



**Fiscal Year  
2018-2019**

**MLA EXPENSE CLAIM**

LEGISLATIVE  
ASSEMBLY

**LIVING ALLOWANCE**

M.L.A. NAME Amanda Lathlin DATE PREPARED April 4/18

FOR THE CONSTITUENCY OF The Pas

APR 04 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>April</u> | For the month of _____ | For the month of _____ |
|------------|--------|-------------------------|-------------------------------|------------------------|------------------------|
| 04/03      | B/L/D  | @ 34.40 meals           | 34.40                         |                        |                        |
| 04/04      | B+L    | @ 7.85 + 9.85           | 17.70                         |                        |                        |
|            |        |                         |                               |                        |                        |
|            |        |                         |                               |                        |                        |
|            |        |                         |                               |                        |                        |
|            |        |                         |                               |                        |                        |
|            |        |                         |                               |                        |                        |
|            |        |                         |                               |                        |                        |
|            |        |                         | \$ 52.10                      | \$                     | \$                     |
|            |        |                         | <b>Totals:</b>                |                        | \$ 52.10               |

|                               |          |
|-------------------------------|----------|
| Total Residence Expenses      | \$       |
| Total Living Expenses         | \$ 52.10 |
| <b>TOTAL EXPENSES CLAIMED</b> | \$ 52.10 |



**Fiscal Year  
2018-2019**

**MLA EXPENSE CLAIM  
LIVING ALLOWANCE**

LEGISLATIVE  
ASSEMBLY

M.L.A. NAME Amanda Lathlin DATE PREPARED April 13, 2018

FOR THE CONSTITUENCY OF The Pas

**APR 13 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>April</u> | For the month of _____ | For the month of _____ |
|------------|--------------|-------------------------|-------------------------------|------------------------|------------------------|
| 04/12      | <i>reals</i> | B/L/D @ 34.40           | 34.40                         |                        |                        |
| 04/13      |              | B x L @ 7.85 + 9.85 =   | 17.70                         |                        |                        |
|            |              |                         |                               |                        |                        |
|            |              |                         |                               |                        |                        |
|            |              |                         |                               |                        |                        |
|            |              |                         |                               |                        |                        |
|            |              |                         |                               |                        |                        |
|            |              |                         | \$ 52.10                      | \$                     | \$                     |
|            |              |                         | <b>Totals:</b>                |                        | \$ 52.10               |

|                               |          |
|-------------------------------|----------|
| Total Residence Expenses      | \$       |
| Total Living Expenses         | \$ 52.10 |
| <b>TOTAL EXPENSES CLAIMED</b> | \$ 52.10 |



**Fiscal Year  
2018-2019**

**MLA EXPENSE CLAIM  
LIVING ALLOWANCE**

LEGISLATIVE  
ASSEMBLY

M.L.A. NAME Amanda Lathlin DATE PREPARED April 19, 2018

FOR THE CONSTITUENCY OF The Pas

**APR 19 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>Apr.</u> | For the month of _____ | For the month of _____ |
|--------------|--------|------------------------------|------------------------------|------------------------|------------------------|
| <u>04/18</u> |        | <u>B/L/D @ 34.40</u>         | <u>34.40</u>                 |                        |                        |
| <u>04/19</u> |        | <u>B&amp;L @ 7.85+9.85 =</u> | <u>17.70</u>                 |                        |                        |
|              |        |                              |                              |                        |                        |
|              |        |                              |                              |                        |                        |
|              |        |                              |                              |                        |                        |
|              |        |                              |                              |                        |                        |
|              |        |                              |                              |                        |                        |
|              |        |                              |                              |                        |                        |
|              |        |                              | \$ <u>52.10</u>              | \$                     | \$                     |
|              |        |                              | <b>Totals:</b>               |                        | \$ <u>52.10</u>        |

|                               |                 |
|-------------------------------|-----------------|
| Total Residence Expenses      | \$              |
| Total Living Expenses         | \$ <u>52.10</u> |
| <b>TOTAL EXPENSES CLAIMED</b> | \$ <u>52.10</u> |



**Fiscal Year  
2018-2019**

**MLA EXPENSE CLAIM**

LEGISLATIVE  
ASSEMBLY

**LIVING ALLOWANCE**

M.L.A. NAME Amanda Kathleen DATE PREPARED Apr. 24/18  
 FOR THE CONSTITUENCY OF The Pas **APR 25 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>Apr.</u> | For the month of _____ | For the month of _____ |
|----------------|--------|-------------------------|------------------------------|------------------------|------------------------|
| 04/23          |        | Dinner                  | 16.70                        |                        |                        |
| 04/24          | B/L/D  | 634.40                  | 34.40                        |                        |                        |
| 04/25          | B & L  | 7.85 + 9.85 =           | 17.70                        |                        |                        |
|                |        |                         |                              |                        |                        |
|                |        |                         |                              |                        |                        |
|                |        |                         |                              |                        |                        |
|                |        |                         |                              |                        |                        |
|                |        |                         |                              |                        |                        |
|                |        |                         | \$ 68.80                     | \$                     | \$                     |
| <b>Totals:</b> |        |                         |                              | \$ 68.80               |                        |

|                               |          |
|-------------------------------|----------|
| Total Residence Expenses      | \$       |
| Total Living Expenses         | \$ 68.80 |
| <b>TOTAL EXPENSES CLAIMED</b> | \$ 68.80 |



# MLA EXPENSE CLAIM

## LIVING ALLOWANCE

M.L.A. NAME Amanda Lathlin DATE PREPARED May 1, 2018

FOR THE CONSTITUENCY OF The Pas

### Authorized Temporary Residence Expenses

| Date (M/D)     | VENDOR                    | DESCRIPTION OF PURCHASE | For the month of <u>May</u> | For the month of _____ | For the month of _____ |
|----------------|---------------------------|-------------------------|-----------------------------|------------------------|------------------------|
| 5/1            | GLOBE PROPERTY MANAGEMENT | Rent                    | \$1,255.00                  |                        |                        |
|                |                           |                         |                             |                        |                        |
|                | PAY DIRECT                |                         |                             |                        |                        |
|                |                           |                         |                             |                        |                        |
|                |                           |                         | \$ 1,255.00                 | \$                     | \$                     |
| <b>Totals:</b> |                           |                         |                             | \$ 1,255.00            |                        |

### Authorized Living Expenses

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

|                               |                    |
|-------------------------------|--------------------|
| Total Residence Expenses      | \$ 1,255.00        |
| Total Living Expenses         | \$                 |
| <b>TOTAL EXPENSES CLAIMED</b> | <b>\$ 1,255.00</b> |



# MLA EXPENSE CLAIM

LEGISLATIVE  
ASSEMBLY

## LIVING ALLOWANCE

M.L.A. NAME Amanda Lathlin DATE PREPARED April 1, 2018

FOR THE CONSTITUENCY OF The Pas

### Authorized Temporary Residence Expenses

| Date (M/D)     | VENDOR                           | DESCRIPTION OF PURCHASE | For the month of <u>April</u> | For the month of _____ | For the month of _____ |
|----------------|----------------------------------|-------------------------|-------------------------------|------------------------|------------------------|
| 4/1            | GLOBE PROPERTY MANAGEMENT - Rent |                         | \$1,255.00                    |                        |                        |
|                |                                  |                         |                               |                        |                        |
|                |                                  |                         |                               |                        |                        |
|                | PAY DIRECT                       |                         |                               |                        |                        |
|                |                                  |                         |                               |                        |                        |
|                |                                  |                         | \$ 1,255.00                   | \$                     | \$                     |
| <b>Totals:</b> |                                  |                         |                               | \$ 1,255.00            |                        |

### Authorized Living Expenses

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

|                               |                    |
|-------------------------------|--------------------|
| Total Residence Expenses      | \$ 1,255.00        |
| Total Living Expenses         | \$                 |
| <b>TOTAL EXPENSES CLAIMED</b> | <b>\$ 1,255.00</b> |