

	Budget	Reimbursed This Quarter	Reimbursed to Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900		\$29
Other Travel - Parking - \$			\$48
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$	\$712.34		\$1371.41
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$26400	\$5850	\$15550
Travel Accommodations Allowance		\$359.82	\$1127.34
Travel Accommodations Allowance (days; 10 max) - NF	10.00	2.0	6.0
Other			
Hosting - \$			\$1669.62
Event Tickets Disclosable - \$	\$150		\$650
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.00	7,488.0	17,497.0
Constituency Travel Staff (KM) - NF			30.0
Total Constituency Travel (KM) - NF	35,000.0	7,488.0	17,527.0
Adverse Driving Conditions		-	
Special Trips (5 trips per year) - NF	5.00		
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	52.00	7.0	11.0
Other Travel			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.00		

\$ - 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

MP57147 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP57147
Description	October 2025 - Per-Diems
Claimant	Nathan Neudorf
Employee Number	[REDACTED]
Constituency	Lethbridge-East 71 (Nathan Neudorf)
Date Submitted	November 26, 2025
Date Received	November 27, 2025
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
19444	Oct 23, 2025	60 km from Perm. Res.	Edmonton		X	X	43.81	2.19	46.00
19445	Oct 27, 2025	60 km from Perm. Res.	Edmonton		X	X	43.81	2.19	46.00
19446	Oct 28, 2025	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
19447	Oct 29, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
19448	Oct 30, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
							202.85	10.15	213.00

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
MP57148 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP57148
Description	November 2025 - Per-Diems
Claimant	Nathan Neudorf
Employee Number	[REDACTED]
Constituency	Lethbridge-East 71 (Nathan Neudorf)
Date Submitted	December 1, 2025
Date Received	December 2, 2025
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
19671	Nov 3, 2025	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
19672	Nov 4, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
19673	Nov 5, 2025	60 km from Perm. Res.	Edmonton		X		17.14	0.86	18.00
19674	Nov 6, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
19675	Nov 17, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
19676	Nov 18, 2025	60 km from Perm. Res.	Edmonton		X		17.14	0.86	18.00
19677	Nov 19, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
19678	Nov 20, 2025	60 km from Perm. Res.	Edmonton			X	26.67	1.33	28.00
19679	Nov 24, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
19680	Nov 25, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
19681	Nov 26, 2025	60 km from Perm. Res.	Edmonton		X		17.14	0.86	18.00
19682	Nov 27, 2025	60 km from Perm. Res.	Edmonton	X		X	39.05	1.95	41.00
							350.45	17.55	368.00

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

MP57431 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP57431
Description	December 2025 - Per-Diems
Claimant	Nathan Neudorf
Employee Number	[REDACTED]
Constituency	Lethbridge-East 71 (Nathan Neudorf)
Date Submitted	December 9, 2025
Date Received	December 9, 2025
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
20222	Dec 1, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
20223	Dec 2, 2025	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
20224	Dec 3, 2025	60 km from Perm. Res.	Edmonton		X	X	43.81	2.19	46.00
20225	Dec 4, 2025	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
							159.04	7.96	167.00

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

MR56450 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR56450
Description	September 2025
Claimant	Nathan Neudorf
Employee Number	[REDACTED]
Constituency	Lethbridge-East 71 (Nathan Neudorf)
Date Submitted	October 6, 2025
Date Received	October 6, 2025
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
September	2025	1950.00
	Grand Total	1950.00

Office Use Only

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

MR56956 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR56956
Description	October 2025
Claimant	Nathan Neudorf
Employee Number	[REDACTED]
Constituency	Lethbridge-East 71 (Nathan Neudorf)
Date Submitted	November 10, 2025
Date Received	November 10, 2025
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
October	2025	1950.00
	Grand Total	1950.00

Office Use Only

[REDACTED]

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

MR57233 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR57233
Description	Nov 2025
Claimant	Nathan Neudorf
Employee Number	[REDACTED]
Constituency	Lethbridge-East 71 (Nathan Neudorf)
Date Submitted	December 1, 2025
Date Received	December 2, 2025
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
November	2025	1950.00
	Grand Total	1950.00

Office Use Only

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

VF35143 - Vendor Payment Submission Form

Travel Accommodation Allowance: \$359.82 + GST

Member Name	Nathan Neudorf
Claimant	Nathan Neudorf
Expense Category	Office supplies

Lacombe Inn & Suites
4751 63 Street
Lacombe, AB T4L 1K7

Fax: (403)786-2270
Email: frontdesk@bestwesternlacombe.com

Phone: (403)782-3535

Web:



Guest Charges

Best Western Rewards # : [REDACTED]

Folio #: [REDACTED]
Room #: [REDACTED]
Payment Method : Credit Card
Rate : 9/22/2025

Guest : Neudorf, Jonathan
BWR Tier : BASE
Billing Reference :
Company : [REDACTED]

Conf #: [REDACTED]
CRS #: [REDACTED]
Arrival: 9/22/2025
Departure: 9/24/2025

Date	Department	Reference	Voucher	Room	Charge	Credit	Balance
9/22/2025	ROOM	Auto Posted Rate: RACK		405	\$172.99		\$172.99
9/22/2025	GSTR	Auto Posted Rate: RACK		405	\$8.65		\$181.64
9/22/2025	TRL	Auto Posted Rate: RACK		405	\$6.92		\$188.56
9/23/2025	ROOM	Auto Posted Rate: RACK		405	\$172.99		\$361.55
9/23/2025	GSTR	Auto Posted Rate: RACK		405	\$8.65		\$370.20
9/23/2025	TRL	Auto Posted Rate: RACK		405	\$6.92		\$377.12
9/24/2025	MC	MC [REDACTED]		405		\$377.12	\$0.00
					Balance		\$0.00

Credit Card Payment

Payment Type: Credit Card
Account: [REDACTED]
Account Holder: Jonathan, Neudorf
Amount Paid: \$0.00
Approval Code: [REDACTED]
Approval Amount: (\$377.12) ✓

I agree that my liability for all charges is not waived. GST# 702976754

Thank you for staying with us, we appreciate your business and hope to see you again soon.

Guest Signature

Each BWH® Hotels property is independently owned and operated.

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.



Legislative Assembly of Alberta

VF35143 - Vendor Payment Submission Form

Event Tickets Disclosable: \$150.00

Member Name	Nathan Neudorf
Claimant	Nathan Neudorf
Expense Category	Office supplies



Step 1: Select Registration Options

Registration Options  Contact Information  Confirmation  Payment 

Your Receipt

Your payment was approved.

 [Please print this page for your records.](#)

Transaction Date	2025-09-03
Payment Amount	\$150.00
Card Holder Name	Sariah Seaborn
Card Type	
Card Account Number	[REDACTED]
Expiration Date	05/27
Address	[REDACTED]
City	Lethbridge
Province	AB
Postal Code	[REDACTED]
Email	[REDACTED]
Authorization Code	[REDACTED]
Order Number	472
Customer Number	499

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.