

	Budget	Reimbursed This Quarter	Reimbursed to Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900	\$17.31	\$88.92
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$312.38	\$1335.26
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$26400	\$3000	\$12000
Travel Accommodations Allowance		\$213.1	\$213.1
Travel Accommodations Allowance (days; 10 max) - NF	10.00	1.0	1.0
Other			
Hosting - \$			\$26.97
Event Tickets Disclosable - \$			
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.00	638.0	1,839.5
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0	638.0	1,839.5
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	2.0	6.0
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
ME56472 - Members' Other Expenses Claim Form

MLA Parking Cap: \$5.00

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

THIS IS YOUR RECEIPT

Terminal: 9B_CWT TAP

Plate: [REDACTED]

Valid through:

THU 18 SEP 25

12:11 PM

AMOUNT PAID: \$5.00

ENTRY TIME: 9/18/2025 11:11 AM

RECEIPT NO: 14090

AUTH: [REDACTED]

TRN: 0013350040-11

******* [REDACTED] 1155-1766**

9B_CWT TAP

VALID TO:

18 SEP 25

12:11 PM

PAID:

\$5.00

ENTRY:

9/18/2025

11:11 AM

14090

PURCHASE

MASTERCARD

AMOUNT: \$ 5.00

CARD #: *** [REDACTED]**

18/09/2025 11:11:29 AM

TID: **1195**

TRANS.REF.: 0013350040 H

AUTH #: [REDACTED]

MASTERCARD

AID: A0000000041010

TVR: 0000000001

TSE: EB00

01/027

APPROVED - THANK YOU

— IMPORTANT —

RETAIN THIS COPY FOR YOUR RECORD

CARDHOLDER COPY

P

P

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
ME56472 - Members' Other Expenses Claim Form

MLA Parking Cap: \$7.55 + GST

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

RECEIPT

License Plate Number
[REDACTED]

Expiration Date/Time
06:00 AM
SEP 14, 2025

Purchase Date/Time: 06:10pm Sep 13, 2025

Total Parking: \$6.00
Total Maintenance Fee: \$1.55
Total GST: \$0.30

Total Due: CAD\$7.85
Total Paid: CAD\$7.35
Ticket #: 00013399
S/N #: 520119371010
Setting: G0195
Mach Name: G0195
CVM: NO CARDHOLDER VERIFICATION

***[REDACTED] MC

Auth #: [REDACTED]

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
ME56472 - Members' Other Expenses Claim Form

MLA Parking Cap: \$4.76 + GST

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

LOT 3096 - Livingston Surface

Location: 217 1st Street SW

Terminal: 24250001

Plate: [REDACTED]

GST #: 89772 7657 RT0004

Valid Until:

SAT 16 AUG 2025
11:59 PM

Start Time: 8/16/2025 10:18 AM

Amount Paid: \$5.25 (24% TLT + 5% GST)

AUTH: [REDACTED]

TRN: 0013330030-H

Card #: ***** [REDACTED]

Receipt #: 10041

PURCHA
MASTERC
Amount:
Card #: *
16/08/20
TID: ***
Trans.Ref
Auth #: [REDACTED]
Mastercar
AID: A000
TVR: 0000
TSI: E800
01/027
APPROVED
- IMPORT
Retain this
CARDHOLD

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

MP56967 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP56967
Description	October 2025 - Per-Diems
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	November 10, 2025
Date Received	November 12, 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
19265	Oct 22, 2025	Travel to/from Capital	Edmonton		X	X	43.81	2.19	46.00
19266	Oct 23, 2025	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
19267	Oct 27, 2025	Travel to/from Capital	Edmonton		X	X	43.81	2.19	46.00
19268	Oct 28, 2025	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
19269	Oct 29, 2025	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
19270	Oct 30, 2025	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
							312.38	15.62	328.00

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

MR56471 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR56471
Description	October Rent
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	October 6, 2025
Date Received	October 7, 2025
Mailing Address	

Month	Year	Monthly Claim Amount
October	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

MR56965 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR56965
Description	November Rent
Claimant	Amanda Chapman
Employee Number	
Constituency	Calgary-Beddington 02 (Amanda Chapman)
Date Submitted	November 10, 2025
Date Received	November 12, 2025
Mailing Address	

Month	Year	Monthly Claim Amount
November	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

MR56168 - Members' Temporary Accommodation Allowance Claim Form

Travel Accommodations Allowance: \$213.10 + GST

Receipt Description	
Member Name	Amanda Chapman
Claimant	Amanda Chapman
Expense Category	Member Travel



INFORMATION INVOICE

Sandman Signature Lethbridge Lodge

Amanda Chapman

Print Date 10/6/25
Page No. 1 of 1
Room No. 429
Arrival 06/09/25
Departure 06/10/25
Conf. No. 587788071
Folio No. [REDACTED]
GST No. 121767065 RT 0001

Date	Description	Charges CAD	Credits CAD
06/09/25	Room Charge	199.00	
06/09/25	Room - DMF	3.98	
06/09/25	Room - GST	10.15	
06/09/25	Tourism Levy	8.12	
06/09/25	ECO Fees	2.00	
06/09/25	GST - ECO Fees	0.10	
06/10/25	MasterCard XXXXXXXXXX [REDACTED]		223.35
Total		223.35	223.35
Balance		0.00	CAD
Net Amount		199.00	CAD
Room - GST		10.25	CAD
Tourism Levy		8.12	CAD
Room - DMF		3.98	CAD
ECO Fees		2.00	CAD
Total incl. vat		223.35	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

Merchant ID	18588016	Credit Card #	XXXXXXXXXX [REDACTED]
Transaction ID	[REDACTED]	Credit Card Expiry	XX/XX
Approval Code	[REDACTED]	Capture Method	Swiped
Approval Amount	223.35	Transaction Amount	223.35

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 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.