## Shannon Martin MORRIS

## 2015/2016 Fiscal Year

## Report of Amounts Claimed and Processed to: June 30, 2015

| CONSTITUENCY  |                      | titlement: \$55,396  |  |  |                                 |                |                          |                             |                 |  |
|---|----------------------|----------------------|--|--|---------------------------------|----------------|--------------------------|-----------------------------|-----------------|--|
| Capital(part of Office Space Office Op<br>Office Operation)                         |                      | Office Operation     | peration Representation<br>Max. Limit - \$8,962.00 |  | Staff Salaries<br>June 26, 2015 |                | Tot                      | 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 \$1,474.15   |                      | \$5,120.01           | \$1,151.47   | 47 \$7,810.53  |                                 | \$0.00         |                          | 7,745.63                    | \$47,650.37     |  |
| CONSTITUENCY OFFICE RENT ALLOWANCE CONSTITUENCY<br>For the Month of June Pay Period |                      |                      | STITUENCY ASSI<br>ay Period                        | STANTS ALLO  | OWANCE                          | <u>Y-T-D</u>   |                          |                             |                 |  |
| Entit   | lement: \$1,323.00   | 05/30/               | 2015 - 06/12/201                                   | \$1,853  | .55                             | \$10,672.2     | 9                        |                             |                 |  |
| M-T-D   | Balance              | 06/13/               | 2015 - 06/26/201                                   | \$ | .75                             |                |                          |                             |                 |  |
| \$1,323.00  | ) <b>\$0.00</b>      | 06/27/               | 2015 - 07/10/2015                                  | \$0.00   |                                 |                |                          |                             |                 |  |
| TRAVEL ALLOW  | ANCE En              | titlement: \$21,737. | 00 * K   | ilometers  | * C                             | ut-of-Province | Max. L                   | <i>.imit -</i> \$3,698      | .00             |  |
| Y-T-D   | Balance              |                      |  | Y-T-D  |                                 | Y-T-D          |                          | Balance                     |                 |  |
| \$3,562.47  | \$18,174.53          |                      |  | 6,174  |                                 | \$0.00         |                          | \$3,698.00                  |                 |  |
| LIVING ALLOWA   | NCE For t            | he Month of June     |  |  |                                 |                | ALT                      | ERNATE L                    | IVING ALLOWANCE |  |
| Temporary Residence Expenses Living Ex  |                      |                      | xpenses <u>Y-T-D</u>                               |  |                                 |                |                          | Overnight                   | Stay Expenses   |  |
| Entitlement: \$1,235.00 Entit   |                      | Entitlement: \$7     | ement: \$751.00 \$0.00                             |  |                                 |                |                          | Entitlement: 0              |                 |  |
| M-T-D   | Balance              | M-T-D                | Balance  |  |                                 |                |                          | M-T-D                       | Balance         |  |
| \$0.00  | \$1,235.00           | \$0.00               | \$751.00   |  |                                 |                |                          | 0                           | 0               |  |
| COMMUTER ALL  | COMMUTER ALLOWANCE   |                      |  | Return Trips   |                                 |                | Continge                 | ncy Stays                   | Total Claimed   |  |
| Week Beginning<br>06/01/2015  |                      |                      | Week Beginning Week<br>06/15/2015 06               |  | ng Week Beginning<br>06/29/2015 |                | Sessional<br>Period From |                             | Y-T-D           |  |
| Total Ent.: 6   | Total Ent.:          | 6 Total Er           | nt.: 6 T   | otal Ent.: 6   | Tota                            | al Ent.: 6     | 11/1                     | 2/2013                      |                 |  |
| W-T-D Balance   | W-T-D Balar          |                      |  | T-D Balance  | W-T-I                           | D Balance      | S-T-D                    | Balance                     |                 |  |
| 0.0 6.0   | 0.0 6.0              | 0.0                  | 6.0 0  | .0 6.0   | 0.0                             | 6.0            | 0                        | 20                          | \$257.60        |  |
| FRANKING ALLOWANCE  |                      |                      |  |  |                                 |                |                          | COMMITTEE ALLOWANCE         |                 |  |
| -   | ent: 3 at \$2,459.52 |                      |  | I  | •                               | tlement: 3     |                          |                             |                 |  |
| Printings<br>Y-T-D  | Amount<br>Y-T-D      | Balance              |  |  | Mailings<br>Y-T-D               | Balance        |                          |                             | Y-T-D           |  |
|   |                      | •                    |  |  |                                 |                |                          |                             |                 |  |
| 0   | \$0.00               | 3                    |  |  | 0                               | 3              |                          |                             | \$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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