

LEGISLATIVE ASSEMBLY OF ALBERTA
Member EDR 2016-17
020 - Calgary-Mccall - Sabir, Irfan
For Expenses Processed Oct 1 - Dec 31, 2016

	Budget	Used this Quarter	Used To-Date
Financial Reporting - \$ (Receipts attached)			
Transportation			
Fuel and Minor Maintenance - \$		\$488.58	\$1,695.71
MLA Parking Cap - \$	\$900.00		
Other Travel - Parking - \$			
Member Travel (overnight stay in constituency) - \$			
Taxi, Bus Travel - \$			
Vehicle Lease/ Rental (Edmonton or Calgary unlimited) - \$			
Member Travel (Meal Per Diems) - \$			
Accommodation			
Edmonton Accommodation Allowance (\$23,160.00/yr max)	\$23,160.00	\$5,790.00	\$17,370.00
Travel Accommodations Allowance			
Travel Accommodations Allowance (days; 10 max) - NF	10.0		
Other			
Hosting - \$		\$60.43	\$910.43
Non-Financial Reporting			
Use of Private Automobile (43.5 cents per km)			
Constituency Travel (Kilometres) - NF	35,000.0		
Special Trips (5 trips per year) - NF	5.0		
Travel To and From the Capital			
Travel by Air, Bus or Train (Unlimited Trips) - NF			
Use of a Private Automobile (52 trips per year) - NF	52.0		
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

Element Fleet Management



BFD290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 157 OF 254
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-20-I SABIR - - - - - - - -

CLIENT NO. NO DU CLIENT	
INVOICE DATE	11/01/16
DATE DE LA FACTURE	
INVOICE NO.	0006478695
NO DE LA FACTURE	

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORIZE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	SABIR				000444133120 10/09/16	SHELL CANADA INC CALGARY AB	UNLEADED REGULAR GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	55.2	1.04	54.59	2.73 2.73	57.32 57.32
					000444106285 10/01/16	IMPERIAL OIL CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	53.8	1.14	58.30	2.92 2.92	61.22 61.22
					000444314394 09/23/16	HUSKY OIL RED DEER AB	ETHANOL BLEND GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** SUBTOTAL / SOUS TOT DISCOUNT / RABAIS TOTAL / TOTAL	45.1	1.11	47.68	2.32 2.32	50.00 50.00 .45- 49.55
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE DISCOUNT / RABAIS TOTAL / TOTAL	154.1		160.57	7.97	168.54 .45- 168.09
	BKDN TOTALS / TOTAUX CODIFICATION 01-20				1		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	154.1		160.57	7.97	168.54 .45- 168.09
							BKDN TOTALS / TOTAUX CODIFICATION DISCOUNT / RABAIS TOTAL / TOTAL					168.54 .45- 168.09

Element Fleet Management



BDF290001

FLEET MANAGEMENT SERVICES DETAIL
DETAILS SERVICES DE GESTION DE PARC

PAGE - 155 OF 253
DE

CLIENT BREAKDOWN SUMMARY LEVEL / SOMMAIRE DE FACTURATION	
SUB-01-MEMBERS OF THE LEGISLATIVE ASSEMBLY DIV-20-I SABIR	
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-	-
-	-
-	-

CLIENT NO.	
NO DU CLIENT	
INVOICE DATE	10/01/16
DATE DE LA FACTURE	
INVOICE NO.	0006467039
NO DE LA FACTURE	

UNIT NO NO. D'UNITE	DRIVER NAME DRIVER ID. NOM DU CONDUCTEUR NO. DU CONDUCTEUR	V.I.N. NO. DE SERIE	CARD NO. NO. DE CARTE	KM AUTHORISE KM AUTORISE	REFERENCE NO ACTIVITY DATE NO. DE REFERENCE DATE DE LA TRANS.	SUPPLIER NAME SUPPLIER LOCATION NOM DU FOURNISSEUR POINT DE VENTE	CHARGE DESCRIPTION DESCRIPTION DES FRAIS	QTY QTE	UNIT COST COUT UNIT	EXTENDED PRICE TOTAL	GST-HST PST/QST TPS-TVH TVP/TVQ	TOTAL DUE MONTANT TOTAL DU
	SABIR				000442323217 09/12/16	SHELL CANADA INC CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	55.0	1.10	57.57	2.88 2.88	60.45 60.45
					000441876073 08/31/16	FEDERATED COOPERATIVES L MITED INNISFAIL AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	46.3	1.11	48.96	2.45 2.45	51.41 51.41
					000442606382 08/21/16	IMPERIAL OIL CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	53.2	1.11	56.21	2.81 2.81	59.02 59.02
					000442606381 08/18/16	IMPERIAL OIL EDMONTON AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	38.4	1.03	37.59	1.88 1.88	39.47 39.47
					000442606380 08/13/16	IMPERIAL OIL CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	50.9	1.18	57.16	2.86 2.86	60.02 60.02
					000442606379 08/06/16	IMPERIAL OIL CALGARY AB	UNLEADED PREMIUM GASOLINE GST-HST / TPS-TVH REF GST-HST / TPS-TVH REF ** REF NO TOT / TOT NO REF ** TOTAL / TOTAL	65.6	1.13	70.52	3.53 3.53	74.05 74.05
					UNIT TOTAL / TOT UNITE		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS TOT GST-HST / TOT TPS-TVH UNIT TOTAL / TOT UNITE	309.4		328.01	16.41	344.42
					BKDN TOTALS / TOTAUX CODIFICATION 01-20		FUEL QTY / QTE CARB TOT CHARGES / TOT FRAIS GST-HST/TPS-TVH	309.4		328.01	16.41	
							BKDN TOTALS / TOTAUX CODIFICATION					344.42

BLG871

GST-HST REG. NO / NO ENRG TPS-TVH R104164223
QST ID. NO / NO ID TVQ 1001439118



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Sabir, Irfan

Constituency: Calgary-McCall

Employee #: [REDACTED]

Date: 6/16/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Maximum of \$23,160 per fiscal year.

Fiscal Year:

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,930.00

x 12 = \$ 23,160.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

October 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Sabir, Irfan

Constituency: Calgary-McCall

Employee #: [REDACTED]

Date: 6/16/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually
Maximum of \$23,160 per fiscal year.

Fiscal Year:

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,930.00

x 12 = \$ 23,160.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

November 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016



Members' Temporary Accommodation Allowance Claim Form

Note to MLAs: Forms accessed online can be used to claim either the temporary residence accommodations allowance under sections 5 and 6 and meal expenses under section 7 of the *Members' Allowance Order*. Only claims supported by the required documentation will be processed. For the text of sections 5, 6, 7, and 8 of the *Members' Allowance Order*, see reverse. For information on form completion, go to OurHouse – Forms – Expense Claim Forms. Effective date: April 1, 2016

Member Name: Sabir, Irfan

Constituency: Calgary-McCall

Employee #: [REDACTED]

Date: 6/16/2016

Claim Type: Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually

Temporary Residence Accommodation Allowance in Edmonton - Claimed Annually
Maximum of \$23,160 per fiscal year.

Fiscal Year:

Have you provided documents evidencing your Temporary Residence i.e. lease agreement (Lease or Rental) or Certificate of Title (Own) to FMAS? If not, please attach.

☒ Yes

☐ No

Monthly Amount (maximum \$1,930 or less)

\$ 1,930.00

x 12 = \$ 23,160.00

Please Note: The Member is responsible for retaining all records which support the annual amount identified above.

Claim Payment Authorization (please check)

☒ 12 Monthly Payments

I authorize 12 monthly payments in the amount specified above for the entire fiscal year. This monthly amount is static for the entire fiscal year.

Please Note: The Member must advise the Clerk in writing of any changes to their permanent or temporary residence at the time it occurs.

December 2016

I certify that I have met the eligibility criteria (see back of form) for the Temporary Residence Accommodation Allowance and am authorizing that the amount specified above be paid each month during the fiscal period noted above. I acknowledge and agree to immediately notify the Clerk, in writing, if there are any changes to either my Permanent or Temporary Residence that may affect my eligibility to claim this allowance. Furthermore, I agree to immediately reimburse any accommodation allowance payments made to me during a period within which I was ineligible to receive these payments.

Member Signature

Updated April 2016

LEGISLATIVE ASSEMBLY OF ALBERTA
Personal Expense Claim Receipt Description

Member Name: Irfan Sabir

Claimant Name: Irfan Sabir

Expense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)

☐ Individual Stakeholder(s)

☒ Group: \$55.68 + GST

Purpose:

Tim Horton timbits & coffee for Curriculum Open house

Tim Hortons

Restaurant #4518
7171-80th Avenue NE
Calgary, AB T3J 5M1

1 Take 12 Original Blend	\$18.85
1 Take 12 Original Blend	\$18.85
1 50 Timbits	\$8.99
1 50 Timbits	\$8.99
Subtotal:	\$55.68
GST:	\$1.89 PST: \$0.00
GrandTotal:	\$57.57
Debit:	\$57.57
Change Due:	\$0.00

Take Out # 315 100 Cashier

Thanks for stopping by!

Tell us how we did at

www.telltinhortons.com 1-888-601-1616

Thu Nov 17, 2016 15:42:06

Receipt #: 7216673

GST#804302503RT0001

Account:	CHEQUING
Card Entry:TAP_ICC	Sequence:000038
Trans Type:Purchase	\$57.57
Merchant #:	030000085388
Term #:	203
Ref #:	00000038
Trace #:	00383844
Application Label:	Interac
AID #:	A0000002771010
TVR #:	8000008000
TSI #:	2800
	APPROVED

Guest Copy

REPRINT RECEIPT

LEGISLATIVE ASSEMBLY OF ALBERTA

Personal Expense Claim Receipt Description

Member Name: Irfan SabirClaimant Name: Irfan SabirExpense Category: Hosting

For hosting, select one:

☐ Individual Constituent(s)☐ Individual Stakeholder(s)☒ Group: \$4.75 + GST

Purpose:

Jugo Juice Cups for Curriculum Survey Open house

JUGO JUICE GENESIS CENTRE
Tbl:0 Ref:366203
Kaori Chk:358432
11/17/2016 4:23 pm

Jugo Classico SNK 4.75

SubTotal 4.75
.GST 0.24

Total 4.99

Cash 5.00

Amount Paid 5.00
Rounding 0.01

JUGO JUICE GENESIS CENTRE
Unit 110, 7555 Falconridge Blvd NE
Calgary, Alberta T3J 0C9
(587) 351-0957
GST# 817116908

Thanks for visiting Jugo Juice