

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2024-25
001 - Calgary-Acadia - MLA Diana Batten
For Expenses Processed Oct 1 - Dec 31, 2024

	Budget	Reimbursed This Qtr	Reimbursed To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$			
MLA Parking Cap - \$	\$900.00	\$71.73	\$120.35
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			\$16.07
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$		\$1,507.73	\$3,463.07
Accommodation			
Edmonton Accommodation Allowance (\$26,400.00/yr max)	\$23,160.00	\$6,330.00	\$17,910.00
Travel Accommodations Allowance		\$277.68	\$460.47
Travel Accommodations Allowance (days; 10 max) - NF	10.0	2.0	3.0
Other			
Hosting - \$		\$164.72	\$471.35
Event Tickets Disclosable - \$		\$1,024.36	\$1,024.36
Non-Financial Reporting			

Use of Private Automobile (50.5 cents per km)			
Constituency Travel MLA (KM) - NF	35,000.0	1,265.6	1,569.6
Constituency Travel Staff (KM) - NF			
Total Constituency Travel (KM) - NF	<u>35,000.0</u>	<u>1,265.6</u>	<u>1,569.6</u>
Adverse Driving Conditions			
Special Trips (5 trips per year) - NF	5.0		2.0
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	6.0	15.0
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 incurred.

The reader should take this into account when reviewing the disclosure



Legislative Assembly of Alberta ME49644 - Members' Other Expenses Claim Form

Receipt Description	Parking Stakeholder Event
Member Name	Diana Batten
Claimant	Diana Batten
Expense Category	Member Parking

HONK Parking Receipt

HONK <noreply@honkmobile.com>
To: Diana Batten

Reply Reply All Forward

Wed 11/6/2024 10:36 AM

Follow up. Start by Wednesday, November 6, 2024. Due by Wednesday, November 6, 2024.
If there are problems with how this message is displayed, click here to view it in a web browser.

Thank you for using HONK!

START DATE: 10:36 AM, Nov 6, 2024
END DATE: 12:36 PM, Nov 6, 2024

Vehicle: [REDACTED]
Location: L1059 - Thornton Court - 5, Thornton Court NW (Zone 71059) Operated by Precise ParkLink (West) Ltd.

INVOICE #CSIAPCHF

Parking (Tax Incl)	\$18.00
GST	\$0.86
Service Fee	\$0.50
Total	\$18.50

Charged to MASTERCARD [REDACTED]
Paid on Nov 6, 2024 at 10:36 AM

Fees are for use of parking space(s) only. We are not responsible for theft or damage to vehicle or contents howsoever caused.

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
ME49644 - Members' Other Expenses Claim Form

Receipt Description	Parking Stakeholder Event
Member Name	Diana Batten
Claimant	Diana Batten
Expense Category	Member Parking

Fwd: hangTag Parking Receipt

DB Diana Batten [Redacted]
 To Diana Batten

Reply Reply All Forward [Icons]

Fri 11/8/2024 4:22 PM

If there are problems with how this message is displayed, click here to view it in a web browser.

Translate message to: English Never translate from: French Translation preferences



hangTag™ parking receipt

Please click [here](#) to access your session details and extend your parking.

Here are your receipt details for your session on Nov 01, 2024:

Account	Receipt #
Guest	RC2793700

Parking session details

Start	End
Nov 01, 2024 11:41 AM	Nov 01, 2024 02:41 PM
Lot information	Vehicle
505 5th Avenue SW	[Redacted]
505 5 Ave SW	

Payment details

Subtotal
\$36.00
 Fees
\$0.95
 Taxes
\$1.85
Total
\$38.80

[Redacted]
\$38.80

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
ME49644 - Members' Other Expenses Claim Form

Table with 2 columns: Receipt Description, Member Name, Claimant, Expense Category. Values include Parking Stakeholder Event, Diana Batten, Member Parking.

ParkPlus Virtual Pay Machine Receipt

do-not-reply@parkplus.ca
To Diana Batten

Reply, Reply All, Forward buttons

Thu 10/17/2024 8:

If there are problems with how this message is displayed, click here to view it in a web browser.

Parking Payment Information:

Date: 2024-Oct-17 08:50
Receipt Number: 2664479
Bank Transaction ID: 375470-0_452
Bank Auth Number:
Total Amount: 18.00 CAD
Zone Number: 8510
Licence Plate:
Duration: 2024-Oct-17 08:50 to 2024-Oct-18 01:59

Company Information:

Calgary Parking 620 9 Avenue S.W.
403-537-7000 Calgary AB, T2P 1L5
www.calgaryparking.com
GST number: 119457869

Thank you,
Calgary Parking

Please do not reply to this email as this is an automated email system and we are unable to respond from this address. If you need assistance, please email parkplus@calgary.ca.

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

MP49643 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP49643
Description	October 2024 - Per-Diems
Claimant	Diana Batten
Employee Number	[REDACTED]
Constituency	Calgary-Acadia 01 (Diana Batten)
Date Submitted	November 8, 2024
Date Received	November 12, 2024
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
11352	Oct 8, 2024	60 km from Perm. Res.	Lethbridge		X	X	41.90	2.10	44.00
11353	Oct 9, 2024	60 km from Perm. Res.	Lethbridge	X	X	X	54.29	2.71	57.00
11354	Oct 10, 2024	60 km from Perm. Res.	Lethbridge	X	X	X	54.29	2.71	57.00
11355	Oct 21, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
11356	Oct 22, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
11357	Oct 23, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
11358	Oct 28, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
11359	Oct 29, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
11360	Oct 30, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
11361	Oct 31, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							530.51	26.49	557.00

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

MP50182 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP50182
Description	November 2024 - Per-Diems
Claimant	Diana Batten
Employee Number	[REDACTED]
Constituency	Calgary-Acadia 01 (Diana Batten)
Date Submitted	December 9, 2024
Date Received	December 9, 2024
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
12429	Nov 4, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12430	Nov 5, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12431	Nov 6, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12432	Nov 7, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12433	Nov 18, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12434	Nov 19, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12435	Nov 20, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12436	Nov 21, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12437	Nov 25, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12438	Nov 26, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12439	Nov 27, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12440	Nov 28, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12441	Nov 29, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							705.77	35.23	741.00

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

MP50335 - Members' Travel Expense Per-Diems Expense Claim Form

Form Type	Members' Travel Expenses Per-Diems Claim
Form ID	MP50335
Description	December 2024 - Per-Diems
Claimant	Diana Batten
Employee Number	[REDACTED]
Constituency	Calgary-Acadia 01 (Diana Batten)
Date Submitted	December 17, 2024
Date Received	December 18, 2024
Mailing Address	[REDACTED]

B = Breakfast | L = Lunch | D = Dinner

ID	Date	Reason for Travel	Meal Purchase Location(s)	B	L	D	Subtotal	G.S.T.	Total
12594	Dec 2, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12595	Dec 3, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12596	Dec 4, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12597	Dec 5, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
12598	Dec 6, 2024	Travel to/from Capital	Edmonton	X	X	X	54.29	2.71	57.00
							271.45	13.55	285.00

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

MR49248 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR49248
Description	October 2024
Claimant	Diana Batten
Employee Number	[REDACTED]
Constituency	Calgary-Acadia 01 (Diana Batten)
Date Submitted	October 21, 2024
Date Received	October 22, 2024
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
October	2024	1930.00
	Grand Total	1930.00

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

MR50179 - Members' Temporary Accommodation Allowance Claim Form

Form Type	Members' Temporary Accommodation Allowance Claim
Form ID	MR50179
Description	Nov & Dec 2024
Claimant	Diana Batten
Employee Number	[REDACTED]
Constituency	Calgary-Acadia 01 (Diana Batten)
Date Submitted	December 9, 2024
Date Received	December 9, 2024
Mailing Address	[REDACTED]

Month	Year	Monthly Claim Amount
December	2024	2200.00
November	2024	2200.00
	Grand Total	4400.00

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

ME49642 - Members' Other Expenses Claim Form

Receipt Description	Lethbridge Stakeholder Mtg Hotel Oct
Member Name	Diana Batten
Claimant	Diana Batten
Expense Category	Other



INVOICE

Sandman Signature Lethbridge Lodge

Diana Batten
[Redacted]

Print Date 10/10/24
Page No. 1 of 2
Room No. 418
Arrival 10/08/24
Departure 10/10/24
Conf. No. 510064548
Folio No. [Redacted]
GST No. 121767065 RT 0001

Company Name: Government - Federal*

Date	Description	Charges CAD	Credits CAD
10/08/24	Government Rate	129.00	
10/08/24	Room - DMF	2.58	
10/08/24	Room - GST	6.58	
10/08/24	Tourism Levy	5.26	
10/08/24	ECO Fees	2.00	
10/08/24	GST - ECO Fees	0.10	
10/09/24	Government Rate	129.00	
10/09/24	Room - DMF	2.58	
10/09/24	Room - GST	6.58	
10/09/24	Tourism Levy	5.26	
10/09/24	ECO Fees	2.00	
10/09/24	GST - ECO Fees	0.10	
10/10/24	MasterCard XXXXXXXXXXXX [Redacted]		291.04
Total		291.04	291.04
Balance		0.00	CAD

Net Amount 258.00 CAD
Room - GST 13.36 CAD
Tourism Levy 10.52 CAD
Room - DMF 5.16 CAD
ECO Fees 4.00 CAD
Total incl. vat 291.04 CAD

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

Guest Signature

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

I 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
SE49413 - Staff Other Expenses Claim Form

Hosting - \$58.97

Receipt Description	Tim Hortons
Member Name	Diana Batten
Claimant	Elladee Windsor
Expense Category	Other

Tim Hortons.

Restaurant #6540
8835 McLeod Trail SW
Calgary, AB T2U 2W3

Take Out
Order #: 195

1 Dnt - Asrt Dozen	\$13.99
1 Take 12 Original Blend	\$19.99
1 Take 12 Hot Chocolate	\$24.99

Subtotal:
GST:
Total Tax:
Grand Total:
Visa:
Change Due:
Cashier: SHIFT 1

BST # 784166340RT0001
10-26-2024 09:30:27 AM
Receipt #: 161733001
Order ID: 165086401

Enjoy any French Vanilla Hot chocolate,
or cold coffee for \$1.
Visit timhortons.ca and let us know how we did.

Survey Code:
9466-0940-1026-5251-40039
Upon survey completion enter validation code
here:

And return this receipt to a participating Tim Hortons
in Canada to receive offer.
*Plus tax. See website for full Terms and Conditions

VISA *****
Card Entry:TA#_ICC Sequence:000124
Trans Type:Purchase \$64.58
Term #: 201
REF #: 00000124
Application Label: Visa CREDIT
AID #: A0000000031010
TVR #: 0000000000
TSI #: 0000
Auth # [redacted] MSIPS NO. Approved

Guest Copy
RECEIPT REPRINT

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



Legislative Assembly of Alberta SE49833 - Staff Other Expenses Claim Form

Receipt Description	Water Bottles
Member Name	Diana Batten
Claimant	Elladee Windsor
Expense Category	Other

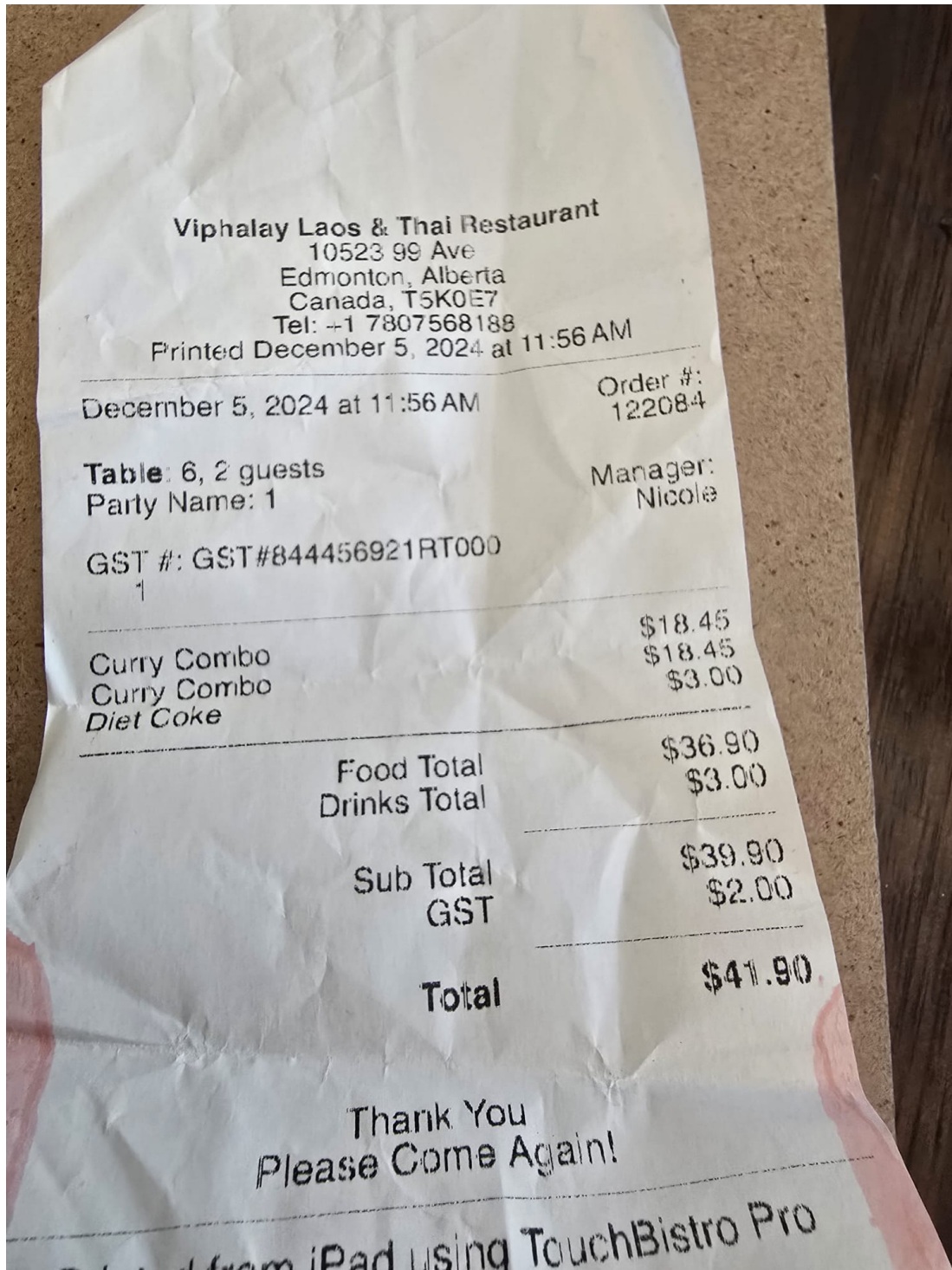


I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



ME50185 - Members' Other Expenses Claim Form

Receipt Description	Stakeholder Mtg
Member Name	Diana Batten
Claimant	Diana Batten
Expense Category	Hosting - Individual Stakeholder(s) Hosting Purpose - Shadow Ministry Engagement



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

SE50349 - Staff Other Expenses Claim Form

Receipt Description	Stakeholder Event
Member Name	Diana Batten
Claimant	Marnie McCormack
Expense Category	Other

1	Take 12 Original Blend	\$19.99
1	Take 12 Hot Chocolate	\$24.99
1	50 Assorted Timbits	\$9.99

Sous-total	\$54.97
Taxes	\$2.25
Total	\$57.22

Commande passée au

347 Southland Dr Calgary , Alberta T2J 3L4

Ce courriel de FidéliTim^{MC} a été envoyé à marniedmccormack@gmail.com par vos amis chez Tim Hortons® Canada. Vous recevez ce courriel à titre de membre du programme de fidélisation FidéliTim^{MC} auquel vous participez volontairement.

Si vous ne voulez plus recevoir ce genre de courriels de notre part, veuillez mettre à jour vos préférences [ici](#). Si vous voulez vous désabonner de tous les courriels que nous envoyons, veuillez cliquer [ici](#).

Tim Hortons :: 130, rue King Ouest, 3e étage :: Toronto ON M5X 1K6
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I hereby certify that the whole of the expenditure was incurred and that amounts claimed have not previously been paid to my staff or on their behalf.



Legislative Assembly of Alberta

VF29046 - Vendor Payment Submission Form

Member Name	Diana Batten
Claimant	Diana Batten
Expense Category	Other

Calgary-Acadia

From: Brown Paper Tickets <noreply-bpt@brownpapertickets.com>
Sent: Monday, September 23, 2024 12:22 PM
To: Calgary-Acadia
Subject: [Brown Paper Tickets] Order Confirmation

=====
 Email Contents
 =====
 1. Cart Overview
 2. Ticket Details
 3. Mailing List
 4. Contact Information
 =====

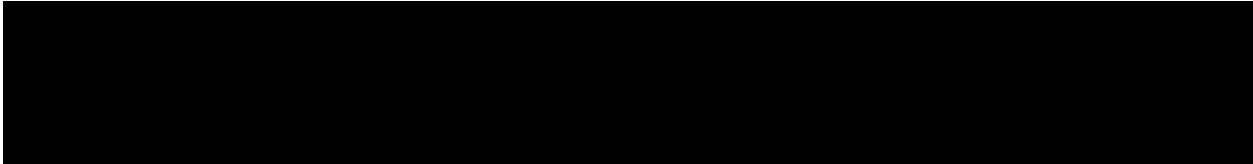
 1. Cart Overview

Your order is complete!

Confirmation Number: 46477882
 Purchase Date: Sep 23, 2024 11:15 AM
 Tickets Purchased: 2
 Amount Paid: CA\$224.36
 Payment Method: Mastercard

This transaction will appear on your credit card statement as "Brown Paper Tickets".

You can view event organizer contact information and venue address, make changes to your order, and more at



 2. Ticket Details

Ticket 1 (#A120149833)
 Event: Empowering Futures: A Gathering for Indigenous Child Welfare Sovereignty Start Date: Thu Oct 17, 2024 9:00 AM
 End Date: Thu Oct 17, 2024 4:00 PM Ticket Price: CA\$103.95 (General)
 Delivery: Will Call
 Will-Call Name: Diana Batten

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

VF29046 - Vendor Payment Submission Form

Member Name	Diana Batten
Claimant	Diana Batten
Expense Category	Other

Ticket 2 (#A120149834)
 Event: Empowering Futures: A Gathering for Indigenous Child Welfare Sovereignty Start Date: Thu Oct 17, 2024 9:00 AM
 End Date: Thu Oct 17, 2024 4:00 PM Ticket Price: CA\$103.95 (General)
 Delivery: Will Call
 Will-Call Name: Elladee Windsor

Note from the producer of Empowering Futures: A Gathering for Indigenous Child Welfare Sovereignty:
 Thank you for registering! More information will be sent to you before the event.

 3. Mailing List

Stay informed about new events and discount tickets in your area with the Brown Paper Tickets' Spam-Free Mailing List! Daily or weekly notices help you be the first to find out about the events that interest you and about last-minute discount ticket offers.

Customize your mailing list settings and subscribe at
<https://can01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.brownpapertickets.com%2Fmailinglist.html&data=05%7C02%7Ccalgary.acadia%40assembly.ab.ca%7C8af0afeba1a64e66370f08dcdcfcaa33%7C0e561a31ac5d43359765259b24d6a11a%7C0%7C0%7C638627125442800024%7CUnknown%7CTWFpbGZsb3d8eyJWlJoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C0%7C%7C%7C&sdata=FNZxYna00%2FxEsNBvCxBDcSntubjPcPkr6S2Ish24J%2FI%3D&reserved=0>

 4. Contact Information

Have questions about your order? Our staff is available to help with anything you may need!

Email: Support@BrownPaperTickets.com
 Phone: at 1-800-838-3006

Follow us on Twitter:
<https://can01.safelinks.protection.outlook.com/?url=http%3A%2F%2Ftwitter.com%2Fbptickets&data=05%7C02%7Ccalgary.acadia%40assembly.ab.ca%7C8af0afeba1a64e66370f08dcdcfcaa33%7C0e561a31ac5d43359765259b24d6a11a%7C0%7C0%7C638627125442828513%7CUnknown%7CTWFpbGZsb3d8eyJWlJoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C0%7C%7C%7C&sdata=vR59uBZvW8CUt%2B7a1OADUgDvDWFShpy5a5XdxwwqtU%3D&reserved=0>

Friend us on Facebook:
<https://can01.safelinks.protection.outlook.com/?url=http%3A%2F%2Ffacebook.com%2FBrownPaperTickets&data=05%7C02%7Ccalgary.acadia%40assembly.ab.ca%7C8af0afeba1a64e66370f08dcdcfcaa33%7C0e561a31ac5d43359765259b24d6a11a%7C0%7C0%7C638627125442847227%7CUnknown%7CTWFpbGZsb3d8eyJWlJoiMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6IjEhaWwiLCJXVCi6Mn0%3D%7C0%7C%7C%7C&sdata=JJBQvWu%2B0UVFGfwOB6ctiP%2BKh%2BIMfGyuVVRiDG2JC8%3D&reserved=0>

Subscribe to our mailing list to find out about new events and "last minute" discount tickets in your area:
<https://can01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.brownpapertickets.com%2Fmailinglist.html>

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

VF30228 - Vendor Payment Submission Form

Member Name	Diana Batten
Claimant	Diana Batten
Expense Category	Other



Attendance Receipt

October 07, 2024: 7:23 pm

Assembly of First Nations - Special Chiefs Assembly - Long-Term Reform of the First Nations Child and Family Services (FNCFS) Program
(October 16, 2024 - October 18, 2024)

Receipt #: 28-0000559

Event: Special Chiefs Assembly - Long-Term Reform of the First Nations Child and Family Services (FNCFS) Program, Calgary

Dates: Oct 16 - Oct 18, 2024

Name: Elladee Windsor

Date: October 07, 2024

Organization:

Method of Payment: Mastercard

Amount Due: \$800.00

<u>Participant</u>	<u>Type</u>	<u>Paid</u>
Diana Batten	Other Governments	\$800.00
		<hr/>
		\$800.00

HST#: 133649848RT0001

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.