



MLA EXPENSE CLAIM

LEGISLATIVE
ASSEMBLY

LIVING ALLOWANCE

M.L.A. NAME Amanda Kathleen DATE PREPARED Jan. 10/23

FOR THE CONSTITUENCY OF The Pas - Kamloops

JAN 10 2023

Authorized Temporary Residence Expenses

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

Authorized Living Expenses

Date (M/D)	VENDOR	DESCRIPTION OF PURCHASE	For the month of <u>Jan.</u>	For the month of _____	For the month of _____
<u>01/08</u>	<u>Not Mills</u>	<u>Groceries</u>	<u>39.39</u>		
<u>01/08</u>	<u>" " - " "</u>		<u>25.76</u>		
<u>01/09</u>	<u>Safeway</u>	<u>Groceries</u>	<u>12.36</u>		
<u>01/09</u>	<u>Shoppers Drug Mart</u>	<u>Groceries</u>	<u>23.17</u>		
<u>01/10</u>	<u>Safeway</u>	<u>Groceries</u>	<u>6.49</u>		
<u>01/08 - 01/12</u>	<u>B/L/D</u>	<u>37.85 x 5 =</u>	<u>189.25</u>		
			\$ <u>296.42</u>	\$	\$
Totals:				\$ <u>296.42</u>	

Total Residence Expenses	\$
Total Living Expenses	\$ <u>296.42</u>
TOTAL EXPENSES CLAIMED	\$ <u>296.42</u>



MLA EXPENSE CLAIM

LEGISLATIVE
ASSEMBLY

LIVING ALLOWANCE

M.L.A. NAME Amanda Lathlin DATE PREPARED Jan. 16/23
 FOR THE CONSTITUENCY OF The Pns - Kameesak

JAN 16 2023

Authorized Temporary Residence Expenses

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

Authorized Living Expenses

Date (M/D)	VENDOR	DESCRIPTION OF PURCHASE	For the month of <u>Jan.</u>	For the month of _____	For the month of _____
01/15	No Frills	Groceries & Kitchen ware.	\$335.55 329.71*		
01/16	Shoppers Drug Mart	- Groceries	\$11.29		
01/16	Portage Meat & Sausage Deli	- Groceries	\$22.77		
			363.77		
			\$ 369.61	\$	\$
Totals:				\$ 369.61	\$ 363.77

* plus taxes

Total Residence Expenses	\$ 363.77
Total Living Expenses	\$ 369.61
TOTAL EXPENSES CLAIMED	\$ 369.61 <u>363.77</u>



MLA EXPENSE CLAIM

LEGISLATIVE ASSEMBLY

LIVING ALLOWANCE

M.L.A. NAME Amanda La Yelin DATE PREPARED Jan. 23/23
 FOR THE CONSTITUENCY OF The Pas-Kameesak JAN 23 2023

Authorized Temporary Residence Expenses

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

Authorized Living Expenses

Date (M/D)	VENDOR	DESCRIPTION OF PURCHASE	For the month of <u>JAN</u>	For the month of _____	For the month of _____
01/16	Safeway	Groceries	4.99		
01/16	Safeway	Groceries	27.62		
01/16	Safeway	Groceries	11.64		
01/20	Safeway	Groceries	10.01		
01/20	Shoppers	Groceries	104.96		
			83.72*		
01/16-01/19		37.85 B/L/D x 4 =	151.40		
01/20		B+L 8.64 + 10.94 =	19.48		
			193.81		
			308.86		
			\$ 529.86	\$	\$
Totals:				\$	\$ 279.86
					\$ 193.81

* minus ineligible items
 ▲ Balance remaining

Total Residence Expenses	\$
Total Living Expenses	\$ 193.81
TOTAL EXPENSES CLAIMED	\$ 193.81

