



# MLA EXPENSE CLAIM

LEGISLATIVE ASSEMBLY

## LIVING ALLOWANCE

M.L.A. NAME Eileen Clarke DATE PREPARED September 4, 2018

FOR THE CONSTITUENCY OF Agassiz.

SEP 05 2018

### Authorized Temporary Residence Expenses

Date (M/D)	VENDOR	DESCRIPTION OF PURCHASE	For the month of <u>July</u>	For the month of <u>August</u>	For the month of <u>September</u>
<del>07-3</del>	<del>Evergreen One</del>	<del>- Rent</del>	<del>1740.00</del>		
08-3	Evergreen One	- Rent		1740.00	
09-4	Evergreen One	- Rent			1740.00
				1285.00*	1285.00*
			\$ <del>1740.00</del>	\$ <del>1740.00</del>	\$ <del>1740.00</del>
<b>Totals:</b>				\$ <del>5220.00</del>	<b>2570.00</b>

\*\* previously submitted  
\* maximum

### Authorized Living Expenses

Date (M/D)	VENDOR	DESCRIPTION OF PURCHASE	For the month of <u>July</u>	For the month of <u>August</u>	For the month of <u>Sept.</u>
<del>7/31</del>	<del>Shaw Cable</del>	<del>- Antennet</del>	<del>96.05</del>	96.05	
8/21	Shaw Cable	- Antennet			96.05
07-25	Broom Riders	- cleaning	105.00		
08-22	" "	- cleaning		105.00	
			185.00		
			\$ <del>201.05</del>	\$ 201.05	\$ 96.05
<b>Totals:</b>				\$	<b>402.10</b>

Total Residence Expenses	\$ <del>5220.00</del> <b>2570.00</b>
Total Living Expenses	\$ 402.10
<b>TOTAL EXPENSES CLAIMED</b>	\$ <del>5622.10</del> <b>2972.10</b>

I CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT STATEMENT OF AUTHORIZED TEMPORARY RESIDENCE EXPENSES AND AUTHORIZED LIVING EXPENSES INCURRED BY ME AND THAT TO THE BEST OF MY KNOWLEDGE THE EXPENSES ARE PROPERLY PAYABLE UNDER THE MEMBERS' ALLOWANCES REGULATION.

M.L.A. Signature: Eileen Clarke

### Office Use Only

Claim No. 14821

Document No. 123713161

Certified Correct: ill

Approved: KB







# MLA EXPENSE CLAIM

LEGISLATIVE ASSEMBLY

## LIVING ALLOWANCE

M.L.A. NAME Eileen Clarke DATE PREPARED September 4, 2018

FOR THE CONSTITUENCY OF Agassiz

SEP 05 2018

### Authorized Temporary Residence Expenses

Date (M/D)	VENDOR	DESCRIPTION OF PURCHASE	For the month of _____	For the month of _____	For the month of _____
			\$	\$	\$
<b>Totals:</b>				\$	

### Authorized Living Expenses

Date (M/D)	VENDOR	DESCRIPTION OF PURCHASE	For the month of <u>July</u>	For the month of <u>August</u>	For the month of _____
07-10	Safeway	groceries	<del>33.42</del> <sup>30.04*</sup>		
07-24	Safeway	groceries	29.26		
08-14	Safeway	groceries		10.41	
08-22	Safeway	groceries		24.50	
08-30	Sawon Foods	groceries		20.41	
			59.30		
			\$ <del>62.68</del>	\$ 55.32	\$
<b>Totals:</b>				\$ <del>118.00</del> <sup>114.62</sup>	

\*minus ineligible item

Total Residence Expenses	\$
Total Living Expenses	\$ <del>118.00</del> <sup>114.62</sup>
<b>TOTAL EXPENSES CLAIMED</b>	\$ <del>118.00</del> <sup>114.62</sup>

I CERTIFY THAT THE FOREGOING IS A TRUE AND CORRECT STATEMENT OF AUTHORIZED TEMPORARY RESIDENCE EXPENSES AND AUTHORIZED LIVING EXPENSES INCURRED BY ME AND THAT TO THE BEST OF MY KNOWLEDGE THE EXPENSES ARE PROPERLY PAYABLE UNDER THE MEMBERS' ALLOWANCES REGULATION.

M.L.A. Signature: Eileen Clarke

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Claim No. 14822

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Certified Correct: [Signature] Approved: KB