

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2024-25
074 - Maskwacis-Wetaskiwin - MLA Rick Wilson
For Expenses Processed Jan 1 - Mar 31, 2025

	Budget	Reimbursed This Qtr	Reimbursed To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$22.14	\$22.14
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$704.81	\$2,176.32
Accommodation			
Edmonton Accommodation Allowance (\$26,400.00/yr max)	\$23,160.00	\$6,269.84	\$23,639.84
Travel Accommodations Allowance		\$277.68	\$277.68
Travel Accommodations Allowance (days; 10 max) - NF	10.0	2.0	2.0
Other			
Hosting - \$		\$58.73	\$391.18
Event Tickets Disclosable - \$			
Non-Financial Reporting			

Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.0		
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	80,000.0		
Adverse Driving Conditions			
Special Trips (5 trips per year) - NF	5.0		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52.0		
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
The reader should take this into account when reviewing the disclosure



Legislative Assembly of Alberta
ME52020 - Members' Other Expenses Claim Form

Taxi, Bus Travel: 11.17 + GST

Receipt Description	
Member Name	Rick Wilson
Claimant	Rick Wilson
Expense Category	Taxi, Bus Travel

Maskwacis-Wetaskiwin

From: Rick Wilson
Sent: Monday, March 24, 2025 2:58 PM
To: Elizabeth Delos Trinos
Subject: FW: Your Tuesday evening trip with Uber

Classification: Protected A

From: noreply=uber.com@mgt.uber.com <noreply=uber.com@mgt.uber.com> **On Behalf Of** Uber Receipts
Sent: Tuesday, March 18, 2025 5:47 PM
To: Rick Wilson
Subject: Your Tuesday evening trip with Uber

CAUTION: This email has been sent from an external source. Treat hyperlinks and attachments in this email with care.

Uber

Total **\$11.73**
March 18, 2025

The picture can't be displayed.

Total

\$11.73

Trip fare

\$9.09

1

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



Legislative Assembly of Alberta

ME52020 - Members' Other Expenses Claim Form

Receipt Description	
Member Name	Rick Wilson
Claimant	Rick Wilson
Expense Category	Taxi, Bus Travel

Subtotal	\$9.09
Booking Fee ?	\$1.78
Per-Trip Fee	\$0.30
GST	\$0.56

Payments



Mastercard 
3/18/25 5:46 p.m.

\$11.73


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

[Switch Payment Method](#)

[Download PDF](#)

You rode with Surinder

4.89 ★ Rating

 Has passed a multi-step safety screen

[Rate or tip](#)



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



Legislative Assembly of Alberta
ME52020 - Members' Other Expenses Claim Form

Taxi, Bus Travel: 10.97 + GST

Receipt Description	
Member Name	Rick Wilson
Claimant	Rick Wilson
Expense Category	Taxi, Bus Travel

Maskwacis-Wetaskiwin

From: Rick Wilson
Sent: Monday, March 24, 2025 2:54 PM
To: Elizabeth Delos Trinos
Subject: FW: Your Tuesday evening trip with Uber

Classification: Protected A

From: Uber Receipts <noreply@uber.com>
Sent: Tuesday, March 18, 2025 6:46 PM
To: Rick Wilson
Subject: Your Tuesday evening trip with Uber

CAUTION: This email has been sent from an external source. Treat hyperlinks and attachments in this email with care.

Uber

Total **\$11.52**
March 18, 2025

The picture can't be displayed.

Total

\$11.52

Trip fare

\$8.88

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



Legislative Assembly of Alberta

ME52020 - Members' Other Expenses Claim Form

Receipt Description	
Member Name	Rick Wilson
Claimant	Rick Wilson
Expense Category	Taxi, Bus Travel

Subtotal	\$8.88
Booking Fee ?	\$1.79
Per-Trip Fee	\$0.30
GST	\$0.55

Payments



Mastercard 
3/18/25 6:46 p.m.

\$11.52


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

[Switch Payment Method](#)

[Download PDF](#)

You rode with JAMA

4.95 ★ Rating

 Has passed a multi-step safety screen

[Rate or tip](#)



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



Legislative Assembly of Alberta

MP51500 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP51500
Description	February 2025 - Per-Diems
Claimant	Rick Wilson
Employee Number	
Constituency	Maskwacis-Wetaskiwin 74 (Rick Wilson)
Date Submitted	March 4, 2025
Date Received	March 4, 2025
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
13282	Feb 24, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13283	Feb 25, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13284	Feb 26, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13285	Feb 27, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
							217.16	10.84	228.00

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

MP52021 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP52021
Description	March 2025 - Per-Diems
Claimant	Rick Wilson
Employee Number	
Constituency	Maskwacis-Wetaskiwin 74 (Rick Wilson)
Date Submitted	March 27, 2025
Date Received	March 27, 2025
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
13992	Mar 10, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13993	Mar 11, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13994	Mar 12, 2025	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
13995	Mar 13, 2025	60 km from Perm. Res.	Edmonton		X		16.19	0.81	17.00
13996	Mar 17, 2025	60 km from Perm. Res.	Edmonton	X		X	38.10	1.90	40.00
13997	Mar 18, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13998	Mar 19, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
13999	Mar 20, 2025	60 km from Perm. Res.	Edmonton	X			12.38	0.62	13.00
14000	Mar 24, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
14001	Mar 25, 2025	60 km from Perm. Res.	Edmonton	X	X		28.57	1.43	30.00
14002	Mar 26, 2025	60 km from Perm. Res.	Edmonton	X	X	X	54.29	2.71	57.00
14003	Mar 27, 2025	60 km from Perm. Res.	Edmonton	X		X	38.10	1.90	40.00
							487.65	24.35	512.00

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

MR50481 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR50481
Description	Wilson January 2025 Rent/Utilities
Claimant	Rick Wilson
Employee Number	
Constituency	Maskwacis-Wetaskiwin 74 (Rick Wilson)
Date Submitted	January 1, 2025
Date Received	January 2, 2025
Mailing Address	

Month	Year	Monthly Claim Amount
January	2025	2083.91
	Grand Total	2083.91

Office Use Only

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

MR50900 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR50900
Description	Feb 2025 [REDACTED]
Claimant	Rick Wilson
Employee Number	[REDACTED]
Constituency	Maskwacis-Wetaskiwin 74 (Rick Wilson)
Date Submitted	January 31, 2025
Date Received	February 3, 2025
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
February	2025	2089.29
	Grand Total	2089.29

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

MR51499 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR51499
Description	Rent/Utilities Wilson Mar 2025
Claimant	Rick Wilson
Employee Number	
Constituency	Maskwacis-Wetaskiwin 74 (Rick Wilson)
Date Submitted	March 4, 2025
Date Received	March 4, 2025
Mailing Address	

Month	Year	Monthly Claim Amount
March	2025	2096.64
	Grand Total	2096.64

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

VF32156 - Vendor Payment Submission Form

Travel Accommodation Allowance: \$277.68 + GST

Member Name	Rick Wilson
Claimant	Rick Wilson
Expense Category	Other



INFORMATION INVOICE

Sandman Signature Lethbridge Lodge

Rick Wilson

Print Date 11/1/24
Page No. 1 of 2
Room No. 310
Arrival 10/20/24
Departure 10/22/24
Conf. No. [REDACTED]
Folio No. [REDACTED]
GST No. 121767065 RT 0001

Group Code: UCP2024

Date	Description	Charges CAD	Credits CAD
10/20/24	Room Charge	129.00	
10/20/24	Room - DMF	2.58	
10/20/24	Room - GST	6.58	
10/20/24	Tourism Levy	5.26	
10/20/24	ECO Fees	2.00	
10/20/24	GST - ECO Fees	0.10	
10/21/24	Room Charge	129.00	
10/21/24	Room - DMF	2.58	
10/21/24	Room - GST	6.58	
10/21/24	Tourism Levy	5.26	
10/21/24	ECO Fees	2.00	
10/21/24	GST - ECO Fees	0.10	
10/22/24	MasterCard		291.04
Total		291.04	291.04
Balance		0.00	CAD
Net Amount		258.00	CAD
Room - GST		13.36	CAD
Tourism Levy		10.52	CAD
Room - DMF		5.16	CAD
ECO Fees		4.00	CAD
Total incl. vat		291.04	CAD

I agree to be personally liable should the indicated company or person fail to pay for any part of the total charges.

Guest Signature

Sandman Signature Lethbridge Lodge | 320 Scenic Drive S. | Lethbridge, AB, T1J 4B4
Reservations: 1-800-SANDMAN | Telephone: 403-328-1123 | Fax: 403-328-0002 | Email: reception_lethlodge@sandman.ca | www.sandmanhotels.com

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

SE50827 - Staff Other Expenses Claim Form

Hosting: \$37.49

Receipt Description	No Frills	Coffee Pods
Member Name	Rick Wilson	
Claimant	Pat Godkin	
Expense Category	Hosting - Individual Constituent(s)	



Jordan's NF Uetaskiwin
Store Number 03603
Welcome #

21-GROCERY

06038321249 PC GREAT CND MAR 37.49
SUB TOTAL 37.49
TOTAL 37.49

Trans. type: PURCHASE
Account: VISA CAD\$ 37.49
Card Type: CREDIT
Card Number:
Date time: 25/01/20 15:37:53
Ref. #: 230013
Auth #:
VISA CREDIT
A0000000031010 0000000000
00 APPROVED - THANK YOU
Retain this copy for statement
validation
*** CUSTOMER COPY ***

GST # 85462-3311 R1000

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THANK YOU FOR SHOPPING
780 - 352-8402
2025/01/20 Bikram 204 04 8655 15:38
Tell us how we did today! Visit
storeopinion.ca or call 1-800-531-2928
Win a \$1,000 PC gift card or
1,000,000 PC Optimum points
Full contest rules on survey website
CODE: 012025 153804 8655 03603



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with Digital Coupons!

It couldn't be easier! Just scan the QR
code to clip your Digital Coupons.



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

SE51484 - Staff Other Expenses Claim Form

Hosting: \$8.46

Receipt Description	Shoppers Drug Mart-WATER
Member Name	Rick Wilson
Claimant	Rose Briand
Expense Category	Hosting - Individual Constituent(s)

SHOPPERS DRUG MART

ADAM JEE PROFESSIONAL SERVICES LTD.
4703 50TH ST., WETASKIWIN, AB, T9A 1J6
780-352-9225
Feb 21, 2025 10:44 AM
0324 1031 22526 400031 3

SCO CheckOut
2 X PC SPRING WATE 2.79 N 5.58
2 X RECYCLING FEE 0.24 N X 0.48
2 X PET DEP 1.20 N X 2.40
SUBTOTAL: 8.46
TOTAL: \$8.46
6 Items
VISA 8.46

WITH YOUR PC OPTIMUM CARD
YOU COULD HAVE EARNED THESE POINTS:75

GST #: 81894 7368 RT0002
9990203241031000225267

How was your experience today?
Complete the customer survey at:
www.surveysdm.com
Or call 1-800-701-9163

WIN!
A chance of 1 of 2 Monthly
prizes of 1 Million PC Optimum™
points OR \$1,000 in Gift Cards!

Contest rules apply. See survey website for
full details.
Certificate Number: 00338036-2564712

TYPE: PURCHASE CAD\$ 8.46
ACCT: VISA
Card Type: CREDIT
CARD NUMBER: [REDACTED]
DATE/TIME: 25/02/21 10:44:24
REFERENCE #: 100517
AUTHOR #: [REDACTED]
VISA CREDIT
A0000000031010 0000000000
00 APPROVED - THANK YOU
-- 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.

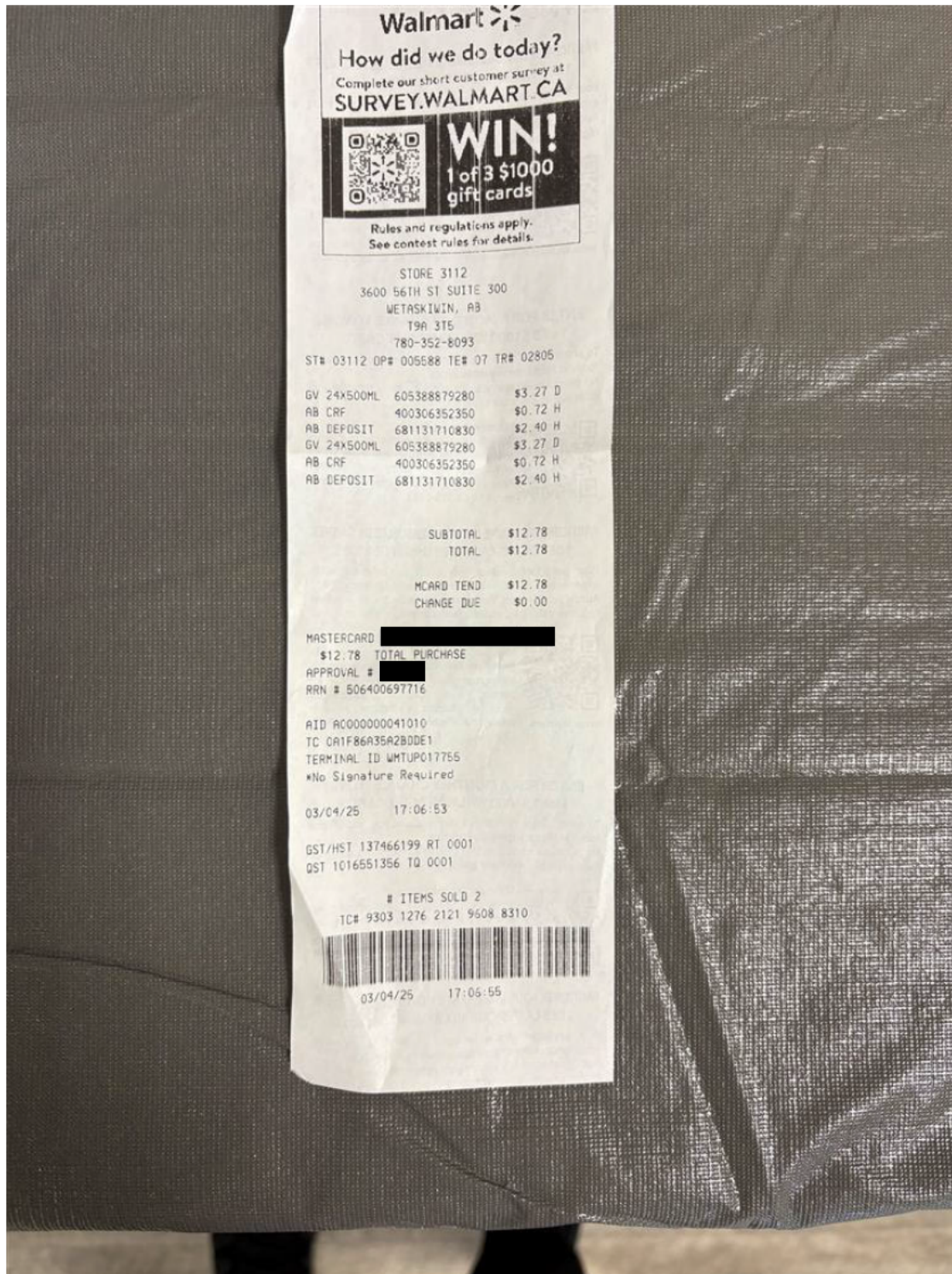


Legislative Assembly of Alberta

SE51545 - Staff Other Expenses Claim Form

Hosting: \$12.78

Receipt Description	Walmart - Bottled Water
Member Name	Rick Wilson
Claimant	Rose Briand
Expense Category	Hosting - Individual Constituent(s)



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.