

LEGISLATIVE ASSEMBLY OF ALBERTA  
 Member EDR 2023-24  
 015 - Calgary-Klein - MLA Lizette Tejada  
 For Expenses Processed Oct 1 - Dec 31, 2023

	Budget	Reimbursed This Qtr	Reimbursed To-Date
<b>Financial Reporting - \$ (Receipts attached)</b>			
<b>Transportation</b>			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00	\$205.74	\$280.16
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			\$26.58
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			\$681.55
Member Travel (Meal Per Diems) - \$		\$138.42	\$197.70
<b>Accommodation</b>			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$2,595.36	\$2,936.00
Travel Accommodations Allowance		\$1,118.37	\$1,118.37
Travel Accommodations Allowance (days; 10 max) - NF	10.0	4.0	4.0
<b>Other</b>			
Hosting - \$			\$19.99
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	428.6	428.6
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	35,000.0	428.6	428.6
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	7.0	8.0
<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

**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

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.

MLA Parking Cap - \$8.57 + GST

THIS IS YOUR RECEIPT      THIS IS YOUR RECEIPT      THIS IS YOUR RECEIPT

Terminal: MACEWANA\_CWT PIN & TAP      MACEWANA\_CWT PIN & TAP

Date: [Redacted]

Valid through: **HU 19 OCT 23 1:29 PM**

Amount PAID: **\$9.00**

Entry Time: **10/19/2023 11:59 AM**

Receipt No: **19232**

UNIVERSITY OF CALGARY

PURCHASE VISA AMOUNT: \$ 9.00  
 CARD #: \*\*\*\*\*  
 19/10/2023 11:59:36 AM  
 TID: \*\*\*\*\*  
 TRANS. REF.: 0015040150 H  
 AUTH #:  
 VISA CREDIT AID: A000000031010  
 TSI: 0000  
 01/027  
 APPROVED - THANK YOU  
 IMPORTANT -  
 RETAIN THIS COPY FOR YOUR RECORDS  
 CARDHOLDER COPY

*Meeting w/ Constituents*

UNIVERSITY OF CALGARY

083

Receipt Description	Parking for Meeting with Constituent
Member Name	Lizette Tejada
Claimant	Lizette Tejada
Expense Category	Member Parking





Legislative Assembly of Alberta  
ME31054 - Members' Other Expenses Claim Form

Receipt Description	Parking for Pride Brunch
Member Name	Lizette Tejada
Claimant	Lizette Tejada
Expense Category	Member Parking

INDIGO  
Pride Brunch INDIGO  
LOT 305

PARKING PERMIT

Meter: 03014738  
Trans: 097559  
Paid: \$15.00  
Purchase Time:  
10:38AM SEP 02, 2023

License Plate:  
[REDACTED]

Base Price: \$14.29  
GST: \$0.71  
Total Price: \$15.00  
Card:\*\*\*\*\*[REDACTED]  
Auth: [REDACTED]

Expires:  
SEP02 2023  
6:00PM

THANK YOU

GST 120996095RT0004

RECEIPT PARKING RECEIPT PARKING RECEIPT PARKING

YOU THANK YOU THANK YOU THANK

MLA Parking Cap - \$14.29 + GST

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.



<b>Lizette Tejada</b> [REDACTED]	Folio No. :	[REDACTED]	Room No. :	<b>302</b>
	A/R Number :	[REDACTED]	Arrival :	<b>11-06-23</b>
	Group Code :	[REDACTED]	Departure :	<b>11-09-23</b>
	Company :	<b>Government Canada</b>	Conf. No. :	<b>81991923</b>
	Membership No. :	<b>PC</b> [REDACTED]	Rate Code :	<b>IMCGV</b>
	Invoice No. :	[REDACTED]	Page No. :	<b>1 of 2</b>

Date	Description	Charges	Credits
11-06-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
11-07-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
11-08-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
11-09-23	Visa	XXXXXXXXXXXXXXXXXX [REDACTED]	[REDACTED]



<b>Lizette Tejada</b> [Redacted]	Folio No. :	[Redacted]	Room No. :	<b>818</b>
	A/R Number :	[Redacted]	Arrival :	<b>11-27-23</b>
	Group Code :	[Redacted]	Departure :	<b>11-30-23</b>
	Company :	<b>Government Canada</b>	Conf. No. :	<b>23304493</b>
	Membership No. :	<b>PC</b> [Redacted]	Rate Code :	<b>IMCGV</b>
	Invoice No. :	[Redacted]	Page No. :	<b>1 of 2</b>

Date	Description	Charges	Credits
11-27-23	Parking IHG	15.24	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
11-28-23	Parking IHG	15.24	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
11-29-23	Parking IHG	15.24	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
[Redacted]	[Redacted]	[Redacted]	
11-30-23	Visa	XXXXXXXXXXXXXXXXXX [Redacted]	[Redacted]



<b>Lizette Tejada</b> [REDACTED]	Folio No. :	[REDACTED]	Room No. :	<b>610</b>
	A/R Number :	[REDACTED]	Arrival :	<b>11-20-23</b>
	Group Code :	[REDACTED]	Departure :	<b>11-23-23</b>
	Company :	<b>Government Canada</b>	Conf. No. :	<b>67899847</b>
	Membership No. :	<b>PC</b> [REDACTED]	Rate Code :	<b>IMCGV</b>
	Invoice No. :	[REDACTED]	Page No. :	<b>1 of 2</b>

Date	Description	Charges	Credits
11-20-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
11-21-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
11-22-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	[REDACTED]	
11-23-23	Visa	XXXXXXXXXXXX [REDACTED]	[REDACTED]



MLA Parking Cap - \$45.72

Date	Description	Charges	Credits
12-04-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
12-05-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
12-06-23	Parking IHG	15.24	
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
12-07-23	Visa XXXXXXXXXXXXX [REDACTED]		[REDACTED]
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - <a href="http://www.ihg.com/reviews">www.ihg.com/reviews</a> . We look forward to welcoming you back soon.		<b>Total</b>	[REDACTED]
		<b>Balance</b>	<b>0.00</b>

**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



# Legislative Assembly of Alberta

## MP29812 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP29812
Description	August 2023 - Per-Diems
Claimant	Lizette Tejada
Employee Number	██████████
Constituency	Calgary-Klein 15 (Lizette Tejada)
Date Submitted	October 5, 2023
Date Received	October 5, 2023
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
1122	Aug 30, 2023	Travel to/from Capital	Edmonton		X	X	30.81	1.54	32.35
							30.81	1.54	32.35

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

## MP31882 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP31882
Description	November 2023 - Per-Diems
Claimant	Lizette Tejada
Employee Number	██████████
Constituency	Calgary-Klein 15 (Lizette Tejada)
Date Submitted	December 5, 2023
Date Received	December 5, 2023
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
3129	Nov 2, 2023	Travel to/from Capital	Red Deer			X	19.76	0.99	20.75
3130	Nov 9, 2023	Travel to/from Capital	Red Deer			X	19.76	0.99	20.75
3131	Nov 11, 2023	60 km from Perm. Res.	Lethbridge	X			8.76	0.44	9.20
3132	Nov 23, 2023	Travel to/from Capital	Red Deer			X	19.76	0.99	20.75
3133	Nov 30, 2023	Travel to/from Capital	Red Deer			X	19.76	0.99	20.75
							87.80	4.40	92.20

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

## MP32169 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP32169
Description	December 2023 - Per-Diems
Claimant	Lizette Tejada
Employee Number	██████████
Constituency	Calgary-Klein 15 (Lizette Tejada)
Date Submitted	December 18, 2023
Date Received	December 18, 2023
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
3490	Dec 7, 2023	Travel to/from Capital	Edmonton, Red Deer	X	X		19.81	0.99	20.80
							19.81	0.99	20.80

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.



**American Express® Corporate Card  
Statement of Account**

www.americanexpress.ca  
Amex Bank of Canada  
Corporate Service Centre  
PO Box 7000 Station B  
Willowdale (Ontario) M2K 2R6

Prepared For  
**LIZETTE TEJADA  
LEGIS ASSEMBLY OF AB**

Account Number  
XXXX-XXXX-██████████

Date  
November 16, 2023

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
██████████	██████████	██████████	██████████

Statement includes payments and charges received by November 16, 2023

Please see "About Your Statement" section for important information.

Your account is currently one month past due. Please pay your balance in full to maintain your account in good standing. If payment has recently been made, thank you.

Credit Limit Summary On November 16, 2023	Total Credit Limit \$	Available Credit Limit \$
	██████████	██████████

  

New Transactions for LIZETTE TEJADA		Amount \$
Card XXXX-XXXX-██████████		
October 20	EDMONTON MATRIX HOTE EDMONTON Hotel Services	178.51
October 30	EDMONTON MATRIX HOTE EDMONTON Hotel Services	535.53
<b>Total New Transactions for LIZETTE TEJADA</b>		<b>680.04 + GST 714.04</b>

Please detach here

**AMERICAN EXPRESS®**

Payment Options  
PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. Learn about all of your payment options, including how to enroll your bank account, make a one-time payment or enroll in our pre-authorized payment plan by visiting [www.amex.ca/paymentmethods](http://www.amex.ca/paymentmethods). Go paperless and get your full statements faster: [www.amex.ca/paperless](http://www.amex.ca/paperless). DETAILS ENCLOSED.

Account Number	
██████████	██████████
Amount Due \$	Amount Paid \$
██████████	

LIZETTE TEJADA  
LEGIS ASSEMBLY OF AB  
4TH FLOOR  
EDMONTON AB  
T5K 1E7

Amex Bank of Canada/  
Banque Amex du Canada  
PO BOX 2000  
West Hill ON M1E 5H4



# Legislative Assembly of Alberta

## MR31880 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR31880
Description	Matrix Hotel Stay Nov 6 - 9
Claimant	Lizette Tejada
Employee Number	██████████
Constituency	Calgary-Klein 15 (Lizette Tejada)
Date Submitted	December 5, 2023
Date Received	December 5, 2023
Mailing Address	██████████ ██████████

Month	Year	Monthly Claim Amount
November	2023	<b>1,404.36</b> ██████████
	Grand Total	<b>1,404.36</b> ██████████

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

## MR32159 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR32159
Description	Holiday Inn Express December
Claimant	Lizette Tejada
Employee Number	██████████
Constituency	Calgary-Klein 15 (Lizette Tejada)
Date Submitted	December 18, 2023
Date Received	December 18, 2023
Mailing Address	██████████ ██████████

Month	Year	Monthly Claim Amount
December	2023	510.96 ██████████
	Grand Total	510.96 ██████████

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.



**American Express® Corporate Card**  
**Statement of Account**

www.americanexpress.ca  
Amex Bank of Canada  
Corporate Service Centre  
PO Box 7000 Station B  
Willowdale (Ontario) M2K 2R6

Prepared For  
**LIZETTE TEJADA**  
**LEGIS ASSEMBLY OF AB**

Account Number  
XXXX-XXXX [REDACTED]

Date  
October 16, 2023

Previous Balance	Payments and Credits	New Charges including Delinquency Assessment, if any	New Balance \$
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

Statement includes payments and charges received by October 16, 2023

Please see "About Your Statement" section for important information.

Please pay your balance in full upon receipt of statement. Thank you for your ongoing membership.

**Credit Limit Summary**  
**On October 16, 2023**

**Total Credit Limit \$** [REDACTED] **Available Credit Limit \$** [REDACTED]

**New Transactions for LIZETTE TEJADA**

New Transactions for LIZETTE TEJADA			Amount \$
Card XXXX-XXXXX0 [REDACTED]			
<b>October 13</b>	<b>MOOSE HOTEL &amp; SUITES BANFF</b>		<b>986.83</b>
	Arrival	Departure	
	10/10/23	13/10/23	
<b>Total New Transactions for LIZETTE TEJADA</b>			<b>986.83</b>

Please detach here

**AMERICAN EXPRESS®**

Payment Options  
PLEASE ALLOW 3 TO 5 BUSINESS DAYS FOR YOUR PAYMENT TO BE PROCESSED BY YOUR FINANCIAL INSTITUTION AND SENT TO US. Learn about all of your payment options, including how to enroll your bank account, make a one-time payment or enroll in our pre-authorized payment plan by visiting [www.amex.ca/paymentmethods](http://www.amex.ca/paymentmethods). Go paperless and get your full statements faster: [www.amex.ca/paperless](http://www.amex.ca/paperless). DETAILS ENCLOSED.

Account Number [REDACTED]		
	Amount Due \$	Amount Paid \$
	986.83	

LIZETTE TEJADA  
LEGIS ASSEMBLY OF AB  
4TH FLOOR  
EDMONTON AB  
T5K 1E7

Amex Bank of Canada/  
Banque Amex du Canada  
PO BOX 2000  
West Hill ON M1E 5H4



**Legislative Assembly of Alberta**  
**MR31881 - Members' Temporary Accommodation Allowance Claim Form**

Receipt Description	
Member Name	Lizette Tejada
Claimant	Lizette Tejada
Expense Category	Member Travel



**INFORMATION INVOICE** **Sandman Signature Lethbridge Lodge**

Lizette Tejada  
 Canada

Print Date 11/11/23  
 Page No. 1 of 1  
 Room No. 109  
 Arrival 11/10/23  
 Departure 11/11/23  
 Conf. No. 293418826  
 Folio No. [REDACTED]  
 GST No. 121767065 RT 0001

Company Name: Government - Federal\*

Date	Description	Charges CAD	Credits CAD
11/10/23	Government Rate	124.00	
11/10/23	Room - DMF	2.48	
11/10/23	Room - GST	6.32	
11/10/23	Tourism Levy	5.06	
11/11/23	Visa XXXXXXXXXXXX [REDACTED]		137.86
<b>Total</b>		<b>137.86</b>	<b>137.86</b>
<b>Balance</b>		<b>0.00</b>	<b>CAD</b>
Net Amount		124.00	CAD
Room - GST		6.32	CAD
Tourism Levy		5.06	CAD
Room - DMF		2.48	CAD
Total incl. vat		137.86	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		Credit Card #	XXXXXXXXXXXX [REDACTED]
Transaction ID	7086490	Credit Card Expiry	XX/XX
Approval Code	[REDACTED]	Capture Method	Manual
Approval Amount	137.86	Transaction Amount	137.86

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.