

LEGISLATIVE ASSEMBLY OF ALBERTA  
Member EDR 2024-25  
002 - Calgary-Beddington - MLA Amanda Chapman  
For Expenses Processed Jan 1 - Mar 31, 2025

	Budget	Reimbursed This Qtr	Reimbursed To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00	\$27.67	\$78.99
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			\$91.05
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$951.45	\$2,512.43
Accommodation			
Edmonton Accommodation Allowance (\$26,400.00/yr max)	\$23,160.00	\$4,500.00	\$19,290.00
Travel Accommodations Allowance		\$137.26	\$137.26
Travel Accommodations Allowance (days; 10 max) - NF	10.0	1.0	1.0
Other			
Hosting - \$		\$1,017.29	\$2,063.25
Event Tickets Disclosable - \$			
<b>Non-Financial Reporting</b>			

Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.0	487.0	3,061.2
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0	487.0	3,061.2
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	3.0	13.0
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

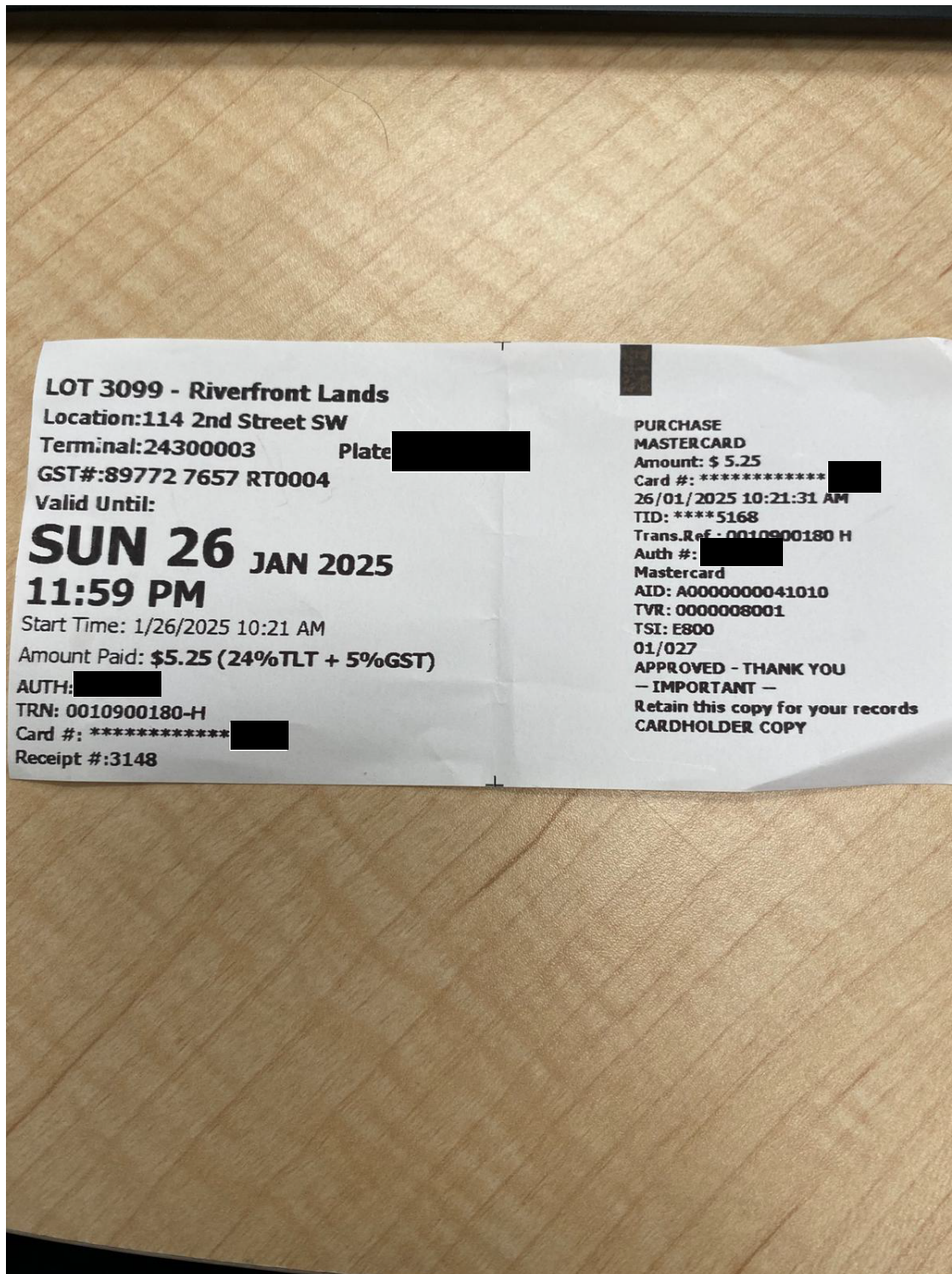
The reader should take this into account when reviewing the disclosure



## Legislative Assembly of Alberta

## ME51126 - Members' Other Expenses Claim Form

Receipt Description	Event Parking
Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Member Parking



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****ME51126 - Members' Other Expenses Claim Form**

Receipt Description	Event Parking
Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Member Parking

**Account Activity By Phone Report**

2025-Jan-1 to 2025-Jan-31

As of: Feb 10, 2025, 11:48 AM

Requested by: [REDACTED]

Date	Description	Cell #	Nickname	Location	Debits	Credits	Parking Cost
2025-Jan-08	Parking from 2025-01-08 12:57 pm to 2025-01-08 02:57 pm   12 Av - 8 St to 9 St SW - south side	[REDACTED] via CELL	Amanda	3584	[REDACTED]		\$1.80
2025-Jan-08	Refund unused minutes from 2025-01-08 01:51 pm to 2025-01-08 02:57 pm	[REDACTED] via CELL	Amanda	3584			
2025-Jan-18	Parking from 2025-01-18 06:55 pm to 2025-01-19 06:00 pm   CPA Lot 26: 301 1 St SE	[REDACTED] via CELL	Amanda	9026			\$22.00
				<b>Totals:</b>			<b>\$23.80</b>

GST Number: 119457869

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

## MP50381 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP50381
Description	December 2024 - Per-Diems
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	December 20, 2024
Date Received	December 23, 2024
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
12619	Dec 2, 2024	Travel to/from Capital	Edmonton		X	X	41.90	2.10	44.00
12620	Dec 3, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12621	Dec 4, 2024	Travel to/from Capital	Edmonton	X	X		28.57	1.43	30.00
12622	Dec 5, 2024	Travel to/from Capital	Edmonton	X	X		28.57	1.43	30.00
							153.33	7.67	161.00

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

## MP51002 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP51002
Description	January 2025 - Per-Diems
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	February 4, 2025
Date Received	February 5, 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
12980	Jan 29, 2025	Travel to/from Capital	Edmonton			X	25.71	1.29	27.00
12981	Jan 30, 2025	Travel to/from Capital	Edmonton	X			12.38	0.62	13.00
12982	Jan 31, 2025	Travel to/from Capital	Edmonton	X		X	38.10	1.90	40.00
							76.19	3.81	80.00

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

## MP51425 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP51425
Description	February 2025 - Per-Diems
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	March 3, 2025
Date Received	March 3, 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
13225	Feb 24, 2025	Travel to/from Capital	Edmonton		X	X	41.90	2.10	44.00
13226	Feb 25, 2025	Travel to/from Capital	Edmonton	X	X		28.57	1.43	30.00
13227	Feb 26, 2025	Travel to/from Capital	Edmonton	X		X	38.10	1.90	40.00
13228	Feb 27, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							162.86	8.14	171.00

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

## MP52111 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP52111
Description	March 2025 - Per-Diems
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	March 28, 2025
Date Received	March 28, 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
14093	Mar 10, 2025	Travel to/from Capital	Edmonton		X	X	41.90	2.10	44.00
14094	Mar 11, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
14095	Mar 12, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
14096	Mar 13, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
14097	Mar 14, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
14098	Mar 15, 2025	Travel to/from Capital	Edmonton	X			12.38	0.62	13.00
14099	Mar 17, 2025	Travel to/from Capital	Edmonton		X		16.19	0.81	17.00
14100	Mar 18, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
14101	Mar 19, 2025	Travel to/from Capital	Edmonton	X			12.38	0.62	13.00
14102	Mar 24, 2025	Travel to/from Capital	Edmonton		X	X	41.90	2.10	44.00
14103	Mar 25, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
14104	Mar 26, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
14105	Mar 27, 2025	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							559.07	27.93	587.00

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

## MR50570 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR50570
Description	January Rent
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	January 7, 2025
Date Received	January 7, 2025
Mailing Address	

Month	Year	Monthly Claim Amount
January	2025	1500.00
	Grand Total	1500.00

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

## MR50998 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR50998
Description	February Rent
Claimant	Amanda Chapman
Employee Number	[REDACTED]
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	February 4, 2025
Date Received	February 5, 2025
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
February	2025	1500.00
	Grand Total	1500.00

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

## MR51419 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR51419
Description	March Rent
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	March 3, 2025
Date Received	March 3, 2025
Mailing Address	

Month	Year	Monthly Claim Amount
March	2025	1500.00
	Grand Total	1500.00

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

## VF32746 - Vendor Payment Submission Form

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Hosting - Individual Stakeholder(s)



Medicine Hat Lodge, Trademark Collection by Wyndham  
1051 Ross Glen Drive SE  
Medicine Hat, AB T1B 3T8  
Tel: (403) 529-2222 Fax: (403) 529-1538  
GST # 103576021RT0002

Amanda Chapman

CA

## INVOICE

Membership No :  
Group Code :  
Company Name :

Room No. : 133  
Arrival : 09-27-24  
Departure : 09-28-24  
Page No. : 1 of 1

Cashier No. : 892  
Folio No. :  
Conf. No. : 137126865  
TA Record :  
Locator:

Thank You For Staying With Us

Date	Text	Charges CAD	Credits CAD
09-27-24	Room Charge	126.90	
09-27-24	DMF - 4%	5.08	
09-27-24	GST - 5%	6.35	
09-27-24	Hotel Tax - 4%	5.28	
09-28-24	Mastercard		143.61
Total / Balance		143.61	143.61 / 0.00

Merchant ID  
Transaction ID 9084190  
Approval Code  
Approval Amount 143.61

Credit Card # XXXXXXXXXXXX  
Credit Card Expiry XX/XX  
Capture Method Manual  
Transaction Amount 143.61

Please contact the Hotel Manager about any issues with your stay. Wyndham Hotels and Resorts or affiliates may contact you about goods and services unless you call 888-946-4283 or write Wyndham Worldwide Hotels, Inc. 22 Sylvan Way, Parsippany, NJ 07054 to opt out. View our Wyndham Hotels and Resorts website about our policy.

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  
VF32170 - Vendor Payment Submission Form

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Office supplies

Hosting - \$483.74



N Calgary #56

2853 32 ST NE  
Calgary, AB T1Y 6T7

QI Member [REDACTED]  
1877741 CON AMORE 15.99  
1907004 TPD/1877741 4.00-  
1877741 CON AMORE 15.99  
1907004 TPD/1877741 4.00-  
1877741 CON AMORE 15.99  
1907004 TPD/1877741 4.00-  
1877741 CON AMORE 15.99  
1907004 TPD/1877741 4.00-  
20 @ 19.99  
131166 KS COOK TIN 399.80  
1363855 DESSERT BARS 22.99  
1905406 TPD/1363855 5.00-  
1363855 DESSERT BARS 22.99  
1905406 TPD/1363855 5.00-

SUBTOTAL

TAX

\*\*\*\* TOTAL

XXXXXXXXXX [REDACTED]

ACCT: MASTERCARD

REFERENCE #: 0010011700 C

AUTH #: [REDACTED] 2024/12/16 11:06:51

Invoice Number: 009170

Purchase - Mastercard

A0000000041010

0000008000 E800

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

## VF32171 - Vendor Payment Submission Form

Hosting - \$18.50 + GST

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Office supplies

### PAYMENT RECEIPT



1110 58th Ave., SE  
Calgary AB T2H 2C9  
(403) 243-5141  
CalgCustServ@culliganwater.ca  
GST 870494739 RT0001

Account Number	
Payment Date	01/08/2025
Payment Receipt Number	O 09725680

PAYMENT	Mastercard *
AMOUNT PAID	18.78

Remaining Account Balance: 0.00

#### BILLED TO:

MLA Amanda Chapman  
8220 Centre Street NE  
Suite # 106  
Calgary AB T3K 1J7

**Please note: If remaining account balance appears above please call  
1-866-299-1914 to arrange payment.**

MLA Amanda Chapman	8220 Centre Street NE Suite # 106	Calgary AB T3K 1J7
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INV#: 76120TN	12/10/2024				
12/10/2024	1	Fuel Surcharge	D-76120	5.50	
12/10/2024		Sales Tax	D-76120	0.28	
12/10/2024	1	18L Premium - Delivered	D-76120	13.00	
12/10/2024		Bottle Deposit	D-76120	0.00	
01/08/2025		Mastercard *	T65542	-18.78	
Dp: 1 Rt:1				INV# 76120TN Remaining Due:	0.00
Auth:					

For questions regarding your payment receipt please contact Accounts Receivable at 1-866-299-1914  
Past due Balances are now subject to 2% Interest, minimum \$0.50 charge.

Page 1

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  
VF32167 - Vendor Payment Submission Form

Hosting - \$4.35

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Hosting - Group (constituents)

RUN DATE 11/29/2024

Account Statement

PAGE NO 60

Reporting Period: 10/29/2024 -- 11/28/2024

Tran ID	Post Date	Tran Date	MCC	Description	Auth #	Customer Code	Split	Tax	Total Tax	Amount
Memo					General Ledger Codes					

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561574730	11/18/2024	11/15/2024	5814	TIM HORTONS #5027 CALGARY AB		000000000000000000	N	GST	0.21 (e)	0.21 (e) 4.35
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Transaction Count

Statement Summary										
Purchases		Fees	0.00	Payments	0.00	Previous Balance				
Cash Advances				Adjustments	0.00	Total Credits				
Other Charges						Total Debits				
						New Account Balance				



**Legislative Assembly of Alberta**  
**VF32167 - Vendor Payment Submission Form**

Hosting - \$9.99

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Hosting - Group (constituents)

**Tim Hortons**

Tim Hortons # 105027  
100 Beddington Blvd NE, Calgary, AB, T3K 2E2  
587-296-3242

Take Out  
Order #: 123

1 50 Timbits	\$9.99
50 Tbit - Assorted	
Subtotal:	\$9.99
<b>Grand Total:</b>	<b>\$9.99</b>
Mastercard:	\$9.99
Change Due:	\$0.00
Cashier: SHIFT 1	

GST/HST#:  
11-14-2024 10:47:14 AM  
Receipt #: 119300301  
Order ID: 120329201

Enjoy any French Vanilla, Hot Chocolate.

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  
VF32167 - Vendor Payment Submission Form

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Hosting - Group (constituents)

Hosting - \$71.98



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**  
**VF32167 - Vendor Payment Submission Form**

Hosting - \$46.00

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Hosting - Group (constituents)

**DOLLARAMA**  
8220 Centre St. NE Unit 180  
Calgary AB T3K 1J7  
GST 863624433

KNORR PASTA	068400021131	2.00
KNORR PASTA	068400021131	2.00
KNORR PASTA	068400021131	2.00
KNORR PASTA	068400021131	2.00
KRAFT DINNER	068100904826	1.50
KRAFT DINNER	068100904826	1.50
KRAFT DINNER	068100904826	1.50
KRAFT DINNER	068100904826	1.50
KRAFT DINNER	068100904826	1.50
KRAFT DINNER	068100904826	1.50
KRAFT DINNER	068100904826	1.50
CAMPBELL'S SOUP	063211284164	2.75
CAMPBELL'S SOUP	063211284164	2.75
CAMPBELL'S SOUP	063211284164	2.75
CAMPBELL'S SOUP	063211284164	2.75
SOUP	063211283655	3.25
SOUP	063211283655	3.25
SOUP	063211283655	3.25
SOUP	063211283655	3.25
BOWLFULL RAMEN	667888102167	0.34
3 for \$1.00		0.01-
BOWLFULL RAMEN	667888102167	0.34
3 for \$1.00		0.01-
BOWLFULL RAMEN	667888102167	0.34
BOWLFULL RAMEN	667888102167	0.34
3 for \$1.00		0.01-
BOWLFULL RAMEN	667888102167	0.34
3 for \$1.00		0.01-
BOWLFULL RAMEN	667888102167	0.34
<b>TOTAL</b>		<b>\$46.00</b>
<b>MASTERCARD</b>		<b>\$46.00</b>
TYPE: PURCHASE		
ACCT: MASTERCARD		

AMOUNT: \$ 46.00

CARD NUMBER: \*\*\*\*\*  
DATE/TIME: 24/11/01 10:48:57  
REFERENCE #: 66335537 0010011510 C  
AUTHOR: #  
INVOICE NUMBER: 2875  
Mastercard  
A0000000041010  
0000008000 E800  
01/027 APPROVED - THANK YOU  
-- IMPORTANT --  
Retain This Copy For Your Records  
\*\*\* CUSTOMER COPY \*\*\*  
=====

PRICES MAY INCLUDE ECO FEES,  
CRF AND DEPOSIT (WHEN APPLICABLE).  
NO EXCHANGE  
NO RETURN

THANK YOU FOR SHOPPING AT DOLLARAMA  
2024-11-01 10:48:59  
000494 01  
Questions/Comments: client@dollarama.com 2875  
WE'RE HIRING! Visit www.dollarama.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

## VF32167 - Vendor Payment Submission Form

Hosting - \$122.94 + GST

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Hosting - Group (constituents)

### PAYMENT RECEIPT



1110 58th Ave., SE  
Calgary AB T2H 2C9  
(403) 243-5141  
CalgCustServ@culliganwater.ca  
GST 870494739 RT0001

Account Number	
Payment Date	11/12/2024
Payment Receipt Number	O 09517634

PAYMENT	Mastercard x
AMOUNT PAID	123.50

#### BILLED TO:

MLA Amanda Chapman  
8220 Centre Street NE  
Suite # 106  
Calgary AB T3K 1J7

Remaining Account Balance: 0.00

**Please note: If remaining account balance appears above please call 1-866-299-1914 to arrange payment.**

MLA Amanda Chapman	8220 Centre Street NE Suite # 106	Calgary AB T3K 1J7
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INV#: 3135540	11/12/2024					
11/12/2024		Mastercard x	Auth:	T47678	-123.50	
11/12/2024		Mastercard		T47678	123.50	
				INV# 3135540 Remaining Due:	0.00	
INV#: 43069TN	11/12/2024					
11/12/2024		Mastercard		T47678	-29.76	
11/12/2024	1	Fuel Surcharge		D-43069	5.50	
11/12/2024		Sales Tax		D-43069	0.28	
11/12/2024	2	18L Premium - Delivered		D-43069	23.98	
11/12/2024		Bottle Deposit	Dp: 2 Rt:2	D-43069	0.00	
				INV# 43069TN Remaining Due:	0.00	
INV#: 87990TN	09/13/2024					
09/13/2024	1	Fuel Surcharge		D-87990	5.50	
09/13/2024		Sales Tax		D-87990	0.28	
09/13/2024	4	18L Premium - Delivered		D-87990	47.96	
09/13/2024	4	Bottle Deposit	Dp: 4 Rt:0	D-87990	40.00	
11/12/2024		Mastercard		T47678	-93.74	
				INV# 87990TN Remaining Due:	0.00	

For questions regarding your payment receipt please contact Accounts Receivable at 1-866-299-1914  
Past due Balances are now subject to 2% Interest, minimum \$0.50 charge.

Page 1

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.



Hosting \$135.92

## Legislative Assembly of Alberta

### ME52110 - Members' Other Expenses Claim Form

Receipt Description	Hosting
Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Other



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.

Hosting - \$16.99



Safeway Beddington Square  
8120 Beddington Blvd Calgary AB  
Phone: 403.295.6895  
GST# 895588788RT0001

Served by: SCO 20

GROCERY

Hot Chocolate

\$16.99 R

SUBTOTAL  
5% GST

TOTAL

Master Card  
Cash

TENDER  
CHANGE

MERCHANT 22256891

C

TERMINAL ID S02225689120

\*\* Purchase

\*\* \$

CARD MC

RCPT 9964000

NO. \*\*\*\*\*

RESP 001

DATE 02/17/2025

TIME 10:37:03

AUTH #

REF# 001045170

APPL.Mastercard

AID A0000000041010

00

APPROVED - THANK YOU

Hosting - \$39.99



Safeway Beddington Square  
8120 Beddington Blvd Calgary AB  
Phone: 403.295.6895  
GST# 895588788RT0001

Served by: Ascalu E

**GROCERY**

KCup Prm Rst Md Dk \$39.99 C



SUBTOTAL  
5% GST

**TOTAL**

MasterCard  
Cash

TENDER  
CHANGE

NUMBER OF ITEM

MERCHANT 22256891 C  
TERMINAL ID S02225689101  
\*\* Purchase  
CARD MC  
NO. \*\*\*\*\*  
DATE 03/05/2025  
AUTH #  
REF# 001958011  
APPL.Mastercard  
AID A0000000041010

\*\* \$  
RCPT 9756000  
RESP 001  
TIME 09:12:41

00

APPROVED - THANK YOU



Legislative Assembly of Alberta  
VF32170 - Vendor Payment Submission Form

Hosting \$20.92 + GST

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Office supplies

**SAFeway**

Safeway Beddington Square  
8120 Beddington Blvd Calgary AB  
Phone: 403.295.6895  
GST# 895588788RT0001

Served by: SC0 22

**GROCERY**

Comp Spring Water	\$3.79	C
+EHC	\$0.48	R
+Deposit	\$2.40	R
Comp Spring Water	\$3.79	C
+EHC	\$0.48	R
+Deposit	\$2.40	R
Comp Spring Water	\$3.79	C
+EHC	\$0.48	R
+Deposit	\$2.40	R
Comp Spring Water	\$0.79	GC
+EHC	\$0.02	R
+Deposit	\$0.10	R

SUBTOTAL \$20.92  
5% GST \$0.04

**TOTAL \$20.96**

Master Card TENDER \$20.96  
Cash CHANGE \$0.00

NUMBER OF ITEMS 4

MERCHANT 22256891 C  
TERMINAL ID S02225689122  
\*\* Purchase \*\* \$ 20.96  
CARD MC RCPT 1530000  
NO. \*\*\*\*\* RESP 001  
DATE 12/13/2024 TIME 13:40:14  
AUTH #  
REF# 001007077  
APPL. Mastercard  
AID A0000000041010

00 APPROVED - THANK YOU

Term	Tran	Store	Oper	12/13/24
22	1530	8849	122	13:40:18

Thank you for shopping at Our Store  
Come Again Soon

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.



Hosting - \$45.97

# Legislative Assembly of Alberta

## VF32170 - Vendor Payment Submission Form

Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Office supplies

*Tim Hortons*

Tim Hortons # 105027  
Ston Blvd NE, Calgary, AB, T3K 2E2  
587-296-3242

4

	\$5.99
Original Blend	\$19.99
af	\$19.99
	\$45.97
	\$45.97
	\$0.00

T 1

GST/HST#:  
12-17-2024 04:43:16 PM  
Receipt #: 120636301  
Order ID: 121760601  
any French Vanilla, Hot Chocolate,

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.