

	Budget	Reimbursed This Quarter	Reimbursed to Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900	\$66.67	\$66.67
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$		\$166.37	\$166.37
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$1597.13	\$1597.13
Accommodation			
Edmonton Accommodation Allowance (\$26,822.00/yr max)	\$26822	\$6705	\$6705
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.00		
Other			
Hosting - \$		\$1837.28	\$1837.28
Event Tickets Disclosable - \$		\$498	\$498
Non-Financial Reporting			
Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	80,000.00	1,654.0	1,654.0
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	80,000.0	1,654.0	1,654.0
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	-	2.0	2.0
Use of a Private Automobile (52 trips per year) - NF	52.00	3.0	3.0
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.

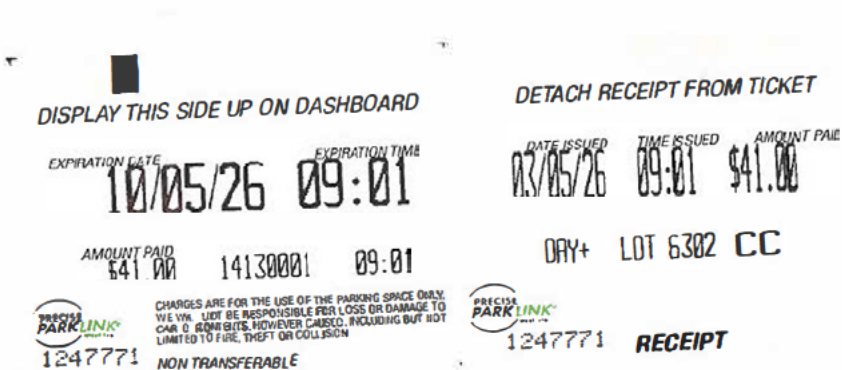
The reader should take this into account when reviewing the disclosure



Legislative Assembly of Alberta
VF37135 - Vendor Payment Submission Form

MLA Parking Cap - \$39.05+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other



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

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Cypress-Medicine Hat

From: Indigo Park Canada <noreplycanada@indigoneo.ca>
Sent: Friday, May 15, 2026 10:46 AM
To: Cypress-Medicine Hat
Subject: Confirmation & receipt of your reservation: C120 - Rogers 2 577933270 Day Max
Categories: FMAS, UBER JUSTIN, AMEX STATEMENTS

INDIGO

Thank you for choosing Indigo!

This receipt contains the details of your purchase and any relevant information for your visit. We recommend keeping this document in case you need assistance.

Pass is non-refundable.

[GET MY PASS](#)

Information

Transaction: 577933270

Licence Plate:

Location: C120 - Rogers 2
636 4 Ave SW
Calgary, Alberta T2P0J9

Start	Fri, May 15, 2026 10:46 AM	End	Fri, May 15, 2026 07:00 PM
--------------	--------------------------------------	------------	--------------------------------------

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
VF37135 - Vendor Payment Submission Form

MLA Parking Cap - \$27.62 +GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Details of your purchase

Total **\$29.00**

Rate(Tax incl.)

Time

May 15, 2026 10:46 AM - May 15, 2026 Day Max **\$27.61**
07:00 PM

Additional Items	Amount
Transaction Fee	\$0.54
Convenience Fee	\$0.85

GST 5.000% **\$1.38**

Amount Paid \$29.00

Made on: Fri, May 15, 2026 10:45 AM
Payment method: AMEX
Card number: xxxx-xxxx-xxxx-xxxx

INDIGO PARK CANADA INC. VAT# 120998095
INDIGO PARK CANADA INC. VAT2# NONE

LinkedIn | Instagram

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
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel - \$56.41+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: [REDACTED]
Sent: Monday, May 4, 2026 8:48 AM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Sunday afternoon trip with Uber
Categories: UBER JUSTIN, FMAS, AMEX STATEMENTS

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: May 4, 2026 at 2:18:30 AM MDT
To: [REDACTED]
Subject: Your Sunday afternoon trip with Uber



May 3, 2026
3:18 p.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this afternoon.



Total

\$59.23

Trip fare

\$47.59



Legislative Assembly of Alberta

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Airport drop-off fee / Airport pick-up fee	\$4.00
Est. insurance and payments costs 	\$4.82
GST	\$2.82

Payments

 American Express ... 	\$59.23
5/4/26 2:18 a.m.	

Want to switch your payment method?

 Switch

Download the receipt in a PDF format

 Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.

[Click here](#) to unsubscribe from seeing advertisements in your email receipt.

Trip details

	Comfort
	30.00 kilometers, 31 minutes

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
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel - \$11.56+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: justin wright [REDACTED]
Sent: Monday, May 4, 2026 10:41 PM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Monday morning trip with Uber
Categories: FMAS, UBER JUSTIN, AMEX STATEMENTS

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: May 4, 2026 at 8:20:54 PM MDT
To: [REDACTED]
Subject: Your Monday morning trip with Uber
Reply-To: no-reply@replies.uber.com



May 4, 2026
9:20 a.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this morning.



Total

\$12.14

Trip fare

\$9.83



Legislative Assembly of Alberta

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Est. insurance and payments costs  \$1.43

GST \$0.58

Per-Trip Fee  \$0.30

Payments

 American Express ****  \$12.14
5/4/26 8:20 p.m.

Want to switch your payment method?  Switch

Download the receipt in a PDF format  Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.

[Click here](#) to unsubscribe from seeing advertisements in your email receipt.

Trip details

 Comfort
2.95 kilometers, 5 minutes

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
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel - \$10.39+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: justin wright [REDACTED]
Sent: Monday, May 4, 2026 10:42 PM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Monday morning trip with Uber
Categories: UBER JUSTIN, FMAS, AMEX STATEMENTS

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: May 4, 2026 at 7:32:58 PM MDT
To: [REDACTED]
Subject: Your Monday morning trip with Uber
Reply-To: no-reply@replies.uber.com



May 4, 2026
8:32 a.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this morning.



Total

\$10.91

Trip fare

\$8.82

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

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Est. insurance and payments costs  \$1.27

GST \$0.52

Per-Trip Fee  \$0.30

Payments



American Express •••• [REDACTED]
5/4/26 7:32 p.m.

\$10.91

Want to switch your payment method?



Switch

Download the receipt in a PDF format



Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.

[Click here](#) to unsubscribe from seeing advertisements in your email receipt.

Trip details



Comfort
1.67 kilometers, 7 minutes

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
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel - \$40.09+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: justin wright [REDACTED]
Sent: Friday, May 8, 2026 5:31 PM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Friday morning trip with Uber

Categories: UBER JUSTIN, AMEX STATEMENTS, FMAS

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: May 8, 2026 at 3:37:07 PM MDT
To: [REDACTED]
Subject: Your Friday morning trip with Uber



May 8, 2026
4:37 a.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this morning.



Total **\$42.09**

Trip fare \$30.76

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

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Airport drop-off fee / Airport pick-up fee	\$4.25
Est. insurance and payments costs	\$4.78
GST	\$2.00
Per-Trip Fee	\$0.30

Payments



American Express

5/8/26 3:37 p.m.

\$42.09

Want to switch your payment method?



Switch

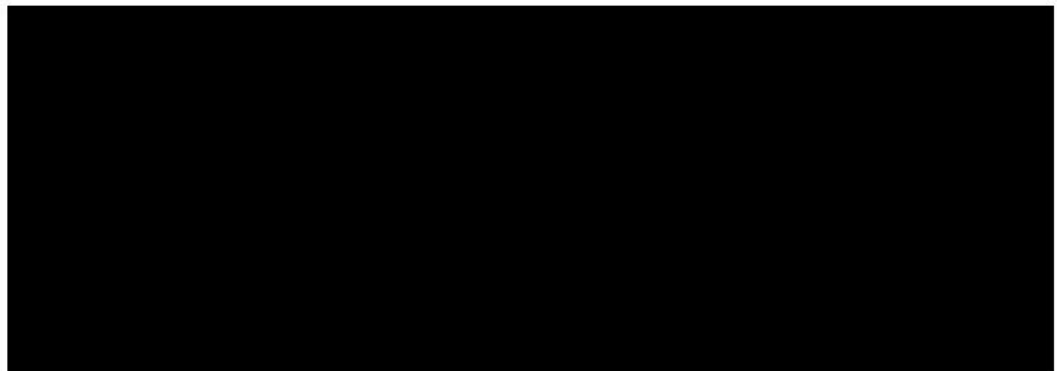
Download the receipt in a PDF format



Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.





Legislative Assembly of Alberta
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel - \$9.55+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: justin.wright@alberta.ca
Sent: Monday, June 8, 2026 9:20 AM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Thursday morning trip with Uber

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: June 8, 2026 at 9:17:45 AM MDT
To: [REDACTED]
Subject: Your Thursday morning trip with Uber



May 14, 2026
1:21 a.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this morning.



Total **\$10.03**

Trip fare \$7.96

Est. insurance and payments costs \$1.29



Legislative Assembly of Alberta

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

GST \$0.48

Per-Trip Fee ☐ \$0.30

Payments

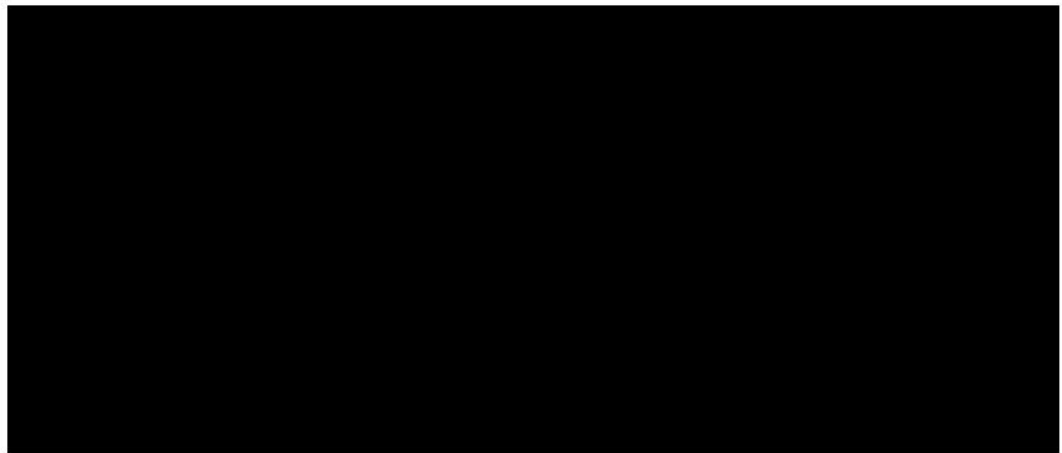
☐ American Express ••••• \$10.03
5/14/26 12:21 p.m.

Want to switch your payment method? ☐ Switch

Download the receipt in a PDF format ☐ Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.





Legislative Assembly of Alberta
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel - \$10.14+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: justin wright [REDACTED]
Sent: Monday, June 8, 2026 9:19 AM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Wednesday evening trip with Uber

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: June 8, 2026 at 9:17:21 AM MDT
To: [REDACTED]
Subject: Your Wednesday evening trip with Uber
Reply-To: no-reply@replies.uber.com



May 13, 2026
8:52 p.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this evening.



Total **\$10.65**

Trip fare \$8.55

Est. insurance and payments costs [REDACTED] \$1.29



Legislative Assembly of Alberta

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

GST \$0.51

Per-Trip Fee  \$0.30

Payments

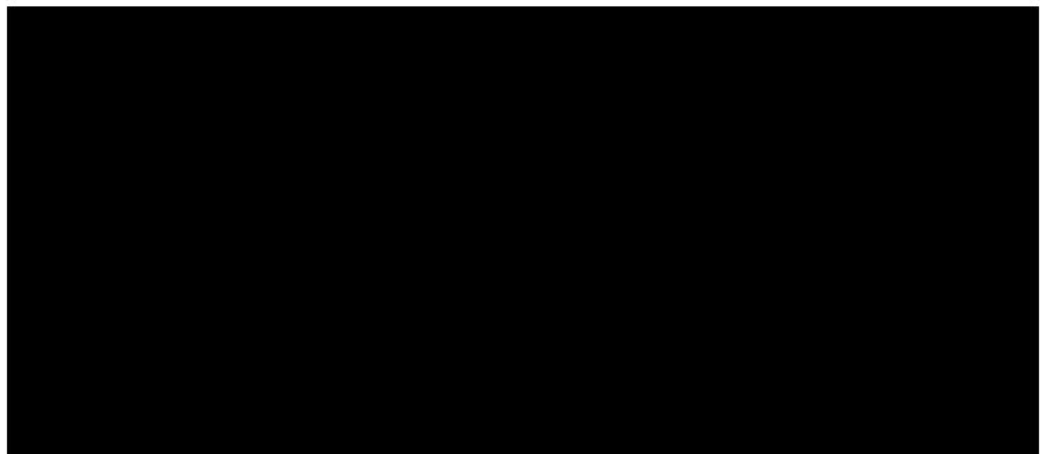
 American Express  \$10.65
5/14/26 7:52 a.m.

Want to switch your payment method?  Switch

Download the receipt in a PDF format  Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.





Legislative Assembly of Alberta
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel - \$13.79+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: justin wright [REDACTED]
Sent: Monday, June 8, 2026 9:21 AM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Wednesday evening trip with Uber

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: June 8, 2026 at 9:20:42 AM MDT
To: [REDACTED]
Subject: Your Wednesday evening trip with Uber
Reply-To: no-reply@replies.uber.com



May 13, 2026
8:17 p.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this evening.



Total **\$14.48**

Trip fare \$12.02

Est. insurance and payments costs [REDACTED] \$1.47

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

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

GST \$0.69

Per-Trip Fee  \$0.30

Payments

 American Express  \$14.48
5/14/26 7:17 a.m.

Want to switch your payment method?

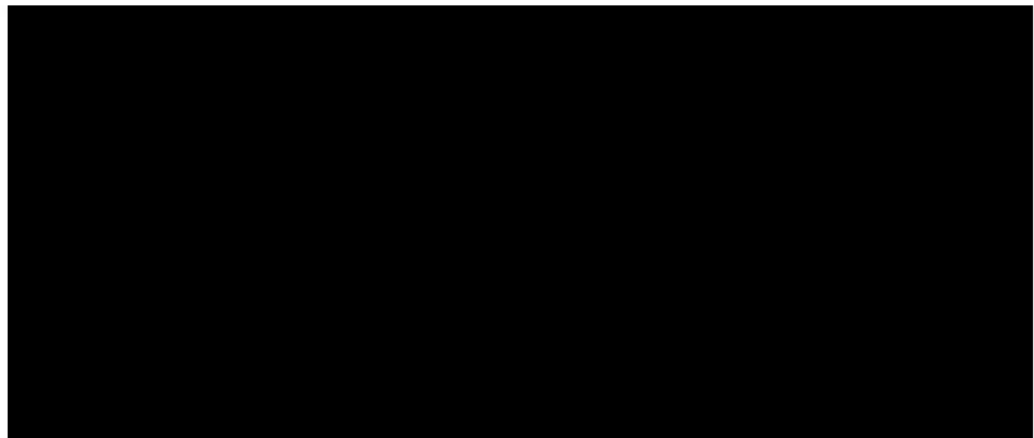
 Switch

Download the receipt in a PDF format

 Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.





Legislative Assembly of Alberta
VF37135 - Vendor Payment Submission Form

Taxi, Bus Travel- \$14.44+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

Teri-Anne Bowyer - Cypress-Medicine Hat

From: justin wright [REDACTED]
Sent: Monday, June 8, 2026 9:21 AM
To: Teri-Anne Bowyer - Cypress-Medicine Hat
Subject: Fwd: Your Wednesday evening trip with Uber

Sent from my iPhone

Begin forwarded message:

From: Uber Receipts <noreply@uber.com>
Date: June 8, 2026 at 9:20:24 AM MDT
To: [REDACTED]
Subject: Your Wednesday evening trip with Uber



May 13, 2026
5:56 p.m.

**Thanks for riding,
Justin**

We hope you enjoyed your ride this evening.



Total **\$15.16**

Trip fare \$12.70

Est. insurance and payments costs \$1.44

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

VF37135 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Other

GST \$0.72

Per-Trip Fee ☐ \$0.30

Payments



American Express
5/14/26 4:56 a.m.

\$15.16

Want to switch your payment method?



Switch

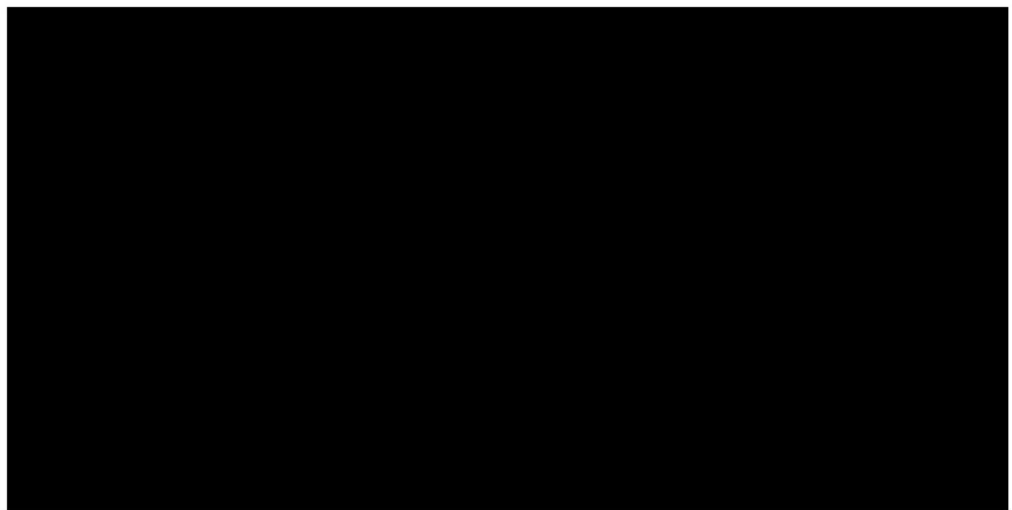
Download the receipt in a PDF format



Download PDF

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

Fare does not include fees that may be charged by your bank. Please contact your bank directly for inquiries.





Legislative Assembly of Alberta

MP60190 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP60190
Description	April 2026 - Per-Diems
Claimant	Justin Wright
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Justin Wright)
Date Submitted	May 4, 2026
Date Received	May 5, 2026
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
23918	Apr 2, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23919	Apr 9, 2026	60 km from Perm. Res.	HANNA	X	X	X	56.19	2.81	59.00
23920	Apr 12, 2026	Travel to/from Capital	Edmonton		X	X	43.81	2.19	46.00
23921	Apr 13, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23922	Apr 14, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23923	Apr 15, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23924	Apr 16, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
23925	Apr 19, 2026	Travel to/from Capital	Edmonton		X	X	43.81	2.19	46.00
23926	Apr 20, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23927	Apr 21, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23928	Apr 22, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
23929	Apr 23, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
							649.52	32.48	682.00

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

MP60708 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP60708
Description	May 2026 - Per-Diems
Claimant	Justin Wright
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Justin Wright)
Date Submitted	June 2, 2026
Date Received	June 3, 2026
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
24730	May 3, 2026	Travel to/from Capital	Edmonton		X	X	43.81	2.19	46.00
24731	May 4, 2026	60 km from Perm. Res.	Edmonton	X	X		29.52	1.48	31.00
24732	May 5, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
24733	May 6, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
24734	May 7, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
24735	May 10, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
24736	May 11, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
24737	May 12, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
24738	May 13, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
24739	May 14, 2026	60 km from Perm. Res.	Edmonton	X	X	X	56.19	2.81	59.00
24740	May 15, 2026	60 km from Perm. Res.	CALGARY	X	X	X	56.19	2.81	59.00
24741	May 19, 2026	60 km from Perm. Res.	Edmonton, CALGARY		X	X	43.81	2.19	46.00
24742	May 20, 2026	60 km from Perm. Res.	CALGARY	X	X	X	56.19	2.81	59.00
24743	May 21, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
24744	May 22, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
24745	May 25, 2026	60 km from Perm. Res.	KANANASKIS		X	X	43.81	2.19	46.00
24746	May 26, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
24747	May 27, 2026	Travel to/from Capital	Edmonton	X	X	X	56.19	2.81	59.00
							947.61	47.39	995.00

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

MR59433 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR59433
Description	APRIL 2026 ACCOMMODATION
Claimant	Justin Wright
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Justin Wright)
Date Submitted	March 31, 2026
Date Received	April 1, 2026
Mailing Address	

Month	Year	Monthly Claim Amount
April	2026	2200.00
	Grand Total	2200.00

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

MR60188 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR60188
Description	MAY 2026 ACCOMMODATION
Claimant	Justin Wright
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Justin Wright)
Date Submitted	May 4, 2026
Date Received	May 5, 2026
Mailing Address	

Month	Year	Monthly Claim Amount
May	2026	2200.00
	Grand Total	2200.00

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

MR60706 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR60706
Description	JUNE 2026 ACCOMMODATION
Claimant	Justin Wright
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Justin Wright)
Date Submitted	June 2, 2026
Date Received	June 3, 2026
Mailing Address	

Month	Year	Monthly Claim Amount
June	2026	2200.00
	Grand Total	2200.00

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

MR60784 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR60784
Description	APRIL, MAY, JUNE 2026 AJUSTMENT
Claimant	Justin Wright
Employee Number	
Constituency	Cypress-Medicine Hat 57 (Justin Wright)
Date Submitted	June 12, 2026
Date Received	June 12, 2026
Mailing Address	

Month	Year	Monthly Claim Amount
June	2026	35.00
May	2026	35.00
April	2026	35.00
	Grand Total	105.00

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

VF36955 - Vendor Payment Submission Form

Hosting - \$84.5 + GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Hosting - Individual Stakeholder(s)

EDMONTON, AB T6A 1G1
780 250 4500
WWW.NONE.COM

3-Apr-2026 11:10:06a.m.
Transaction 031501

Turkey Bacon Bliss Club Sandwich \$15.00
Multigrain \$0.00 to go, chris

California Chicken Wrap \$13.00 stu

Chicken Caesar Wrap \$13.00 Danl

BYO Pizza 10" \$0.00
3 Topping 10" \$18.00
Pepperoni \$0.00
Ham \$0.00
Green Pepper \$0.00 Joe

Famous Rueben \$14.00 to go, lindsey

Subtotal \$73.00
GST \$3.65
Total \$76.65
Tip \$11.50
\$88.15

CREDIT CARD SALE
MASTERCARD

Retain this copy for statement validation

3-Apr-2026 11:14:19a.m.
\$88.15 | Method: EMV
Mastercard XXXXXXXXXX
JUSTIN WRIGHT
Reference ID: 610300531241
Auth ID:
MID: *****0923

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 - \$9.62+GST

Ralph's

RALPH'S TEXAS BAR & STEA
1249 TRANS CANADA WAY SE
MEDICINE HAT, AB T1B1H9
4035276262

SALE

Server #: 001492 jenni

MID: 6659613

TID: 003

Batch #: 139001

05/19/26

APPR CODE: [REDACTED]

MASTERCARD

***** [REDACTED]

REF#: 00000001

RRN: 00000001

18:13:32

Chip

/

AMOUNT	\$7.90
TIP	\$2.10
TOTAL	\$10.00

APPROVED

Mastercard

AID: A0000000041010

TVR: 00 00 00 80 00

TSI: E8 00

BY ENTERING A VERIFIED PIN
CARDHOLDER AGREES TO PAY ISSUER
SUCH TOTAL IN
ACCORDANCE WITH ISSUER'S
AGREEMENT
WITH CARDHOLDER

THANK YOU! / MERCI!

CUSTOMER COPY

Ralph's Texas Bar & Steakhouse Ltd.

05/19/2026 06:11 PM

842837

#	Item	Price
1	Seal 1	
1	Caribbean Chicken	4.00
1	Spicy Pasta	3.50
	Subtotal	7.50
	Tax	7.50
	Total	\$ 7.90

Ralph's Texas Bar & Steak House Ltd
1249 Trans Canada Way SE
11B 1H9 Medicine Hat
403 527 6262
862408226
<http://ralphsbars.com>



Medicine Hat #593

2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8

247221 SQUARE BARS	13.49
247221 SQUARE BARS	13.49
247221 SQUARE BARS	13.49
247221 SQUARE BARS	13.49
1704012 WELCH'S 60CT	16.49 G
1704012 WELCH'S 60CT	16.49 G
1704012 WELCH'S 60CT	16.49 G
1704012 WELCH'S 60CT	16.49 G
1704012 WELCH'S 60CT	16.49 G
1704012 WELCH'S 60CT	16.49 G
1704012 WELCH'S 60CT	16.49 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1853145 WELCH'S 36CT	16.99 G
1988987 KITKAT CAR	18.99 G
1988987 KITKAT CAR	18.99 G
1988987 KITKAT CAR	18.99 G
1988987 KITKAT CAR	18.99 G
1988987 KITKAT CAR	18.99 G
4227932 SUNRYPE 72CT	18.99 G
4227932 SUNRYPE 72CT	18.99 G
4227932 SUNRYPE 72CT	18.99 G
4227932 SUNRYPE 72CT	18.99 G
4227932 SUNRYPE 72CT	18.99 G
4227932 SUNRYPE 72CT	18.99 G
2942699 NESTLE 130CT	27.99 G
2942699 NESTLE 130CT	27.99 G
2942699 NESTLE 130CT	27.99 G
2942699 NESTLE 130CT	27.99 G
2942699 NESTLE 130CT	27.99 G
366145 MOTT'S FRUIT	13.99 G
366145 MOTT'S FRUIT	13.99 G
366145 MOTT'S FRUIT	13.99 G
366145 MOTT'S FRUIT	13.99 G
2778066 LINDT 900G	29.99 G
2067426 TPD/LINDT	7.00-G
2778066 LINDT 900G	29.99 G
2067426 TPD/LINDT	7.00-G
2778066 LINDT 900G	29.99 G
2067426 TPD/LINDT	7.00-G
2778066 LINDT 900G	29.99 G
2067426 TPD/LINDT	7.00-G

VOID

2778066 LINDT 900G 29.99-G

VOID

2067426 TPD/LINDT 7.00 G

VOID

2942699 NESTLE 130CT 27.99-G

VOID

366145 MOTT'S FRUIT 13.99-G

VOID

1853145 WELCH'S 36CT 16.99-G

VOID

4227932 SUNRYPE 72CT 18.99-G

VOID

1853145 WELCH'S 36CT 16.99-G

SUBTOTAL 650.65

TAX 29.83

**** TOTAL 680.48

XXXXXXXXXX

ACCT: MASTERCARD

REFERENCE #: 0010015120 C

AUTH #: 2026/05/08 09:19:07

Invoice Number: 002512

Purchase - Mastercard

A0000000041010

0000008000 E800

01 APPROVED - THANK YOU 027
AMOUNT: \$680.48

IMPORTANT - retain this copy
for your records
CUSTOMER COPY

MasterCard 680.48
CHANGE 0.00

G GST 5% 29.83
TOTAL NUMBER OF ITEMS SOLD = 35
TOTAL DISCOUNT(S) \$ 21.00
2026/05/08 C 19:05 593 2 21 33



22059300200212605080919

OF: Name: KAYLEEN S

Thank You!
Please Come Again

G = GST P=PST
GST #121476329RT
Whse:593 Trm:2 Trn:21 OP:33

Items Sold: 35
UN 2026/05/08 09:19



Legislative Assembly of Alberta
VF37137 - Vendor Payment Submission Form

Hosting - \$106.89+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

Blowers & Grafton Whyte Ave
10550 82 Ave NW
Edmonton, AB T6E 2A4
Phone (780) 250-3663

5/26/2026 9:48:11 PM
Order Id: AAAJKNPEACAK
Table 302:2:2
Employee: Steph5424

1 Fishermans Feast	\$49.95
1 Steak Sandwich	\$27.95
2 Fish Taco (#5)	\$10.00
1 French Fries	\$6.00
1 Gravy	\$2.00
Sub Total	\$95.90
Food on Us	-\$6.00
Gst Tax	\$4.50
Order Total	\$94.40
Balance Due	\$94.40

GST# 748312204 r10001

TRANSACTION REQUIRED
BLOWERS AND GRAFTON
EDMONTON
10550 82 AVE NW
EDMONTON AB
T6E2A4

Purchase
May 26, 2026
MASTERCARD

Entry: Chip (C)
Ref# 852 0TLOFY164YXQ8H4
Auth#: Response: 01 02 /
Order: MGO1779853777640
Username: steph

Amount \$ 94.40
Tip \$ 16.99
Total \$ 111.39

A0000000041010 Mastercard
FVR 0000008000 TSI ed00

Approved
VERIFIED BY PIN

Important: Retain this copy for
your record

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
VF37340 - Vendor Payment Submission Form

Hosting - \$25.98+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies



Medicine Hat #593
2350 Box Springs Blvd
Medicine Hat, AB T1C 0C8

50646 SMALL PLATES 12.99 G
50646 SMALL PLATES 12.99 G

SUBTOTAL 25.98
TAX 1.30
TOTAL 27.28

XXXXXXXXXX
ACC: MASTERCARD
REFERENCE #: 0010011660 C
AUTH #: 2026/05/31 09:49:11
Invoice Number: 003166
Purchase - Mastercard
#0000000041010
0000008000 E800

GI APPROVED - THANK YOU 027
AMOUNT: \$27.28

IMPORTANT - retain this copy
for your records
CUSTOMER COPY

MasterCard 27.28
CHANGE 0.00

5 GST 5% 1.30
TOTAL NUMBER OF ITEMS SOLD = 2
2026/05/31 09:49:11 593 3 22 38



38 Name: JOANNE R

Thank You!
Please Come Again

G = GST P=PST
GST #121476329RT
Whse:593 Trm:3 Trn:22 OP:38

Items Sold: 2
2026/05/31 09:49

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
VF37340 - Vendor Payment Submission Form

Hosting - \$311.93

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

You're at home here.



SOUTH COUNTRY CO-OP
13th Ave Food Centre
30 - 13th Ave SE, Medicine Hat T1B 1E5
G.S.T.# R103619193

RETAG
MEMBER#: [REDACTED]
1/2 SLAB WHITE CAK 6 @ \$50.99 EA
ORG RASPBERRIES
VERTISED SPECIAL
BALANCE DUE \$311.93
TRANSACTION RECORD

E: Purchase
I: MASTERCARD \$ 311.93
CARD NUMBER: ***** [REDACTED]
E/TIME: 06/01/2026 10:45:04
REFERENCE #: 0010015580 C
TERM: 66339217
AUTHOR.# : [REDACTED]
A0000000041010
R: 0000008000
T 1.800
Mastercard

01 APPROVED - THANK YOU 027

IMPORTANT:
tain this copy for your records

CUSTOMER COPY

MASTERCARD \$311.93
Auth Code = [REDACTED]
CHANGE \$0.00
TOTAL TAX \$0.00

Member Number [REDACTED]

00215 #2529 10:43:29 1JUN2026
S01691 R005

Thank You For Shopping
SOUTH COUNTRY CO-OP!
You're At Home Here!
Enriching Lives and
Communities for
70 years!

*cakes
Senior
week*

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
VF37340 - Vendor Payment Submission Form

Hosting - \$161.70+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies



Boston Pizza #173
Medicine Hat
0015 Table 33 #Party 6
ADELLA H GYRCK: 6 12:44 0015620020

10.00	10.00
10.00	10.00
4.29	4.29
3.99	3.99
18.78	18.78
25.49	25.49
17.99	17.99
18.99	18.99
18.99	18.99
0.00	0.00
0.00	0.00
0.00	0.00
18.25	18.25
0.00	0.00
Sub Total:	134.75
GST:	6.74
00 15 12:44 TOTAL:	141.49

THANK YOU
GST # 894648450RT003
PLEASE PAY SERVER

TELL US HOW WE DID!
We value your feedback and time.
Complete our SUPER SHORT SURVEY and
tell us how we are doing!!

Keep this receipt and visit
TellBostonPizza.com

FOLLOW US ON FACEBOOK AND INSTAGRAM

Your Survey is below:
52311-6
This code will expire in 28 days
COME JOIN US FOR APPY HOUR

Gratuity 26.95
AMOUNT 168.44

** RE-PRINT **

BP173 - Medicine Hat
1751 STRACHAN RD SE
Medicine Hat, AB
T1B 4V7

CREDIT SALE

06-15 12:44
TABLE # 362
CASH REF 0015620020
00000002
33
15
CODE
METHOD
CARD

15
141.49
26.95
APPROVED AMOUNT 168.44

001 APPROVED

VERIFIED BY PIN

Card card A0000000041010

CUSTOMER COPY

STAKE
MLA
STOP

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
VF37340 - Vendor Payment Submission Form

Hosting - \$80.47+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

Ralph's
Thank you!
Ralph's Sports Pub

Print 9 06/19/2026 03:18 PM
#0 348675
Receipt
Item Price
1 Sirloin 6oz 19.50
* Onion Rings 2.00
1 Steak Salad 23.50
1 Sirloin 6oz 19.50
Subtotal 66.50
Tax 1.35
Total \$ 69.85

Ralphs Texas Bar & Steak House Ltd.
1249 Trans Canada Way SE
1H9 Medicine Hat
S5T 6Z6
408226
<http://ralphsbar.com/>

RALPH'S TEXAS BAR & STEA
1249 TRANS CANADA WAY SE
MEDICINE HAT, AB T1B1H9
4035276262

SALE

Server #: 007178 7178
MID: 6659613
TID: 004 REF#: 00000013
Batch #: 170001 RRN: 00000013
06/19/26 15:20:10
APPR CODE:
MASTERCARD Chip

AMOUNT \$69.85
TIP \$13.97
TOTAL \$83.82

APPROVED

Mastercard
AID: A0000000041010
TVR: 00 00 00 80 00
TSE: E8 00

BY ENTERING A VERIFIED PIN
CARDHOLDER AGREES TO PAY ISSUER
SUCH TOTAL IN
ACCORDANCE WITH ISSUER'S
AGREEMENT
WITH CARDHOLDER

THANK YOU! / MERCI!

CUSTOMER COPY

STALEY
MHA
John

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
VF37343 - Vendor Payment Submission Form

Hosting - \$152.79+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

Ralph's

Ralph's Sports Pub

Print # 06/16/2026 05:51
#5 340170
Karyssa B
Item Price
1 Soda Pop 3.50
1 Ralph's Wings 18.50
1 Buffalo Chicken Dip 18.00
1 Soda Pop 3.50
1 Steak Sandwich Special 6oz 15.99
1 Steak Sandwich Special 6oz 15.99
1 Steak Sandwich Special 6oz 15.99
1 Side of Salsa 4.00
1 Taco 4.00
1 Steak Sandwich Special 6oz 15.99
1 Steak Sandwich Special 6oz 15.99
Subtotal 132.00
Tax 6.60
Total \$ 138.60

Ralph's Texas Bar & Steak House Ltd.
1249 Trans Canada Way SE
Medicine Hat T1B1H9
403.527.6262
862.408.126
http://ralphsbar.com/

RALPH'S TEXAS BAR & STEAK
1249 TRANS CANADA WAY SE
MEDICINE HAT, AB T1B1H9
4035276262

SALE

Server #: 001536
MID: 6659613
TID: 002 REF#: 00000023
Batch #: 167001 RRN: 00000023
06/16/26 19:30:44
APPR CODE:
MASTERCARD Chip

TIP \$138.60
TOTAL \$20.79
\$159.39

APPROVED

Mastercard
AID: A0000000041010
TVR: 00 00 00 80 00
TSI: E8 00

BY ENTERING A VERIFIED PIN
CARDHOLDER AGREES TO PAY ISSUER
SUCH TOTAL IN
ACCORDANCE WITH ISSUER'S
AGREEMENT
WITH CARDHOLDER

THANK YOU! / MERCI

CUSTOMER COPY

STAKZKLODER
+
MLA

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
VF37343 - Vendor Payment Submission Form

Hosting - \$99.67+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

**Paradise Valley Golf
Course**
90 Gehring Rd SW
Medicine Hat, AB
Canada T1B 4W1
GST #: 10032 0258

Order #5426241
Date June 21, 2026 05:21 PM
Customer
Register: Snack Staff, Destinee
Shack M

BAY 3
Seat 1

Item	Qty	Price
Valley Nachos	1	\$ 23.00
Large Nacho		
Add Beef	1	\$ 4.00
Appetizer Platter	1	\$ 38.00
Chicken Strips	1	\$ 17.00
Fountain Pop	1	\$ 3.33

Subtotal \$ 85.33
GST - AB \$ 4.27
Tip \$ 14.34
Total \$ 103.94

Mastercard \$ 103.94



Printed: 2026-06-21 05:22 PM

Pharmacist's

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

VF37137 - Vendor Payment Submission Form

Hosting - \$62.42+GST

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

Cypress-Medicine Hat

From: no-reply@lpepay.com
Sent: Friday, May 1, 2026 12:40 PM
To: Cypress-Medicine Hat
Subject: LOCAL Medicine Hat - Receipt
Categories: FMAS, FINANCIAL MGMT, 4 TERI TO FOLLOW UP

LOCAL PUBLIC
EATERY
579 3RD STREET SE
MEDICINE HAT, AB
403.487.5600

Chk 1472
Tbl 122/1 Gst 2
May 01, 26 11:51AM Addison

1 POP 4.50
1 BLACKENED CHICKEN SAN 22.00
1 SUB ONION RINGS 2.50
1 CALABRIAN CAESAR CHX 23.50

SUBTOTAL 52.50
GST 2.63
TOTAL @12:34PM 55.13

PAYMENT 0.00
AMOUNT DUE 55.13

Transaction ID 4132633
Total 55.13
Tip 9.92
MASTERCARD 65.05

Your LPE League Points Code
 ██████████
Happy Hour, Every Day
2 - 5PM and 9 - Close

Tag Us: @LOCALMedHat
Talk To Us: info@localmedhat.com

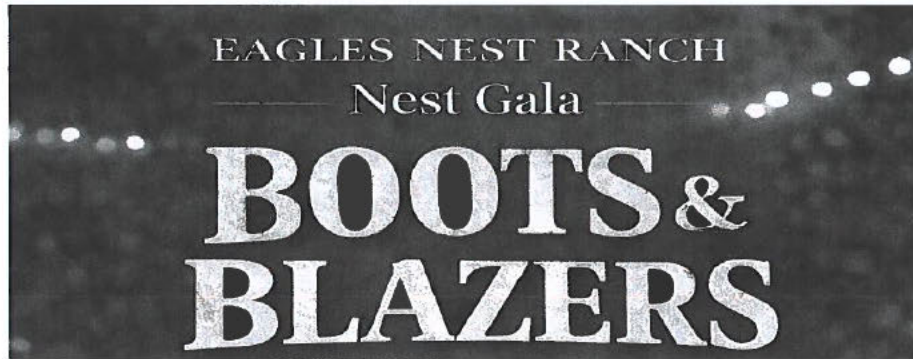
I certify that the items listed on this invoice were received as ordered, have not been submitted for payment before and are now approved for payment.



Legislative Assembly of Alberta

VF36955 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Hosting - Individual Stakeholder(s)



2 x Tickets

Order total: 210.00 CAD



Friday, May 8, 2026 from 6:00 PM to 10:00 PM (MT)

[Add to Google](#) · [Outlook](#) · [iCal](#) · [Yahoo](#)



Medalta in the Historic Clay District

713 Medalta Avenue Southeast

Medicine Hat, AB T1A 3L8

Canada

[View on map](#)

Questions about this event?

[Contact the organizer](#) [View event details](#)

Order Summary

Order #14666364913 - April 13, 2026

CA\$210.00 paid by MasterCard

Appears on your card statement as EB *The Nest Gala-Boot

2

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

VF36955 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Hosting - Individual Stakeholder(s)

Event tickets for MLA and a guest \$200 + GST

Justin Wright	1 x Seat Ticket	CAN\$100.00
Justin Wright	1 x Seat Ticket	CAN\$100.00
GST		10.00 CAD

210.00 CAD

View and manage your order in your Eventbrite account.
Refund Policy: Contact the organizer to request a refund. Eventbrite's fee is nonrefundable. [Learn More](#)
Contact the organizer for any questions related to this purchase.
This order is subject to Eventbrite Terms of Service and Privacy Policy, and Cookie Policy.

Ticket Information

Ticket #1: Seat Ticket - 105.00 CAD

Justin Wright
cypress.medicinehat@assembly.ab.ca

Ticket #1: Seat Ticket - 105.00 CAD

Justin Wright
cypress.medicinehat@assembly.ab.ca

Questions

First Name

Justin

Last Name

Wright

Email

cypress.medicinehat@assembly.ab.ca



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

VF36956 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

BILD Medicine Hat

Box 975 ST. Main
Medicine Hat AB T1A 0A0
eo@bildmedhat.com
http://bildmedhat.com
GST/HST Registration No.: 813947892 RT0001



INVOICE

BILL TO
Hon Justin Wright

INVOICE
DATE 2037
TERMS 16/04/2026
DUE DATE Net 30
16/05/2026

DESCRIPTION	TAX	QTY	RATE	AMOUNT
Gala Tickets	GST	2	149.00	298.00
SUBTOTAL				298.00
GST @ 5%				14.90
TOTAL				312.90
BALANCE DUE				\$312.90

Event Tickets for MLA Wright and constituency staff \$298.00 + GST

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

VF36956 - Vendor Payment Submission Form

Member Name	Justin Wright
Claimant	Justin Wright
Expense Category	Office supplies

Cypress-Medicine Hat

From: DoNotReply@billing-notification.com
Sent: Monday, April 27, 2026 11:04 AM
To: Cypress-Medicine Hat
Subject: CANADIAN HOME BUILDERS AS - Transaction Receipt for \$312.90
Categories: FINANCIAL MGMT, 4 TERI TO FOLLOW UP

CHBA Medicine Hat
5 - 1311 Trans Canada Way SE
Medicine Hat, AB T1B 1J1
403-977-6722

Term ID: 001

Sale - Approved

Date 04/27/26 Time 13:00:50
Method of Payment MasterCard
Entry Method Manual
Account # XXXXXXXXXXXX [REDACTED]
Order ID Inv 2037 BILD Gala
Order Description: null
Approval Code [REDACTED]
Amount \$312.90

Customer Copy

This message is confidential and subject to terms at: <https://www.jpmorgan.com/emaildisclaimer> including on confidential, privileged or legal entity information, malicious content and monitoring of electronic messages. If you are not the intended recipient, please delete this message and notify the sender immediately. Any unauthorized use is strictly prohibited.

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.