## Dennis Smook LA VERENDRYE

## 2017/2018 Fiscal Year

## Report of Amounts Claimed and Processed to: May 31, 2017

| CONSTITUENCY                                   |                                   | Entitlement: \$                                   | 56,790.00  |                                |                                |   |  |                |
|--|-----------------------------------|---|--|--------------------------------|--------------------------------|---|--|----------------|
| Capital(part of Office Space Office Operation) |                                   | eration Representation<br>Max. Limit - \$9,187.00 |  |                                | Staff Salaries<br>May 26, 2017 | Total Constitue                             | ncy Expenses   |                |
| * Y-T-D  | Y-T-D                             | Y-T-D   | Y-T-D  | Balance                        |                                | Y-T-D                                       | Y-T-D  | Balance        |
| \$0.00   | \$134.00                          | \$2,702.6   | 62 \$1,413.8   | \$4 \$7,773.16                 | i                              | \$0.00                                      | \$4,250.46   | \$52,539.54    |
|  | Y OFFICE RENT A<br>e Month of May | CONSTITUENCY<br>Pay Period                        | ASSISTANTS AL  | LOWANC                         | <u>Y-T-D</u>                   |   |  |                |
| <b>Enti</b><br>M-T-D<br>\$784.88               |                                   | e   | 04/29/2017 - 05/12<br>05/13/2017 - 05/26<br>05/27/2017 - 06/09 | 6/2017 \$1,30                  | 53.84<br>)3.00<br>)            | \$5,465.50                                  |  |                |
| <b>TRAVEL ALLOV</b><br>Y-T-D<br>\$1,323.75     | VANCE<br>Balance<br>\$38,337.25   | Entitlement: \$                                   | 39,661.00  | * Kilometers<br>Y-T-D<br>1,923 |                                | * <i>Out-of-Province</i><br>Y-T-D<br>\$0.00 | <i>Max. Limit -</i> \$3,792.0<br>Balance<br>\$3,792.00 | 00             |
| LIVING ALLOWANCE For the Month of May          |                                   |   |  |                                |                                |   |  | /ING ALLOWANCE |
| Temporary Residence Expenses Livir             |                                   |   | ng Expenses <u>Y-T-D</u>                                       |                                |                                |   | Overnight Stay Expenses                                |                |
| Entitlement: \$1,268.00 Entitle                |                                   |   | ment: \$771.00 \$4,178.81                                      |                                |                                |   | Entitle  | ement: 0       |
| M-T-D  | Balance                           | M-T-D   | Balance  |                                |                                |   | M-T-D  | Balance        |
| \$1,087.63                                     | \$180.37                          | \$0.00  | \$771.00   |                                |                                |   | 0  | 0              |

COMMUTER ALLOWANCE (THIS SPACE BLANK IF NOT APPLICABLE)

| FRANKING ALLOW                             | ANCE   |         | COMMITTEE ALLOWANCE |         |        |
|--|--------|---------|---------------------|---------|--------|
| Printing Entitlement: 3 at \$2,476.70 each |        | 70 each | Mailing Ent         |         |        |
| Printings                                  | Amount | Balance | Mailings            | Balance |        |
| Y-T-D                                      | Y-T-D  |         | Y-T-D               |         | 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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