

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2020-21 30th Leg  
002 - Calgary-Beddington - MLA Josephine Pon  
For Expenses Processed Apr 1 - Jun 30, 2020

	Budget	Used this Quarter	Used To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$			
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$5,790.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
<b>Other</b>			
Hosting - \$		\$7.67	\$7.67
Event Tickets Disclosable - \$			
<b>Non-Financial Reporting</b>			
<b>Use of Private Automobile (50.5 cents per km)</b>			
Constituency Travel MLA (KM) - NF	35,000.0		
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0		
Special Trips (5 trips per year) - NF	5.0		
<b>Travel To and From the Capital</b>			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52.0		
<b>Other Travel</b>			
Vehicle Rental (5 Days maximum anywhere in Alberta) - NF	5.0		

\$ - Reported on CAD dollar amount of actual expense

NF - Reported based on number of trips, number of kilometres, or number of days

Budget reported is the maximum annual amount that may be claimed

GST is not included in the \$ amounts as the Legislative Assembly is GST/HST - exempt



# Legislative Assembly of Alberta

## MR07986 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR07986
Description	Edmonton Accommodation for April 2020
Claimant	Josephine Pon
Employee Number	
Constituency	Calgary-Beddington 02 (Josephine Pon)
Date Submitted	April 11, 2020
Date Received	April 12, 2020
Mailing Address	

Month	Year	Monthly Claim Amount
April	2020	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

## MR08308 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR08308
Description	Edmonton Accommodation for May 2020
Claimant	Josephine Pon
Employee Number	
Constituency	Calgary-Beddington 02 (Josephine Pon)
Date Submitted	May 17, 2020
Date Received	May 19, 2020
Mailing Address	

Month	Year	Monthly Claim Amount
May	2020	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

## MR08691 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR08691
Description	Edmonton Accommodation for June 2020
Claimant	Josephine Pon
Employee Number	
Constituency	Calgary-Beddington 02 (Josephine Pon)
Date Submitted	June 20, 2020
Date Received	June 22, 2020
Mailing Address	

Month	Year	Monthly Claim Amount
June	2020	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

## SE08305 - Staff Other Expenses Claim Form

Receipt Description	milk [REDACTED] for office
Member Name	Josephine Pon
Claimant	Miguel Racin
Expense Category	Other <span style="float: right;">Hosting = \$4.35</span>

**CO-OP**

Calgary Co-op  
Beddington #10  
8220 Center Street NE T3K 1J7  
GST : 100730894  
403-299-4445

DATRYLAND MILK 2% \$3.99  
PLUS .11 CRF/EA \$0.11  
PLUS .25 DEF/EA \$0.25

[REDACTED]

**BALANCE DUE** [REDACTED]

PE: Purchase INTERAC  
CT: FLASH DEFAULT \$ [REDACTED]

RD NUMBER: [REDACTED]  
E/TIME: 03/11/2020 19:15:58  
REFERENCE #: 0010015480 H  
TERM: 66216770  
AUTHOR #: [REDACTED]  
AID: A0000002771010  
INTERAC  
TVR: 8000008000  
TSI: 0000

00 APPROVED - THANK YOU 1

I agree to pay the above total amount  
according to the card issuer agreement  
(merchant agreement if credit voucher)

**CUSTOMER COPY**  
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INTERAC  
Auth Code = [REDACTED]  
CHANGE \$0.00

TAX CODE TAXABLE-VAL TAX-VALUE  
[REDACTED] [REDACTED] [REDACTED]

Member Number: [REDACTED]

CHIER NAME: SCO 34  
#3552 19:15:59 11MAR2020  
S00010 R034  
Your opinion matters!!  
Share your feedback at  
[www.calgarycoop.com/feedback](http://www.calgarycoop.com/feedback)

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**  
**SE08304 - Staff Other Expenses Claim Form**

Receipt Description	cream
Member Name	Josephine Pon
Claimant	Miguel Racin
Expense Category	Other

Hosting = \$3.32

**CO-OP**

Calgary Co-op  
Beddington #10  
8220 Center Street NE T3K 1J7  
GST : 100730894  
403-299-4445

INT/DELIGHT HAZELN \$3.19  
PLUS .03 CRF/EA \$0.03  
PLUS .10 DEP/EA \$0.10

**BALANCE DUE**

TYPE: Purchase INTERAC  
ACCT: FLASH DEFAULT \$

CARD NUMBER:   
DATE/TIME: 04/03/2020 16:31:44  
REFERENCE #: 0010017810 H  
TERM: 66216767  
AUTHOR.# :   
AID: A0000002771010  
INTERAC  
TVR: 8000009000  
TSI: 0000

00 APPROVED - THANK YOU 1

I agree to pay the above total amount  
according to the card issuer agreement  
(merchant agreement if credit voucher)

CUSTOMER COPY  
\*\*\*\*\*

INTERAC  
Auth Code =   
CHANGE \$0.00

TAX CODE TAXABLE VAL TAX-VALUE  
GST

Member Number

CASHIER NAME: SCO 31  
C0301 #6261 16:31:47 3APR2020  
500010 R031  
Your opinion matters!!  
Share your feedback at  
[www.calgarycoop.com/feedback](http://www.calgarycoop.com/feedback)

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.