## Judy Klassen KEWATINOOK 2019/2020 Fiscal Year

Report of Amounts Claimed and Processed to: December 31, 2019

| CONSTITUENCY   |   | -               | 6,936.00   |                |                                     |   |   |                |
|--|---|-----------------|--|----------------|-------------------------------------|---|---|----------------|
| Capital(part of Office Space Office Operation)                                   |   |                 | eration Representation<br><i>Max. Limit -</i> \$9,568.00       |                | Staff Salaries<br>December 20, 2019 |   | Total Constituency Expenses                             |                |
| * Y-T-D  | Y-T-D                                       | Y-T-D           | Y-T-D  | Balance        |                                     | Y-T-D                                     | Y-T-D   | Balance        |
| \$0.00   | \$0.00 \$0.00 \$1,                          |                 | \$72.58  | \$9,495.42     | \$0.00                              |   | \$1,665.44  | \$55,270.56    |
|  | Y OFFICE RENT AL                            | -               | CONSTITUENCY ASSISTANTS ALLOWANCE<br>Pay Period                |                |                                     |   |   |                |
| <b>Enti</b><br>M-T-D<br>\$0.00   | tlement: \$1,414.00<br>Balance<br>\$1,414.0 |                 | 11/23/2019 - 12/06<br>12/07/2019 - 12/20<br>12/21/2019 - 01/03 | )/2019 \$0.00  | )                                   | \$2,463.60                                |   |                |
| TRAVEL ALLOWANCE Entitlement: \$<br>Y-T-D Balance<br>\$374.24 <b>\$52,214.76</b> |   |                 | 2,589.00 * Kilometers<br>Y-T-D<br>18                           |                | * 04                                | i <i>t-of-Province</i><br>Y-T-D<br>\$0.00 | <i>Max. Limit -</i> \$3,950.00<br>Balance<br>\$3,950.00 |                |
| LIVING ALLOW   | ANCE For                                    | the Month of De | ecember  |                |                                     |   | ALTERNATE LI  | VING ALLOWANCE |
| Temporary Residence Expenses Livir   |   |                 | ng Expenses <u>Y-T-D</u>                                       |                |                                     |   | Overnight Stay Expenses                                 |                |
| Entitlement: \$1,314.00 Entitle  |   |                 | ent: \$804.00  | .00 \$7,884.00 |                                     |   | Entitlement: 0  |                |
| M-T-D  | Balance                                     | M-T-D           | Balance  |                |                                     |   | M-T-D   | Balance        |
| \$0.00   | \$1,314.00                                  | \$0.00          | \$804.00   |                |                                     |   | 0   | 0              |

COMMUTER ALLOWANCE (THIS SPACE BLANK IF NOT APPLICABLE)

| FRANKING ALLOWANCE<br>Printing Entitlement: 3 at \$1,166.61 each |                 |         | Mailing Entitlement: 3<br>Mailings Balance |        |             | ILITY RENOVATIONS<br>EXPENSE |  |
|--|-----------------|---------|--|--------|-------------|------------------------------|--|
| Printings<br>Y-T-D   | Amount<br>Y-T-D | Balance | Y-T-D                                      | Y-T-D  | Entitlement | Y-T-D                        |  |
| 0  | \$0.00          | 3       | 0 <b>3</b>                                 | \$0.00 | \$5,000.00  | \$0.00                       |  |

\*Shaded areas are for information and tracking purposes.

For information on how to request access to additional allowance detail, contact Members' Allowances at MAO@leg.gov.mb.ca

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