

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2020-21 30th Leg
047 - Airdrie-Cochrane - MLA Peter Guthrie
For Expenses Processed Jan 1- Mar 31, 2021

	Budget	Reimbursed This Qtr	Reimbursed To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00		\$81.29
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$		\$573.69	\$3,640.04
Member Travel (Meal Per Diems) - \$			
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$7,720.00	\$23,160.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$711.84	\$1,325.93
Event Tickets Disclosable - \$			
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.0	22.0	2,049.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	80,000.0	22.0	2,049.0
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	5.0	25.0
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

MP11218 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP11218
Description	December 2020 - Per-Diems
Claimant	Pete Guthrie
Employee Number	
Constituency	Airdrie-Cochrane 47 (Pete Guthrie)
Date Submitted	January 4, 2021
Date Received	January 4, 2021
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
17340	Dec 6, 2020	Travel to/from Capital	Edmonton			X	19.76	0.99	20.75
17341	Dec 7, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
17342	Dec 8, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
17343	Dec 9, 2020	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
							138.47	6.93	145.40

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

MP11761 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP11761
Description	February 2021 - Per-Diems
Claimant	Pete Guthrie
Employee Number	
Constituency	Airdrie-Cochrane 47 (Pete Guthrie)
Date Submitted	February 26, 2021
Date Received	February 26, 2021
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
17911	Feb 2, 2021	Travel to/from Capital	Edmonton			X	19.76	0.99	20.75
17912	Feb 3, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
17913	Feb 4, 2021	Travel to/from Capital	Edmonton	X	X		19.81	0.99	20.80
							79.14	3.96	83.10

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

MP12486 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP12486
Description	March 2021 - Per-Diems
Claimant	Pete Guthrie
Employee Number	
Constituency	Airdrie-Cochrane 47 (Pete Guthrie)
Date Submitted	March 31, 2021
Date Received	March 31, 2021
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
18784	Mar 7, 2021	Travel to/from Capital	Edmonton			X	19.76	0.99	20.75
18785	Mar 8, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
18786	Mar 9, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
18787	Mar 10, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
18788	Mar 11, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
18789	Mar 14, 2021	Travel to/from Capital	Edmonton			X	19.76	0.99	20.75
18790	Mar 15, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
18791	Mar 16, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
18792	Mar 17, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
18793	Mar 18, 2021	Travel to/from Capital	Edmonton	X	X	X	39.57	1.98	41.55
							356.08	17.82	373.90

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

MR11216 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR11216
Description	Dec-2020-PG
Claimant	Pete Guthrie
Employee Number	[REDACTED]
Constituency	Airdrie-Cochrane 47 (Pete Guthrie)
Date Submitted	January 4, 2021
Date Received	January 4, 2021
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
December	2020	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

MR11452 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR11452
Description	Jan-2021-PG
Claimant	Pete Guthrie
Employee Number	[REDACTED]
Constituency	Airdrie-Cochrane 47 (Pete Guthrie)
Date Submitted	January 30, 2021
Date Received	February 1, 2021
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
January	2021	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

MR11759 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR11759
Description	Feb-2021-PG
Claimant	Pete Guthrie
Employee Number	[REDACTED]
Constituency	Airdrie-Cochrane 47 (Pete Guthrie)
Date Submitted	February 26, 2021
Date Received	February 26, 2021
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
February	2021	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

MR12463 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR12463
Description	March-202-PG
Claimant	Pete Guthrie
Employee Number	
Constituency	Airdrie-Cochrane 47 (Pete Guthrie)
Date Submitted	March 30, 2021
Date Received	March 30, 2021
Mailing Address	

Month	Year	Monthly Claim Amount
March	2021	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

SE11152 - Staff Other Expenses Claim Form

Receipt Description	Fence & Post Hosting
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other



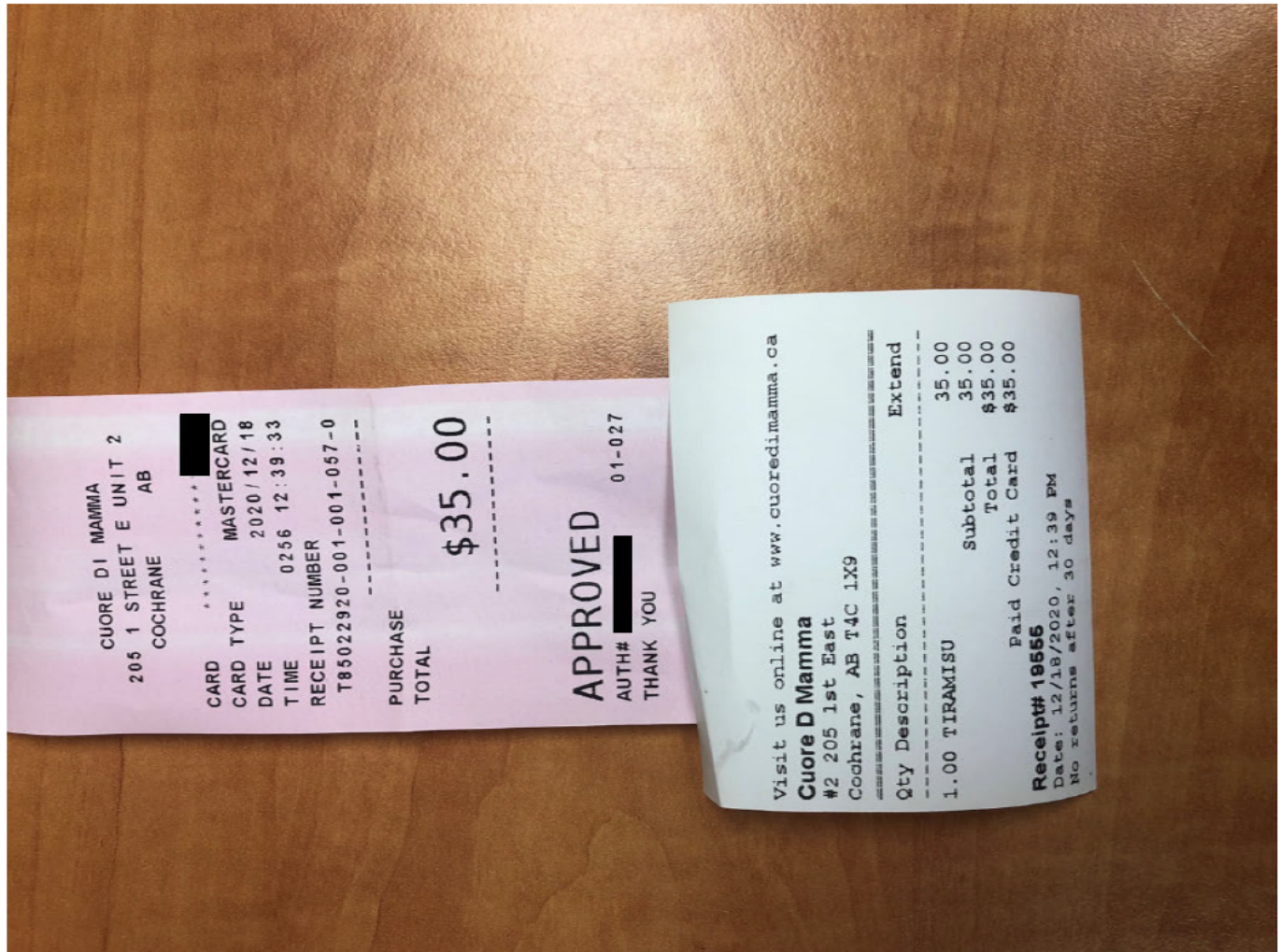
I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



Legislative Assembly of Alberta

SE11152 - Staff Other Expenses Claim Form

Receipt Description	Cuore D Mamma - Tiramisu Hosting
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other



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

SE11676 - Staff Other Expenses Claim Form

Receipt Description	No Frills - Office Supplies
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other

NOFRILLS
Mark's No Frills 3982 210- 5TH AVE
403-932-0402
Welcome #

21-GROCERY CAFF FREE COLA 08J 3.77
DEPOSIT 1 1.20
SUBTOTAL 4.97
GST 5% 3.77 @ 5.00% 0.19
TOTAL 5.16

TRANSACTION RECORD
GLOBAL PAYMENTS MERCHANT # 4293251
NOFRILLS
210 5th Ave SW
LOCAL # 08
STORE # 3982
SLIP # 566800
REG 4

RETAİN THIS COPY FOR YOUR RECORDS
** PURCHASE **
CARD # [REDACTED] AUTH # [REDACTED] ISO/ACI RESP
MASTERCARD 00 00 001
REF # 383001001008
DATE 01/05/2021 TIME 12:12:47 S AMOUNT 5.16 CAD
APPROVED

No Signature Required

CREDIT TN
PC Optima
Points Redeemed
Closing Balance
98398204386802100571247
You could have earned at least 50
PC Optima points with a
PC Financial Mastercard or PC Money Account.
Learn more at pcfinancial.ca

GST # 82017-3085 RT0001
VISIT US AT WWW.NOFRILLS.CA
Like us on Facebook:
www.facebook.com/nofrillsca
Follow us on Twitter: @nofrillsca
THANK YOU FOR SHOPPING (No Frills)
MANAGER NAME: MARK
USE YOUR PC CARD
TO COLLECT POINTS!!
REDEEM HERE FOR FREE GROCERIES
2021/01/05 H008 9804 04 3868 12:12

TELL US HOW WE DID TODAY: VISIT
WWW.STOREOPTIMON.CA OR CALL
1-800-531-2928. WIN 1 OF 2 MONTHLY
PRIZES OF 1 MILLION PC OPTIMA POINTS
OR \$1000 IN PC GIFT CARDS. SEE

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

SE11676 - Staff Other Expenses Claim Form

Receipt Description	Save-on-foods, Office supplies
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other

save-on-foods #6637
Cochrane
Visit www.saveonfoods.com
G.S.T. #R846980878

D/L CREAMERS 6.89
Perrier Slim Can 7.99 G
Card \$6.99 Save -1.00
*DEPOSIT 1.00
Sub Total \$14.88

Card \$\$ pts- AB [REDACTED]

Tax-Code	Taxable-Value	Tax-Value
GST	6.99	0.35

BALANCE DUE \$15.23
Credit [REDACTED]
[] XXXXXXXXXXXX

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

TYPE: Purchase
ACCT: MASTERCARD \$ 15.23

CARD NUMBER: *****[REDACTED]
DATE/TIME: 01/07/2021 13:12:27
REFERENCE #: 0010016940
TERM: 66261768
AUTHOR.# : [REDACTED]

01 APPROVED - THANK YOU 027
NO SIGNATURE TRANSACTION
IMPORTANT:
retain this copy for your records
CUSTOMER COPY

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

SE11676 - Staff Other Expenses Claim Form

Receipt Description	No Frills - Office Supplies
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other

NOFRILLS

TRANSACTION RECORD
GLOBAL PAYMENTS MERCHANT # 4293251
noFrills
210 5th Ave SW
Cochrane AB
STORE 03982
SLIP # 460301
REG 23
RETAIN THIS COPY FOR YOUR RECORDS
** Purchase
CARD #
EXP **/**
REF # AUTH # ISO/ACI RESP
000000000000
TIME AMOUNT
DATE 01/20/2021 14:26:16 \$ 12.05 CAD
NOT COMPLETED

Mark's No Frills 3982 210- 5TH AVE
403-932-0402
Welcome #

21-GROCERY
06038305651 PC SPRK WTR LIME GRJ 3.77
DEPOSIT 1 1.20
06827400014 NESTLE PURE WATR RJ 3.77
BEV, RECYCLING FEE RJ 0.72
DEPOSIT 1 2.40
SUBTOTAL 11-86
GST 5% 3.77 @ 5.000% 0.19
TOTAL 12.05

TRANSACTION RECORD
GLOBAL PAYMENTS MERCHANT # 4293251
noFrills
210 5th Ave SW
Cochrane AB
STORE 03982
SLIP # 460301
REG 23
RETAIN THIS COPY FOR YOUR RECORDS
** Purchase
CARD # *****
EXP **/**
REF # AUTH # ISO/ACI RESP
318001001017
DATE 01/20/2021 14:27:24 \$ 12.05 CAD
APPROVED

No Signature Required

CREDIT TN
PC Optimum
Points Redeemed
Closing Balance

99398273460320210120142725

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

SE11940 - Staff Other Expenses Claim Form

Receipt Description	Office supplies - hosting save-on-foods
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other

100% MONEY
if returned
purchase with
(some restr)

17
2,
0,
Full
and
Buy
re
exp

CASHIER NAME: Dina
C0104 #1780
S06637

save-on-foods #6637
Cocirane
Visit: www.saveonfoods.com
G.S.T #684698078

The Win-Win Event is back
You've won 1 prizes!
Go to WinWinEvent.ca OR
scan the code below to
log into your More Rewards
account and load your prizes.

Prizes available until March 31.

7-Up Diet 20.97 G
3 @ 6.99
*DEPOSIT 3.60
3 @ 1.20
MUG ROOTBEER 6.99 G
*DEPOSIT 1.20
Pepsi Cffn Fr Dt 12p 27.96 G
4 @ 6.99
*DEPOSIT 4.80
4 @ 1.20

Sub Total \$65.52

Card \$\$ pts- AB

Tax-Code Taxable-Value Tax-Value
GST 55.92 2.80

BALANCE DUE \$68.32
Credit [] XXXXXXXXXX \$66.32

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

TYPE: Purchase
ACCT: MASTERCARD \$ 68.32

CARD NUMBER: *****
DATE/TIME: 03/01/2021 13:12:31
REFERENCE #: 0010014090
TERM: 66261763
AUTHOR.# :

01 APPROVED - THANK YOU 027

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

SE11940 - Staff Other Expenses Claim Form

Receipt Description	Costco
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other

Store: 1076 Journal Report Detail Results 2021/02/22 15:57 Page: 1

Transaction Log: EAMTRANA

DATE	TIME	TERM	TRANS	OPER	GROSS+	GROSS-	NET	TRAN TYPE
02/22/21	15:55	3	239	605	1,221.96	0.00	1,221.96	Checkout

MEMBER [REDACTED]

MR 8390000109 NESTEA 8.69 Dept 14 I#36277

948400000000 DEPOSIT CL 2.40 Dept 11

SC

SC

***** TOTAL MasterCard

Tax Plan B

02/22/21 15:55 1076 3 239 605

Taxable Amount B [REDACTED]

\$11.09 + GST

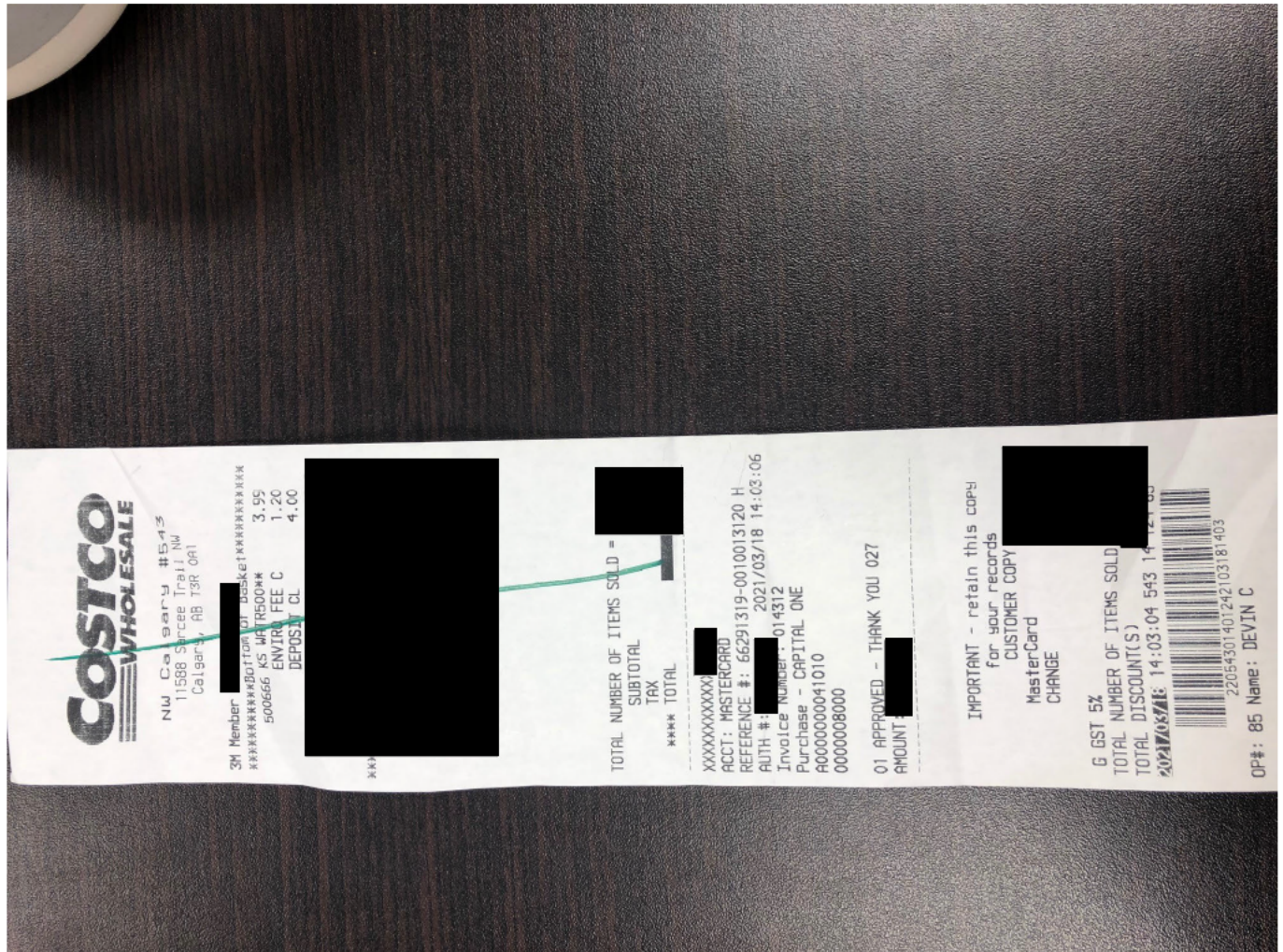
I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



Legislative Assembly of Alberta

SE12252 - Staff Other Expenses Claim Form

Receipt Description	Costco - Office Supplies
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other



\$9.19 + GST

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

SE12252 - Staff Other Expenses Claim Form

Receipt Description	save-on-foods - Hosting
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other

save-on-foods #6637
Cochrane
Visit www.saveonfoods.com
G.S.T #R846980878

Bags	0.05 G	
D/L CREAMERS	6.99	
Dairyland Creamo	2.19	
*EQUUBBY	0.03	
+DEPUSIT	0.10	
Hershey Kisses	4.99 G	
Card \$4.49 Save	-0.50	
00 BBQ Chips	0.80 G	
1 @ 5 FOR 4.00		
Card 3/\$2.25 Save	-0.05	
Card Pts Earned	67	
00 Original Chips	0.80 G	
1 @ 5 FOR 4.00		
Card 3/\$2.25 Save	-0.05	
Card Pts Earned	67	
00 Slt Vinegar Chips	0.80 G	
1 @ 5 FOR 4.00		
Card 3/\$2.25 Save	-0.05	
Card Pts Earned	67	
01d Dutch Chips	0.80 G	
1 @ 5 FOR 4.00		
Card 3/\$2.25 Save	-0.05	
Card Pts Earned	67	
01dDch Ss & Mit	0.80 G	
1 @ 5 FOR 4.00		
Card 3/\$2.25 Save	-0.05	
Card Pts Earned	66	
01dDch Ss & Mit	0.80 G	
1 @ 5 FOR 4.00		
Card 3/\$2.25 Save	-0.05	
Card Pts Earned	66	
Snickers Creamy SUP	4.59 G	
Card \$3.99 Save	-0.60	
Sub Total	\$22.34	
Card \$\$ pts- AB		
Tax-Code	Taxable-Value	Tax-Value
GST	13.03	0.65
BALANCE DUE \$22.99		
Credit		\$22.99
[J] XXXXXXXXXXXX		
-----TRANSACTION RECORD-----		
TYPE: Purchase		
ACCT: MASTERCARD	\$	22.99
CARD NUMBER: *****		
DATE/TIME: 03/24/2021 17:24:26		
REFERENCE #: 0010012360		
TERM: 66261770		

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

SE12416 - Staff Other Expenses Claim Form

Receipt Description	Dollarama - Hosting
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Other

DOLLARAMA
40 Quarry Street East Park Dr
Cochrane AB T4C 0K6
(403) 951-3805
GST 863624453

FERRERO ROCHER	062020000095	1.25	F
FERRERO ROCHER	062020000095	1.25	F
FERRERO ROCHER	062020000095	1.25	F
FERRERO ROCHER	062020000095	1.25	F
FERRERO ROCHER	062020000095	1.25	F
FERRERO ROCHER	062020000095	1.25	F
ALMOND	667886253695	1.50	F
SMOKED ALMOND	667886253692	1.50	F
WARS BARS BAR	058496328733	0.82	F
OH HENRY BAR	068000792820	0.82	F
HENRY BAR	068000792820	0.82	F
MACADAMIA NUTS	526394167205	2.00	F
CHOCOL. PRETZELS	810219031159	1.25	F
SUBTOTAL		\$16.21	
GST 5%		\$0.66	
TOTAL		\$16.87	
MASTER CARD		\$16.87	

TYPE: PURCHASE
ACCT: MASTERCARD
AMOUNT: \$ 16.87

CARD NUMBER: [REDACTED]
DATE/TIME: 21/03/25 15:16:39
REFERENCE #: 42-05554 0010013540 I
AUTHOR. #: [REDACTED]
01/027 APPROVED - THANK YOU

NO SIGNATURE TRANSACTION
-- IMPORTANT --
Retain This Copy For Your Records
*** CUSTOMER COPY ***

PRICES MAY INCLUDE ECO FEES
(WHEN APPLICABLE)
NO EXCHANGE
NO RETURN
THANK YOU FOR SHOPPING AT DOLLARAMA

2021-03-25 15:16:39
000946 03 323715
6447
WWW.DOLLARAMA.COM

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

SE12416 - Staff Other Expenses Claim Form

Receipt Description	Fence & Post Hosting MLA's
Member Name	Pete Guthrie
Claimant	Carole Vallet
Expense Category	Hosting - Group (Meeting with 6 MLA's Alberta to Alaska) Hosting Purpose - Meeting with 6 MLA's Alberta to Alaska

FENCE & POST
A PRERIE KITCHEN

Fence & Post
214 - 1st Street West
Cochrane, Alberta
Canada, T4C 1A4
Tel: 403-981-7678
Printed March 27, 2021 at 10:36 AM

Order #: 31523
Manager: Chey

March 27, 2021 at 10:36 AM
Takeout: Carol
Party Name: Carol
GST 5% #: 729602128RT0001
Note:

CUSTOMER
Tel:

6 x Wedge Salad + \$4.00: three spears	\$96.00
3 x Chicken 65	\$45.00
Chicken 65	\$15.00
2 x Spudnuts 6 Pack	\$42.00
Food Total	\$198.00
Merchandise Sales Total	\$42.00
Sub Total	\$240.00
GST 5%	\$9.90
Total	\$249.90

Please join us for Brunch on weekends from 10 until 2:00 pm!

Tip Guide:
15%=\$37.49 18%=\$45.00 20%=\$49.98
This guide is based on the pre-discounted bill amount.

FENCE & POST
214 1ST ST W
COCHRANE AB

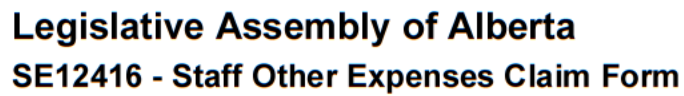
MASTER CARD
CARD TYPE
DATE 2021/03/27
TIME 11:48:40
SERV ID 2141
CHECK # 31523
TABLE # Carol
RECEIPT NUMBER
T82035442-001-001-081-0

PURCHASE TOTAL
\$207.90

APPROVED
AUTH# 01-027
THANK YOU

NO SIGNATURE REQUIRED
CARDHOLDER COPY
IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

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.

[illegible]

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