## Jeff Wharton RED RIVER NORTH

## 2020/2021 Fiscal Year

Report of Amounts Claimed and Processed to: November 30, 2020

| CONSTITUENCY                                   | ALLOWANCE En   | titlement: \$60, | 444.00  |  |              |                                |                         |                             |  |
|--|--|------------------|---|--|--------------|--------------------------------|-------------------------|-----------------------------|--|
| Capital(part of Office Space Office Operation) |  |                  | eration Representation  Max. Limit - \$9,778.00 |  |              | Staff Salaries vember 20, 2020 | Total Constitue         | Total Constituency Expenses |  |
| * Y-T-D  | Y-T-D  | Y-T-D            | Y-T-D   | Balance  |              | Y-T-D                          | Y-T-D                   | Balance                     |  |
| \$227.35                                       | \$12,583.53  | \$7,404.50       | \$1,200.1                                       | 1 \$8,577.89                                       |              | \$0.00                         | \$21,188.14             | \$39,255.86                 |  |
|  | CONSTITUENCY OFFICE RENT ALLOWANCE For the Month of November |                  |   | CONSTITUENCY ASSISTANTS ALLOWAN Pay Period         |              |                                |                         |                             |  |
| M-T-D  | Entitlement: \$1,446.00 M-T-D Balance \$1,446.00 \$0.00      |                  |   | \$/2020 \$2,03<br>\$/2020 \$2,03<br>\$/2020 \$0.00 | 30.39        | \$33,620.09                    |                         |                             |  |
| TRAVEL ALLOW                                   | TRAVEL ALLOWANCE Entitlement: \$13,694.00                    |                  |   |  |              | * Out-of-Province              |                         | 00                          |  |
| Y-T-D  | Balance  |                  |   | Y-T-D  |              | Y-T-D                          | Balance                 |                             |  |
| \$3,959.60                                     | \$9,734.40   |                  |   | 6,532  |              | \$0.00                         | \$4,037.00              |                             |  |
| LIVING ALLOWA                                  | ANCE For t   | he Month of Nov  |   |  | ALTERNATE LI | VING ALLOWANCE                 |                         |                             |  |
| Temporary Resi                                 | Temporary Residence Expenses Living                          |                  |   | g Expenses <u>Y-T-D</u>                            |              |                                | Overnight Stay Expenses |                             |  |
| Entitlement                                    | Entitlement: \$1,346.00 Entitlen                             |                  |   | ent: \$822.00 \$15,244.43                          |              |                                | Entitlement: 0          |                             |  |
| M-T-D  | Balance  | M-T-D            | Balance   |  |              |                                | M-T-D                   | Balance                     |  |
| \$879.96                                       | \$466.04   | \$0.00           | \$822.00  |  |              |                                | 0                       | 0                           |  |

COMMUTER ALLOWANCE (THIS SPACE BLANK IF NOT APPLICABLE)

| FRANKING ALLOWANCE Printing Entitlement: 3 at \$2,334.81 each |                 |         | Mailing Entitlement: 3 Mailings Balance | COMMITTEE ALLOWANCE | ACCESSIBILITY RENOVATIONS 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 3                                     | \$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