85521

Expires 90 days
This Location Only



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HOW WE DID!

myHusky.ca/feedback

1.000 L @ \$10.99B/L

1.000 L @ \$10.99/L

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$71.43 + GST

TRANSACTION RECORD

ESSO

7 ELEVEN STORE 37833
45 GASOLINE ALLEY EAST
RED DEER COUNTY, AB T4E 1B1

ESSO EXPRESS PAY

2018-07-19 11:52:50

TRANS #: 220994
STATION#: 00302524
GST #: R119335453

PUMP 7
EREG \$ 75.00
55.597L AT \$1.349/L

GST INCLUDED \$ 3.57
TOTAL : CAD\$ 75.00

TYPE: PURCHASE
VISA

INVOICE NO: TCKA185
AUTH: [REDACTED]

SCOTIABANK VISA
A00000000031010
0080008000
F800

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ANK YOU 027

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LOYALTY: NO

YOU COULD HAVE
EARNED 75 ESSO EXTRA
POINTS. YOUR FIRST
REWARD STARTS AT 150
POINTS.
PICK ONE UP IN STORE
OR VISIT
ESSOEXTRA.COM

RECONCILIATION ID:
TCKA18071911493120

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LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$95.24 + GST

WELCOME

Shell Canada
127 Leva Ave #100
T4E 1B2
RED DEER AB
(403) 346-9230

Bronze
PUMP No. 05
LITRES 75.245
PRICE/L \$1.329
TOTAL FUEL \$100.00
TOTAL SALE \$100.00
VISA \$100.00

FUEL INCLUDES
GST - Fuel \$4.76
No. 137400032RT

01 APPROVED - THANK
YOU 001

APPROVAL No. [REDACTED]
TERMINAL No.
89003570

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your records

VISA
PURCHASE C

INV No. 0036795555
2018/07/23 19:23
SCOTIABANK VISA
AID A0000000031010
TVR 0080008000
TSI F800

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www.shell.ca/opinion
and you could win a
FUEL FOR A YEAR
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

STORE: C00367
TRAN: 7492455
7/23/2018 7:26:48

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$95.24 + GST

WELCOME

Shell Canada
210 SCENIC DRIVE SOU
T1J 4L3
Lethbridge AB
403-320-8990

Bronze
PUMP No. 07
LITRES 76.395
PRICE/L \$1.309
TOTAL FUEL \$100.00

TOTAL SALE \$100.00
VISA \$100.00

FUEL INCLUDES
GST - Fuel \$4.76
No. 137400032RT

01 APPROVED - THANK
YOU 001

APPROVAL No. [REDACTED]
TERMINAL No. [REDACTED]
89114030

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IMPORTANT
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your records

VISA
PURCHASE C

INV No. 1140395470
2018/09/15 16:24
SCOTIABANK VISA
AID A0000000031010
TVR 0080008000
TSI F800

YOUR OPINION COUNTS
Tell us about your
recent visit at
www.shell.ca/opinion
and you could win a
FUEL FOR A YEAR
*Receipt Required

THANK YOU
Questions?
1-800-661-1600

STORE: C11403
TRAN: 3077340
9/15/2018 4:27:49

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$95.24 + GST

TRANSACTION RECORD

ESSO

7 ELEVEN STORE 37833
45 GASOLINE ALLEY EAST
RED DEER COUNTY, AB T4E 1B1

ESSO EXPRESS PAY

2018-09-07 09:42:07

TRANS #: 248949
STATION#: 00302524
GST #: R119335453

PUMP 7
EREG \$100.00
77.519L AT \$1.290/L

GST INCLUDED \$ 4.76
TOTAL : CAD\$100.00

TYPE: PURCHASE
VISA

INVOICE NO: TCKA7338
AUTH: [REDACTED]

SCOTIABANK VISA
A0000000031010
0080008000
F800

01 APPROVED - TH
ANK YOU 027

VERIFIED BY PIN

LOYALTY: NO

DATE & TIME OUT BN

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$76.19 + GST

TRANSACTION RECORD

ESSO

PENHOLD ESSO
HWY 2 A & HAWKRIIDGE BLVD
PENHOLD, AB T0N 1R0

ESSO EXPRESS PAY

2018-09-26 20:25:31

TRANS #: 038646

STATION#: 00324233

GST #: R768192726

PUMP 3

REGLR \$ 80.00

64.309L AT \$1.244/L

GST INCLUDED \$ 3.81

TOTAL : CAD\$ 80.00

TYPE: PURCHASE

USA

INVOICE NO: TMW62995

AUTH:

SCOTIABANK USA

A0000000031010

0080008000

F800

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ANK YOU 027

VERIFIED BY PIN

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$93.57 + GST

Central Alberta Coop
4303 50TH Street
Innisfail Alberta
T4G 1B6
(403) 227 6663
GST# R104438411

Member # 00000000

Pump	Litres	Price/L
10	78.035	\$1.259
Product		Amount
Regular		\$98.25

Total \$98.25

GST (Inc Pumps) \$4.68

Purchase
VISA

DATE: 09/28/2018
TIME: 21:36:51
REF: 0011390720
TERM: 35805000

C

RESP: 027 ISO:01

SCOTIABANK VISA
A0000000031010
TVR: 0080008000
TSI: F800
VERIFIED BY PIN

Approved - Thank you

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CUSTOMER COPY

Store # 214227
Receipt # 03088

Thank You !!!

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Devin DreeshenClaimant Name: Devin DreeshenExpense Category: Fuel and Minor Maintenance

For hosting, select one:

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

Purpose:

\$95.24 + GST

Central Alberta Coop
4303 50TH Street
Innisfail Alberta
T4G 1B6
(403) 227 6663
GST# R104438411

Member # 00000000

Pump	Litres	Price/L
11	79.430	\$1.259
Product		Amount
Regular		\$100.00

Total \$100.00

GST (Inc Pumps) \$4.76

Purchase
VISA

DATE: 09/12/2018
TIME: 08:57:04
REF: 0011280100
TERM: 35B03NDE

RESP: 027 ISO:01

SCOTIABANK VISA
A0000000031010
TVR: 0080008000
TSI: F800
VERIFIED BY PIN

Approved - Thank you

IMPORTANT:
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CUSTOMER COPY

Store # 214227
Receipt # 93604

Thank You !!!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$95.24+ GST

Husky



Want great rewards? Visit myHuskyRewards.ca

South Edmonton Husky Car Wash\ -b

3105 Calgary Trail S

Edmonton AB

(780) 434-9593

GST# 833329964RT0001

Retailer ID 4507810

Retailer ID 4507810

Rct:52127 2804-7

Batch:5242-109

2018/08/03 20:38:08

Pump# 7

Eth Regular \$100.00

76.982x\$1.299L

GST(Inc Pump) \$4.76

Pre Auth Completion

SCOTIABANK VISA

AID: A0000000031010

Date: 08/03/2018

Time: 20:38:08

280407EC

S403001001038 00 000

TUR: 0080008000 TSI: F800

Approved

WASH CODE 85521

Expires 90 days
This Location Only



PLEASE TELL US

HOW WE DID?

myHusky.ca/feedback

1.000 L @ \$10.990/L

1.000 L @ \$10.990/L

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$95.24 + GST

TRANSACTION RECORD

ESSO

7 ELEVEN STORE 37833
45 GASOLINE ALLEY EAST
RED DEER COUNTY, AB T4E 1B1

ESSO EXPRESS PAY

2018-08-10 14:31:58

TRANS #: 233189

STATION#: 00302524

GST #: R119335453

** FINAL RECEIPT **

PUMP 5

EREG \$100.00

75.245L AT \$1.329/L

GST INCLUDED \$ 4.76

TOTAL : CAD\$100.00

VISA \$100.00

TYPE: PURCHASE

VISA

INVOICE NO: TCK02605

SCOTIABANK VISA

00000000031010

0080008000

F800

01 APPROVED - TH

ATK YGU W/P

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Fuel and Minor Maintenance

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

\$71.43 + GST

Ghostpine General
36448 Hwy 816
Red Deer County, AB
T0M1R0

2018-08-13 16:01:44

STORE #: 50086
TRANS #: 104764

PUMP 1
Premium
52.30L AT \$1.434/L

ACCT:
VISA

\$ 75.00

GST INCLUDED \$ 3.57

TOTAL \$ 75.00

Type: PURCHASE

VISA

REFERENCE #:
66271789 0015570050 C

SCOTIABANK VISA
A0000000031010
0880008000
F800

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01/027 APPROVED
THANK YOU

-- IMPORTANT --
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- Customer's Copy -

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Member Parking

For hosting, select one:

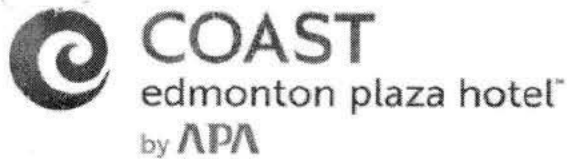
☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Parking at Coast Edmonton Plaza Hotel



10155 105th Street,
Edmonton, AB T5J 1E2
Tel: (780) 423 4811 Fax: (780) 423 3204

Mr Devin DREESHEN

Receipt

Invoice date 8/3/2018
Our reference CEP-FC676826 /
GST Number 10103 5467 RT0020

Guest	Mr Devin DREESHEN	Arrival	8/2/2018	Departure	8/3/2018	Room	1611
Date	Description	Quantity	Unit Price	Total ()			
8/2/2018	Parking Daily	1	20.95	20.95			
8/2/2018	Federal Tax GST Parking	1	1.05	1.05			
				Total invoice		22.00	
8/3/2018	<div></div>					-22.00	
Total Paid				-22.00			
Total Due				0.00			

Total GST 1.05

I agree that my liability for any charges incurred by me is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges. Interest will be charged on any overdue balance.

Signature X

For reservations: www.coasthotels.com or 1-800-663-1144



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: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

For the Month of: July

Year: 2018

Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13			<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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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"/>			
Grand Total						\$79.14	\$3.96	\$83.10

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

Nov 30, 2018
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: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

For the Month of: August

Year: 2018

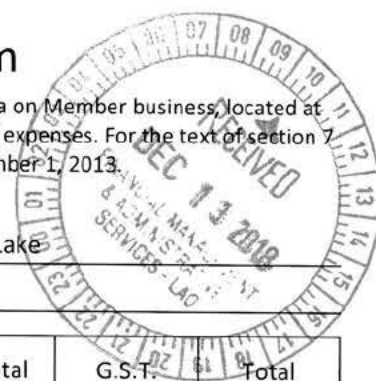
Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	60 km from Perm. Res.	Innisfail	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	60 km from Perm. Res.	Bowden	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
30	60 km from Perm. Res.	Sylvan Lake	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$70.43	\$3.52	\$73.95

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

Dec. 6, 2018
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: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

For the Month of: September


Year: 2018

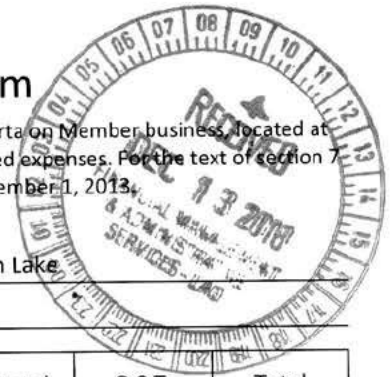
Employee #:

Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10	60 km from Perm. Res.	Sylvan Lake	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12	60 km from Perm. Res.	Innisfail/Sylvan Lake	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	60 km from Perm. Res.	Red Deer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30.81	1.54	32.35
27	60 km from Perm. Res.	Sylvan Lake/Red Deer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
28	60 km from Perm. Res.	Bowden/Delburne/Red Deer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
29			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
30			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
31			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Grand Total						\$147.24	\$7.36	\$154.60

I certify that I have met the requirements of section 7 of the *Members' Allowances Order, RMSC 1992, c. M-1*, as amended, have incurred meal expenses on the dates selected, and have not previously claimed or been paid for these expenses.


Member Signature


Date





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)

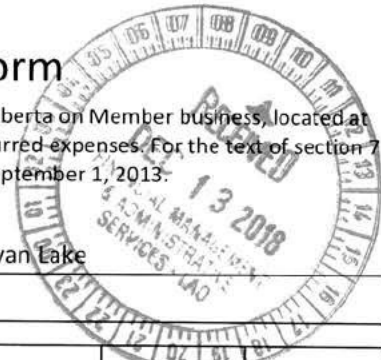
Member Name: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

For the Month of: October

Year: 2018

Employee #:



Day of Month	Reason for Travel	Meal Purchase Location(s)	Meal			Subtotal	G.S.T.	Total
			B	L	D			
1	60 km from Perm. Res.	Innisfail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11.05	0.55	11.60
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3	60 km from Perm. Res.	Sylvan Lake/Red Deer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
4	60 km from Perm. Res.	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
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	Travel to/from Capital	Edmonton	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19.76	0.99	20.75
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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
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	60 km from Perm. Res.	Sylvan Lake	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	19.81	0.99	20.80
20	60 km from Perm. Res.	Red Deer	<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	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
24			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25	60 km from Perm. Res.	Calgary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	28.52	1.43	29.95
26	60 km from Perm. Res.	Sylvan Lake	<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	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 type="checkbox"/>	19.81	0.99	20.80
31	Travel to/from Capital	Edmonton	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	39.57	1.98	41.55
Grand Total						\$336.43	\$16.82	\$353.25

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

Dec 11, 2018

Date



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

Member Name: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

Employee #:

Date: December 31, 2018

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month	Year	Monthly Claim Amount
December	2018	1,695.00
Grand Total		\$1,695.00

Please Note:

(1) The Member is responsible for retaining all records that support the payment identified above.

(2) The Member must advise the Clerk in writing of any changes to the Member's permanent or temporary residence at the time it occurs.

- ☒ 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 FMAS or attached them here.
- ☒ 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.

Member Signature

Updated June 2018



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

Member Name: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

Employee #:

Date: November 30, 2018

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month	Year	Monthly Claim Amount
November	2018	1,695.00
Grand Total		\$1,695.00

Please Note:

(1) The Member is responsible for retaining all records that support the payment identified above.

(2) The Member must advise the Clerk in writing of any changes to the Member's permanent or temporary residence at the time it occurs.

- ☒ 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 FMAS or attached them here.
- ☒ 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.

Member Signature

Updated June 2018



Members' Temporary Accommodation Allowance Claim Form - Claimed by Month

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

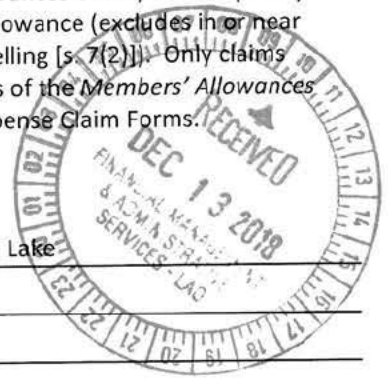
Member Name: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

Employee #:

Date: October 31, 2018

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month



Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month	Year	Monthly Claim Amount
October	2018	1,695.00
	Grand Total	\$1,695.00

Please Note:

(1) The Member is responsible for retaining all records that support the payment identified above.

(2) The Member must advise the Clerk in writing of any changes to the Member's permanent or temporary residence at the time it occurs.

- ☒ 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 FMAS or attached them here.
- ☒ 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.

Member Signature

Updated June 2018



Members' Temporary Accommodation Allowance Claim Form - Claimed by Month

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

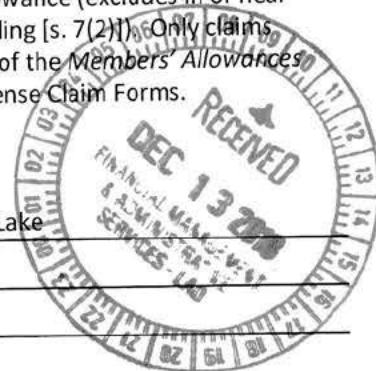
Member Name: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

Employee #:

Date: September 30 2018

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month



Temporary Residence Accommodation Allowance in Edmonton - Claimed by Month

Monthly maximum of \$1,930 per month. Total maximum of \$23,160 per fiscal year.

Month	Year	Monthly Claim Amount
September	2018	1,695.00
Grand Total		\$1,695.00

Please Note:

(1) The Member is responsible for retaining all records that support the payment identified above.

(2) The Member must advise the Clerk in writing of any changes to the Member's permanent or temporary residence at the time it occurs.

- ☒ 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 FMAS or attached them here.
- ☒ 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.

Member Signature

Updated June 2018

Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

Member Name: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

Employee #:

Date: August 31, 2018

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed by Day

Temporary Residence Accommodation Allowance in Edmonton - Claimed by Day

Daily maximum of \$193 per day. Total maximum of \$23,160 per fiscal year.

[illegible]

\$106.05 + GST

In order to ensure payment, please attach all supporting documentation (detailed accommodation receipts).

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.

Member Signature

Updated June 2018

Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim, under the *Members' Allowances Order*, the temporary residence allowance (in or near Edmonton [ss.5-6]), the temporary accommodation allowance (excludes in or near Edmonton, maximum 10 days per fiscal year [s. 7(1)]), and meal per diems (while travelling [s. 7(2)]). Only claims supported by the required documentation will be processed. For the relevant sections of the *Members' Allowances Order* see reverse. For information on form completion go to OurHouse – Forms – Expense Claim Forms.

Effective date: June 21, 2018

Member Name: Dreeshen, Devin

Constituency: Innisfail-Sylvan Lake

Employee #:

Date: September 30, 2018

Claim Type: Temporary Accommodation Allowance While Travelling in Alberta (Excludes In or Near Edmonton)

TEMPORARY ACCOMMODATION ALLOWANCE WHILE TRAVELLING IN ALBERTA (EXCLUDES IN OR NEAR EDMONTON)

Formerly "Extraordinary Temporary Residence"

Maximum 10 days per fiscal year

Check-In Date	Departure Date	Total Days	Location	Subtotal	G.S.T.	Total
9/12/2018	9/15/2018	3	Signature Lethbridge Lodge	252.48	12.14	264.62
				Grand Total		\$264.62

*In order to ensure payment, please attach all supporting documentation (**detailed receipts**).*

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.

D. Decker

Member Signature

Updated June 2018

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreesen

Claimant Name: Brenda Johnson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group:

Purpose:

Coffee supplies for office

Hosting = 25.48

save-on-foods #6682

Red Deer

Visit www.saveonfoods.com

G.S.T #R846980878

Maxwell House Decaf 10.49
Nabob Colombian Pods 19.99
Card \$14.99 Save -5.00

Sub Total

Card \$\$ pts- AB

Tax-Code Taxable-Value Tax-Value
GST

BALANCE DUE

Credit

Total Hosting
= \$25.48 + GST

-----TRANSACTION RECORD-----

TYPE: Purchase

ACCT: MASTERCARD

CARD NUMBER:

DATE/TIME: 11/13/2018 20:28:52

REFERENCE #: 0010017150 C

TERM: 66271704

AUTHOR.# :

AID: A0000000041010

TVR: 0000008000

TSI E800

MasterCard

01 APPROVED - THANK YOU 027

IMPORTANT:

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CHANGE

\$0.00

Your Savings Today!

More Rewards Card #

Opening Balance
Points Earned

More Rewards Total Points

How was your visit today?

Tell us at www.saveonfoods.com/survey
and enter to win a \$1000
Save On Foods gift card

100% MONEY BACK GUARANTEE
if returned within 14 days of
purchase with original receipt
(some restrictions apply)

CASHIER NAME: Self Checkout 65
C0065 #6154 20:25:25 13Nov2018
S06682 R065

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Brenda Johnson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting supplies for office

Hosting = \$28.96

Hosting = \$28.96 + GST

CANADIAN TIRE #329
2510-50TH AVENUE, RED DEER, AB.
403-342-2222 ALL EXCHANGES & REFUNDS
REQUIRE RECEIPTS WITH PHOT ID WITHIN 90
DAYS PRODUCTS MUST NEW, UNUSED, AND IN
THE ORIGINAL PACKAGING

REG #:6 09/17/2018 17:50:52 TRANS #:111
OPERATOR #: 68 Float: 001

153-2024-8 FRANK KCUP CLMB \$ 14.48
153-2047-4 FRANK KCUP DARK \$ 14.48

SUBTOTAL
5% GST

TOTAL
M/C TEND

MASTERCARD PURCHASE

CHIP CARD
2018/09/17 19:51:54
REF #: 66026430 0010010011 C

0000000041010
MasterCard
0000008000E800

01 APPROVED - THANK YOU 027
IMPORTANT

Retain this copy for your records

My CT 'Money' Account #:
*****3090
e-CT 'Money' Collected Today \$
e-CT 'Money': \$
Bonus e-CT 'Money': \$
e-CT 'Money' Balance: \$

Cardmembers get 4%* in CT Money at
Canadian Tire and 5 cents back per litre
in CT Money on regular gas at
participating Gas+ locations.
*Calculated pre-tax. Terms & Conditions
apply. Visit Triangle.com for details.

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Brenda Johnson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting supplies for office

save-on-foods #6682
Red Deer
Visit www.saveonfoods.com
G.S.T #R846980878

CARNATION COFFEEMATE	5.99
WHSTLR SPRING WATER	8.98
2 @ 4.49	
*DEPOSIT	0.50
2 @ 0.25	
*RECYCLE FEE	0.20
2 @ 0.10	

Sub Total \$15.67

BALANCE DUE \$15.67
Debit \$15.67

-----TRANSACTION RECORD-----

TYPE: Purchase INTERAC

ACCT: Savings

DATE/TIME: 09/19/2018 08:13:44
REFERENCE #: 0010017430 C
TERM: 66271704

TSI 6800
INTERAC

AID: A0000002771010
TVR: 8080008000

00 APPROVED - THANK YOU 001

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CHANGE \$0.00



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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

10/31/2018

ACCT MGR NO.

42905

INVOICE NO.

M904494

SHIP TO ACCOUNT NO. [REDACTED]

COST CENTRE [REDACTED]

ALTA LEGISLATIVE ASSEMBLY
INNISFAIL SYLVAN LAKE ✓
160 HEWLETT PARK LANDING
BAY 2
SYLVAN LAKE, AB T4S 2J3

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
------------	-------------	------------	-----	-------------	-------------	---------	----------	-----	--------	----

1	1	0	PK	07GT128	WERTHER'S CANDY 135GR	2.93	CONTRACT	2.93	2.93	
1	1	0	CS	12269285	NESTLE PURE LIFE WATER 500 ML	6.44	CONTRACT	6.44	6.44	
1	1	0	BX	40-33917	KCUP VH COLUMB MED 24BX	16.99	NET	16.99	16.99	



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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.
Q.S.T

R894032192
1001640701TQ0009

PERIOD ENDING
ACCT MGR NO. [REDACTED]

10/31/2018

QTY ORD	QTY SHIP	QTY B/O	U/M	PRODUCT NO.	DESCRIPTION	REGULAR	DISCOUNT	NET	AMOUNT	TX
REQ NO.	[REDACTED]	DATE	10/03/2018	ATTENTION	Innisfail Sylvan Lak	P.O.#	will provide later	G&T ORDER NO	[REDACTED]	
1	1	0	PK	08GT107	WRIG EXCEL VARIETY 4 PACK Approved By: Diana de Ocampo >Due to product integrity, Gra will not accept returns on foo For item 40-33917 >This extended delivery produc 3-5 days. For item 40-33917 Acknowledged by: Innisfail Syl * For balance of order see ref [REDACTED]	4.19	CONTRACT	4.19	4.19	
									REQ TOTAL	4.19
									HST TOTAL	0.00
									PST TOTAL	0.00
									SUB-TOTAL	4.19
									GST TOTAL	0.00
									TOTAL THIS ORDER	4.19

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Constituents - October 1, 2018

\$37.27 + GST

THE RANCH HOUSE
7159 50 AVE
RED DEER, AB T4N 4E4

Merchant ID: 000000005514275
Term ID: 00034870
Clerk ID: 13
25447900010

Purchase

SCOTIABANK VISA

AID: A0000000031010

Entry Method: Chip

Batch#: 000473

10/01/18

13:52:25

Ref#: 000023753291

Inv #: 008674 Appr Code: _____

Amount: \$ 33.81

Tip: \$ 5.07

Total: \$ 38.88

Merchant Copy
NO SIGNATURE REQUIRED

Ranch House
Restaurant & Bar

7159 50th Ave
Red Deer, Alberta, Canada

RECEIPT: 3084

0 ROOM: BAR

01:49 PM

DATE: 10/01/2018 TABLE: 49

WAITER: MICHELLE 1

CLIENT NAME:

QTY	DESCRIPTION	PRICE	AMOUNT
1	(L) Steak Sand	12.95	12.95
1	(L) Steak Sand	12.95	12.95
1	POP	3.45	3.45
1	SPEC TEA	2.85	2.85

SUBTOTAL: 32.20

GST: 1.61

TOTAL: 33.81

GST # 863212452

*** THANK YOU ***

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Constituents- October 3, 2018

\$34.96 + GST

CHECK # 759680 DATE 10/03/18
TABLE # 16 TIME 12:39PM

=====

SMOKEHOUSE : ANGELA --

ITEMS ORDERED	AMOUNT
1 BEEF BARLEY	8.25
1 PULLED PORK	15.95
1 Sub Caesar Salad.	2.50
1 PJP	7.75

SUBTOTAL 30.20
GST PLUS 1.51

TOTAL DUE 31.71

MOHAVE SMOKEHOUSE & BAR
MOHAVE SMOKEHOUSE & BAR
OPEN FOR BREAKFAST ON WEEKENDS
WE ARE NOW ON SKIP THE DISHES.CA
PICK-UP OR DELIVERY
TUESDAY'S ARE WING NIGHT'S

(403) 340-3463
E-MAIL MOHAVE@TELUS.NET
GST #85786890

MOHAVE GRILL
6608 ORR DR
RED DEER AB

CARD TYPE VISA
DATE 2018/10/03
TIME 1306 12:42:17
CLERK ID 26
RECEIPT NUMBER
C82013336-001-248-003-0

PURCHASE
AMOUNT \$31.71
TIP \$4.76
TOTAL

\$36.47

SCOTIABANK VISA
A0000000031010
B63266AEFC0A0244
0080008000-E800
CB9C9AB998D9B6A9
0080008000-F800

APPROVED

THANK YOU

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LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Brenda Johnson

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Hosting constituent

\$24.20 + GST

FOX & HOUND
INNISFAIL, AB
PHONE 227 2333
DATE 10/25/2018 THU
11.95 SPECIAL T1 \$11.95
CHICKEN FINGERS T1 \$10.95
TAX1 AMT \$1.15
TOTAL \$24.05
CASH \$24.05
NO. 118510 REG01 1 EMPLOYEE
GST # 129338950
THANK YOU
TIME 12:03

FOX AND HOUND
5039 49 ST
INNISFAIL, AB T4G 1M1
4032272333

ERM # 78037241
RECORD # 004027
HOST INVOICE # 0003704
HOST SEQ # 1003102

DEBIT/CHK
2018/10/25 12:05:07

PURCHASE
AMOUNT \$24.15
TIP \$1.20
TOTAL \$25.35

B: 1581
20181025120513

00 TRANSACTION
APPROVED 000
THANK YOU

INTERAC
AID: A0000002771010
TC: C0734BCE7BA1EF94
TVR: 8000008000
TSI: 6800

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LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen

Claimant Name: Devin Dreeshen

Expense Category: Hosting

For hosting, select one:

☒ Individual Constituent(s)

☐ Individual Stakeholder(s)

☐ Group: _____

Purpose:

Staff Meeting- Sept. 27, 2018

\$30.66 + GST

BOSTON PIZZA # 117
61 BEJU INDUSTRIAL T4S0B6
SYLVAN LAKE AB
20151407
BW2015140732

**** PURCHASE ****

09-27-2018 11:36:45

Name: MR DEVIN EH DREESHEN
A0000000031010 SCOTIABANK VISA

Check # 1
Operator: 191
Trace # 282
Inv. # 286

RRN 001235001

Purchase \$27.81
Tip \$4.17
Total \$31.98

(001) APPROVED-THANK YOU

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records
Customer copy



BOSTON PIZZA SYLVAN LAKE - STORE #117
GST #89464 8450 RT0001

0001 Table 13 #Party 2

TELEPHONE SvrCk: 1 11:08 09/27/18

WATER	0.00
WATER	0.00
N.S. POP	3.39
COFFEE	3.10
I-TROPIC CHKN	10.00
I-TROPIC CHKN	10.00

Sub Total: 26.49

GST : 1.32

09/27 11:38 TOTAL: 27.81

PLEASE PAY YOUR SERVER
THANK YOU

NOW SERVING SNAKE LAKE BREWERY
CRAFT BEERS!!!!

ASK YOUR SERVER FOR MORE DETAILS

TELL US HOW WE DID!

Visit: TellBostonPizza.com

Your Survey/Team HQ ACCESS CODE IS BELOW

This Code will expire in 28 days

11701-90000-71211

THANKS FOR DINING WITH US!

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Devin Dreeshen
Claimant Name: Devin Dreeshen
Expense Category: Hosting

For hosting, select one:

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

Purpose:

Constituents- October 9, 2018

\$59.90 + GST

HOME TOWN GRILL
4923 46 AVE
INNISFAIL AB T4G1P2
TEL: 403-865-8655

TERM # 78032146
RECORD # 002738
HOST INVOICE # 0002931
HOST SEQ # 1007138
CLERK ID 0000000002

CREDIT/VISA D
2018/10/09 14:18:41

PURCHASE
AMOUNT \$54.34
TIP \$8.15
TOTAL \$62.49

HTS#: 20181009141844
B:0459

TRANSACTION
APPROVED 000
THANK YOU

SCOTIABANK VISA
AID: A0000000031010
TC: 722A9A0A5B89B683
TVR: 0080008000
TSI: F800

CUSTOMER COPY

HOMETOWN GRILL
4923 46 AVE
INNISFAIL, AB T4G 1P2
PH.: 403-865-8655

TABLE:025 CLIENT:1

TERM:A INVOICE:0010781-1
10-09-18 13:41

Andrea Ray

Home:own Omelette	\$13.95F
Lunch Steak	\$9.95F
Lunch Steak	\$9.95F
Lunch Steak	\$9.95F
Coffee	\$2.65F
Coffee	\$2.65F
Coffee	\$2.65F

SUB-TOTAL \$51.75
GST 5 \$2.59

TOTAL \$54.34
TOT.ROUNDED \$54.35

Number of products: 7

GST #819366799RT0001

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Devin DreeshenClaimant Name: Devin DreeshenExpense Category: Hosting

For hosting, select one:

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

Purpose:

Constituents - Sept. 25, 2018

CHECK # 209545

DATE 9/25/18

TABLE # 15

TIME 12:02PM

-- DINING : Andrea --

ITEMS ORDERED	AMOUNT
1 BACON CRISP & EGGS	12.15
1 PHIL'S GRILL	13.95
1 MILK LARGE	3.25
1 COFFEE	3.10

SUBTOTAL	32.45
TAX	1.62

TOTAL DUE 34.07

PHIL'S

4312 49 Ave
(403) 347-1220

GST # 139374094RT001