

This Official Receipt is prescribed by the Chief Electoral Officer and issued in accordance with the Alberta Election Finances and Contributions Disclosure Act.

APPLICANT COPY CONTRIBUTION OFFICIAL RECEIPT

PCA Receipt No. 306031
PCA Account No. 556647

NO. A 280047

DATE RECEIVED
DAY MO YEAR
25 02 09

DATE ISSUED
DAY MO YEAR
15 04 09

RECEIVED FROM:

Individual Corporation Trade Union Employee Organization

AMOUNT RECEIVED \$850.00
\$ SIGN MUST BE INCLUDED

Calgary Laboratory Services
9-3535 RESEARCH RD NW
CALGARY, AB T2L 2K8

NAME OF PARTY OR CONSTITUENCY ASSOCIATION

PC ASSOCIATION OF ALBERTA

CECF-07-1

Cash/Cheque/Money Order Valued Contribution (Goods & Services)

RON PENALD TREASURER

FOR INCOME TAX CREDIT - CONTRIBUTOR'S COPY

APPLICANT COPY

This Official Receipt is prescribed by the Chief Electoral Officer and issued in accordance with the Alberta Election Finances and Contributions Disclosure Act.

ANNUAL CONTRIBUTION OFFICIAL RECEIPT
PCA Receipt No. 318615
PCA Account No. 556647
NO. A 303882

DATE RECEIVED
DAY MO YEAR
06 04 10

DATE ISSUED
DAY MO YEAR
27 05 10

RECEIVED FROM:

Individual Corporation Trade Union Employee Organization

AMOUNT RECEIVED \$ SIGN MUST BE INCLUDED
\$850.00

Calgary Laboratory Services
9-3535 RESEARCH RD NW
CALGARY, AB T2L 2K8

NAME OF PARTY OR CONSTITUENCY ASSOCIATION

PC ASSOCIATION OF ALBERTA

RON RENAUD TREASURER

GEO.F-07-1

Cash/Cheque/Money Order Valued Contribution (Goods & Services)

Print name of Chief Financial Officer



Signature of Chief Financial Officer

FOR INCOME TAX CREDIT - CONTRIBUTOR'S COPY



Ed Stelmach
Premier

May 28, 2010

Calgary Laboratory Services
9-3535 RESEARCH RD NW
CALGARY, AB T2L 2K8

Dear Sir or Madam:

Thank you for your financial contribution for which the official tax receipt is enclosed. Your contribution is very meaningful to PC Alberta as is your commitment to the continuation of good government in Alberta.

Please feel free to contact us anytime that you have ideas or issues to discuss. Your input is important. Thanks again for your support.

Yours truly,


Pat Godkin
Executive Director

PG/mr



a mark that matters

Elections Alberta > Financial Disclosure > Contributor Search > Annual > 2009

Contributor Search - Annual 2009

CALGARY LABORATORY SERVICES

Contributor Name	Location	Recipient	Amount
CALGARY LABORATORY SERVICES	CALGARY	Progressive Conservative Association of Alberta (Final Financial Statement)	\$850.00
Grand Total:			\$850.00

A listing of contributors that match your search criteria, their location, and the total amount contributed during the campaign is provided. Selecting the contributor name in the left-hand column will provide additional detail on that contribution. It will identify the political party to which the contribution was made; or the candidate, electoral division, and political affiliation (if any). If the total contribution was divided amongst a group of candidates or a combination of candidate(s) and the political party, individual amounts will appear detailing each contribution. Selecting "Financial Statement" will allow you to access the appropriate financial statement, in which the contribution will appear.

Remember - by legislation, you will only be able to view the names of contributors that provided over \$375!

Contributor Name	Location	Recipient	Total Amount
CALGARY LABORATORY SERVICES	CALGARY	Party	\$850.00

The Financial Period for Annual Statements was from January 1, 2009 to December 31, 2009, with a filing deadline of March 21, 2010.

Enter all or part of a contributor's name and click the 'Search' button

You must enter at least 3 characters to conduct your search of individuals, corporations and trade unions that have made annual contributions over \$375 for the calendar year specified.

You will note that aggregate contributions will be combined and displayed, where appropriate. In addition, contributions made by a company and its subsidiaries will also be combined and displayed, where aggregate contributions to a particular candidate or political party exceed \$375.

If you cannot find a particular contributor, you may wish to check that the appropriate spelling was used, or you may wish to change your search criteria (for example, enter a surname alone instead of a first name/surname combination).

- Overview
- Financial Period
- Parties
- Constituency Associations
- Candidates
- Contributor Search
 - Annual
 - 2010
 - 2009
 - 2008
 - 2007
 - 2006
 - 2005
 - 2004
 - 2003
 - 2002
 - 2001
 - Campaign
 - Special
 - Constituency
 - Party

APPLICANT COPY



a mark that matters

Elections Alberta > Financial Disclosure > Contributor Search > Annual > 2010

Contributor Search - Annual 2010

CALGARY LABORATORY SERVICES

Contributor Name	Location	Recipient	Amount
CALGARY LABORATORY SERVICES	CALGARY	Progressive Conservative Association of Alberta (Final Financial Statement)	\$850.00
Grand Total:			\$850.00

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Remember - by legislation, you will only be able to view the names of contributors that provided over \$375:

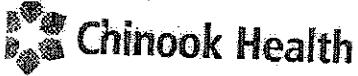
Contributor Name	Location	Recipient	Total Amount
CALGARY LABORATORY SERVICES	CALGARY	Party	\$850.00

The Financial Period for Annual Statements was from January 1, 2010 to December 31, 2010, with a filing deadline of March 31, 2011.

Enter all or part of a contributor's name and click the 'Search' button.

APPLICANT COPY

APPLICANT COPY



CHINOOK REGIONAL HEALTH AUTHORITY
 960 - 19th STREET SOUTH
 LETHBRIDGE, ALBERTA T1J 1W5
 PHONE: (403) 388-6111

CHEQUE NO. 205304

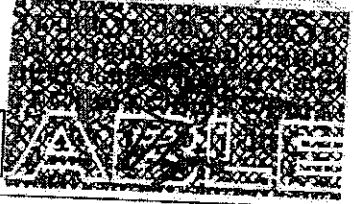
DATE 14/01/2009

ONE HUNDRED FIFTY 00/100

\$ *****\$150.00

BY ORDER

ALBERTA LIBERAL PARTY
 C/O ADELE DOWNS SECRETARY
 2110 24 ST S
 LETHBRIDGE, AB T1K 2M5



BANK OF MONTREAL
 418 AVENUE SOUTH
 LETHBRIDGE, ALBERTA T1J 0N7

NOT NEGOTIABLE

VENDOR: L003444

REMITTANCE ADVICE - DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS.

CHEQUE NO. 205304

DATE 14/01/09

INVOICE NO.	DATE	PARTICULARS	AMOUNT	DEDUCTIONS	BALANCE
TICKETS-NOV08	30/11/08	ST MICHAELS HEALTH C	150.00	0.00	150.00
CHINOOK REGIONAL HEALTH AUTHORITY			TOTALS	150.00	0.00
					150.00

APPLICANT COPY



New 2/14

Cheque Requisition
L003444

Liberal

Muelmeric

TO: Alberta Liberal Party
ADDRESS: c/o Adele Downs, Secretary
Lethbridge East Liberal Association
2110 - 24th St. S.
Lethbridge, AB
TIK 2MS

DATE: January 2, 2008
VENDOR NO.: _____
DUE DATE: _____

3900.71110000.61500000	Leadership Dinner	150.00

PREPARED BY: [Signature]
APPROVED BY: _____
PROCESSED BY: _____

TOTAL AMOUNT REQUESTED \$ 150.00

INSTRUCTIONS: MAIL CHEQUE



APPLICANT COPY

ALBERTA LIBERAL

INVOICE

October 31, 2008

IN ACCOUNT WITH:

St. Michael's Health Centre
1400 - 9 Ave. S.
Lethbridge, Alberta T1J 4V5

Handwritten signature and date: Jan 21 2009

Leadership Dinner - Nov 7/08
2 tickets @ \$75.00 each \$150.00

Please make cheques payable to the Alberta Liberal Party

c/o Adele Downs, Secretary
Lethbridge East Liberal Association
2110 - 24 St. S.
Lethbridge, Alberta T1K 2M5

THANK YOU

DATE: 24/01/12 @ 0918
 USER: 373130
 Chinook Region AF *LIVE*
 VENDOR HISTORY PAYMENT DETAIL (BY PAYMENT DATE)

PAGE 1

FROM VENDOR NAME: ALBERTA LIBERAL PARTY TERU VENDOR NAME: ALBERTA LIBERAL PARTY
 FROM PAYMENT DATE: 01/01/09 TERU PAYMENT DATE: 24/01/12
 FROM GL ACCOUNT: BSMERWING TRAV GL ACCOUNT: BND

PAY DATE	BANK ACC	CHECK SUB	ACTIVITY	INV NUM	FACILITY	INV DATE	TYPE	TXN	GL ACCOUNT	GL ACCOUNT DESC	PAYMENT AMOUNT
14/01/09	CHR.GEN	205304	Check ISSUED	TICKETS-NOV08	SYSTEM	30/11/08	INV	2	89001.711100000.6750000	SMGG ADMINISTRATION PUBLIC RELATIONS	150.00
07/10/09	CHR.GEN	211150	Check ISSUED	TICKETS-NOV09	SYSTEM	07/10/09	INV	2	89001.711100000.6750000	SMGG ADMINISTRATION PUBLIC RELATIONS	150.00
08/02/11	CHR.GEN	219330	Check ISSUED	20110125	SYSTEM	25/01/11	INV	2	89001.711100000.6750000	SMGG ADMINISTRATION PUBLIC RELATIONS	300.00
VENDOR TOTAL:											600.00

FACILITY: SYSTEM

VENDOR: ALBERTA LIBERAL PARTY L003444

TERMS: ABS NET 5PROX

↓ oos/External Entity
 St. Michael's Corp - Cou. Health

APPLICANT COPY

P.O. #

Invoice # 20110125



RECEIVED
JAN 31 2011
Accounts Payable

Miscellaneous Cheque Request

Complete the following and forward to Finance for processing along with appropriate back-up (i.e. original invoice/receipt/registration). Note: To claim employee expenses use the Expense/Remuneration Claim #00152

Pay To Alberta Liberal Party	Attention Adele Downs, Sec, Treasurer
Address Lethbridge East Liberal Association 2110 - 24 Street S. Lethbridge, AB T1K 2M5	Mailing Instructions: <input type="checkbox"/> Include attached enclosures <input type="checkbox"/> Via Courier <input checked="" type="checkbox"/> Other MAIL
Is this a change of address since last submission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date Payment Required ASAP
Description	
Prepared by Mirchy Krokam	Date (dd-Mon-yyyy) 25-Jan-2011
Approved by [Signature]	Date (dd-Mon-yyyy) 26-Jan-2011
Reviewed by	Date (dd-Mon-yyyy)

Line	Accounting Distribution	Amount DR/(CR)
1	89001-71100000-750000	300.00
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
Total Amount of Payment		\$ 300.00

APPLICANT COPY

Alberta Liberal

INVOICE

January 25, 2011

IN ACCOUNT WITH:

St. Michael's Health Centre
1400 - 9 Ave. S.
Lethbridge, Alberta T1J 4V5

Leader's Dinner - February 4, 2011
3 tickets @ \$100.00 each\$300.00

Please make cheque payable to the Alberta Liberal Party

and mail to:

Adele Downs, Sec-Treasurer
Lethbridge East Liberal Association
2110 - 24 St. S.
Lethbridge, Alberta T1K 2M5

THANK YOU

APPLICANT COPY



ALBERTA HEALTH SERVICES
 960 - 19th STREET SOUTH
 LETHBRIDGE, ALBERTA T1J 1W5
 PHONE: (403) 388-6111

CHEQUE NO. 211150

DATE 07/10/2009
 D D M M Y Y Y Y

ONE HUNDRED FIFTY 00/100

\$ *****\$150.00

PAY TO THE ORDER OF

ALBERTA LIBERAL PARTY
 C/O ADELE DOWNS SECRETARY
 2110 24 ST S
 LETHBRIDGE, AB T1J 2M5

ROYAL BANK OF CANADA
 MAIN BRANCH
 39 - 8th AVENUE, SW
 CALGARY, ALBERTA T2P 1C4 (05259-001)

NOT NEGOTIABLE

THIS DOCUMENT CONTAINS SECURITY FEATURES: VISIBLE & INVISIBLE FIBRES, A TRUE WATERMARK, BLEED-THROUGH NUMBERING CHEMICAL SENSITIVITY, UV DULL PAPER.

REMITTANCE ADVICE - DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS.

VENDOR: L003444

CHEQUE NO. 211150

DATE 07/10/09

INVOICE NO.	DATE	PARTICULARS	AMOUNT	DEDUCTIONS	BALANCE
TICKETS-NOV09	02/10/09	ST MICHAELS HEALTH C	150.00	0.00	150.00



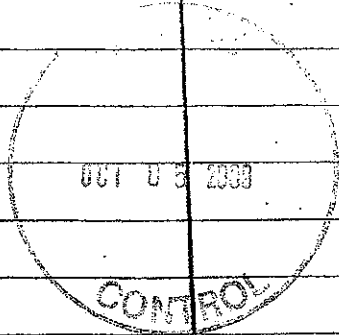
Chinook Regional Health Authority

Cheque Requisition

TO: ALBERTA LIBERAL PARTY
 ADDRESS: ATT: ADELE DOWNS
LETHBRIDGE EAST
LIBERAL ASSOCIATION
2110 - 24 ST. S
LETH T1K 2M5

DATE: OCT 5/09.
 VENDOR NO.: _____
 DUE DATE: _____

ACCOUNT CODE	DESCRIPTION	AMOUNT
8900-71100000 6750000	2 TICKETS TO LEADERS DINNER	150. ⁰⁰



TOTAL AMOUNT REQUESTED \$ 150.-

PREPARED BY: [Signature]
 APPROVED BY: [Signature]
 PROCESSED BY: _____

INSTRUCTIONS: MAIL CHEQUE

APPLICANT COPY

ALBERTA LIBERAL

INVOICE

October 2, 2009

IN ACCOUNT WITH:

St. Michael's Health Centre
1400 – 9 Ave. S.
Lethbridge, Alberta T1J 4V5

Leader's Dinner – Oct 23/09
2 tickets @ \$75.00 each\$150.00

Please make cheque payable to the Alberta Liberal Party

and mail to:

Adele Downs, Sec-Treasurer
Lethbridge East Liberal Association
2110 – 24 St. S.
Lethbridge, Alberta T1K 2M5

THANK YOU

APPLICANT COPY

Vendor #	Vendor Name	Invoice Date	Invoice Num	Invoice Amount	Description	Orig EC	Account	PO #	GL Date	Payment Creation Date	Voucher Number	Payt Method Lookup Code	Vender Type Lookup Code	Check/Payt #	Payt Date
38814	CALGARY BUFFALO FC ASSOC	4-Aug-05	081001	400.00	2005 CHINESE CULTURAL FUNDRAISER	01	71105000001	67500000	UNMATCHED	10-Aug-05	522838	CHECK	SUPPLIER	178409	10-Aug-05
38852	CALGARY EDMONT FC ASSOCIATION	9-Mar-05	C008MAR05	150.00	2 TICKETS BREAKFAST SPEAKER	01	71105000001	67500000	UNMATCHED	9-Mar-05	841795	CHECK	SUPPLIER	170289	16-Mar-05
38855	CALGARY EDMONT FC ASSOCIATION	26-Feb-07	2671061	60.00	PC FUNDRAISING BANQUET	01	71105000001	67500000	UNMATCHED	17-Oct-07	1389557	CHECK	SUPPLIER	224436	24-Oct-07
49785	CALGARY LOUISHEED FC ASSOCIATION	5-Feb-07	081001	960.00	TICKETS	01	71105000001	67500000	UNMATCHED	8-Mar-07	1244680	CHECK	SUPPLIER	210688	14-Mar-07
49817	CALGARY MOSE HILL FC ASSOCIATION	23-Aug-05	C023AUG05	100.00	TICKETS	01	71105000001	67500000	UNMATCHED	1-Mar-07	1239491	CHECK	SUPPLIER	210544	7-Mar-07
38869	CALGARY SHAW FC ASSOCIATION	16-Jul-05	C016JUL05	150.00	BREAKFAST TICKETS	01	71105000001	67500000	UNMATCHED	2-Aug-05	869583	CHECK	SUPPLIER	179335	24-Aug-05
25663	CALGARY WEST FC ASSOCIATION	20-Apr-05	C020APR05	250.00	DINNER TICKETS	01	71105000001	67500000	UNMATCHED	27-Apr-05	869583	CHECK	SUPPLIER	178946	22-Jun-05
49653	LIVINGSTONE MACLEOD FC ASSOCIATION	9-Aug-05	C009AUG05	30.00	TICKET FOR DINNER (1)	01	71105000001	67500000	UNMATCHED	9-Aug-05	822384	CHECK	SUPPLIER	178422	10-Aug-05
				<u>1,580.00</u>											
			2005	1,050.00											
			2007	500.00											
				<u>1,550.00</u>											

APPLICANT COPY

928394



calgary health region

CHEQUE REQUISITION

INSTRUCTIONS:

- * A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date August 4, 2005		Requested By (Please Print) Lynn Redford	
Department Office of the CEO		Site Southport	Phone No (in full) 943-1225
MAKE CHEQUE PAYABLE TO: Livingstone Macleod PC Association			Employee/Supplier #623389
MAILING ADDRESS (for forwarding of cheque)			
Canada Post:	PO Box 69		
City	Fort Macleod	Province	AB Postal Code TOL-0Z0
Interoffice Mail:	Department	Office of the CEO	RECEIVED AUG 8 2005
	Site	Southport	
Purpose of Request	(1) Ticket for dinner		
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS _please provide cheque to Lynn Redford who will forward the cheque to the organization_			

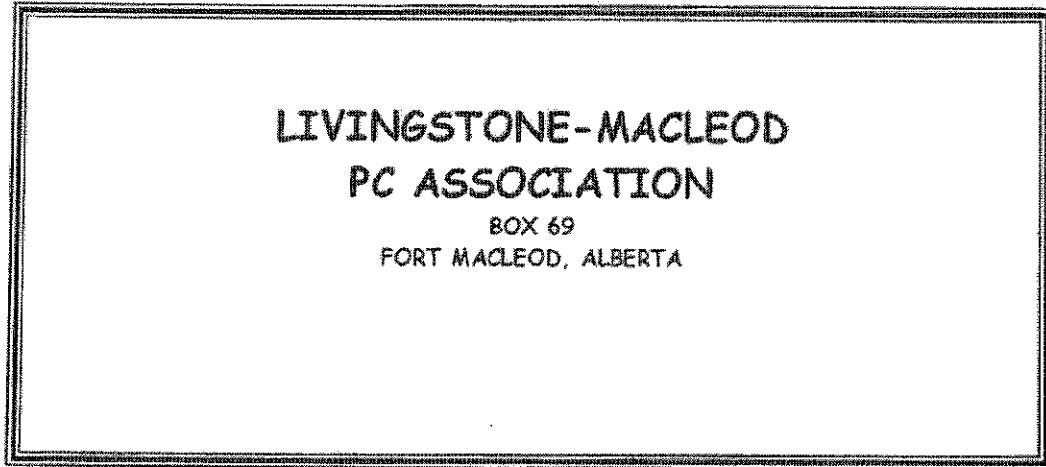
CODING & AUTHORIZATION

FINANCIAL CODE				AMOUNT	GL DESCRIPTION
ORG	FUNCTIONAL CENTRE	ACCOUNT			
01	711050000001	675000000	30.00		
					GST \$
TOTAL AMOUNT OF CHEQUE:			30.00	<input type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other	
Expenditure Officer Authorization			Print Name Patti Grier		
Authorizer's Employee Number			Authorizer Phone # (in full) 943-1128		

ACCOUNTS PAYABLE ONLY s.17(1), 17(4)(g)(i)

Invoice # _____	Comments: ENTERED AUG 09 2005
Supplier # <u>40653</u>	
Recurring Payment:	
Start Date _____	
End Date _____	
# of Payments _____	
Cycle _____	

00074



INVOICE

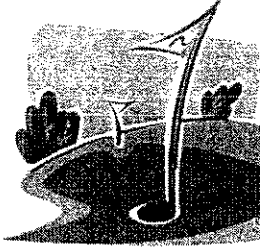
To: Lynn Redford
Calgary Health Region
10101 Southport Road SW
Calgary AB T2W 3N2

For: Livingstone Macleod Golf Tournament Dinner
August 26, 2005

Total Payable: \$30.00

APPLICANT COPY

Lynn Redford



s.17(1), 17(4)(g)(i)

David C. Coutts, M.L.A.
9th Annual Livingstone-Macleod
Golf Tournament

REGISTRATION FORM

(Fax To: 780-415-4818)
(Mail: 420 Legislature Building, Edmonton AB T5K 2B6)
Phone: 780 415-4815

Name Lynn Redford
(please print)

Address _____

Organization Calgary Health Region

Address 10101 Southport Rd SW Postal Code T2W 3N2

Phone: 403-943-1225 Handicap:

Golf and Dinner (\$100.00) Dinner Only (\$30.00) 30.00

AUGUST 26, 2005

Registration Commences 8:30 a.m.
Shotgun Start 9:30 a.m.
Dinner immediately following golf
(approximately 4:00 p.m.)

Fee: \$100.00 (includes green fees, shared cart, continental breakfast, lunch and dinner)
\$30.00 Barbecue only

Please make cheque payable to: Livingstone-Macleod PC Association
RSVP by August 15, 2005

*Will bring cheque to event
Thanks*

APPLICANT COPY

866862



calgary health region

CHEQUE REQUISITION

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. **ORIGINAL DOCUMENTS MUST BE ATTACHED**

Date April 18, 2005	Requested By (Please Print) Lynn Redford	
Department Office of the CEO	Site Southport	Phone No (in full) 943-1225
MAKE CHEQUE PAYABLE TO: Calgary West PC Association		Employee/Supplier #623389
MAILING ADDRESS (for forwarding of cheque)		
Canada Post:	P.O. Box 74046, Strathcona RPO	
City	Calgary	Province AB Postal Code T3H 3B6
Interoffice Mail:	Department	Office of the CEO
	Site	Southport
Purpose of Request	(2) Tickets for dinner speaker	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS _please provide cheque to Lynn Redford who will forward the cheque to the organization_____		

RECEIVED
APR 19 2005
FINANCIAL

CODING & AUTHORIZATION

FINANCIAL CODE				AMOUNT	GL DESCRIPTION
ORG	FUNCTIONAL CENTRE	ACCOUNT			
0 1	7 1 1 0 5 0 0 0 0 0 1	6 7 5 0 0 0 0 0	250.00		
					GST \$
TOTAL AMOUNT OF CHEQUE:			250.00	<input type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other	
Expenditure Officer Authorization			Print Name Patti Grier		
Authorizer's Employee Number			Authorizer Phone # (in full) 943-1128		

ACCOUNTS PAYABLE ONLY

Invoice # _____	Comments:
Supplier # <u>29663</u>	
Recurring Payment:	
Start Date _____	
End Date _____	
# of Payments _____ Cycle _____	

ENTERED APR 20 2005

APPLICANT COPY

REGISTRATION/ORDER FORM

Directors Emeritus Dinner

Date: **June 9th, 2005**
 Dinner: **Sheraton Suites Eau Claire**
 225 Barclay Parade SW
 Reception: 6:30 p.m.
 Dinner: 7:30 p.m.
 Honouring: **Peter Lougheed, Elaine McCoy and Karen Kryczka**
 Cost: **\$125** (estimated political donation tax receipt \$100)

Tables of ten may be reserved

Please submit your registration/order form to the Calgary West PC Association:

Mail: PO Box 74046, Strathcona RPO Fax: 298-4495
 Calgary, Alberta T3H 3B6

Calgary Health Region 943-1225 / _____
Name Phone/Fax
10101 Southport Road SW
Complete mailing address
Calgary, AB
T2W 3N2

Dinner tickets# of tickets = 2 x \$125.00 = \$ 250.00

I would like to reserve a table

I would agree to host two guests

I am unable to attend, but wish to make a tax deductible donation to the Calgary West PC Association of: \$ _____

TOTAL: \$ 250.00

Cheque enclosed, payable to Calgary West PC Association

VISA# _____ (expiry date)

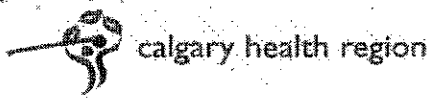
MC# _____ (expiry date)

Signature (Credit card orders)

QUESTIONS? CALL 298-3031

APPLICANT COPY

930 395



CHEQUE REQUISITION

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Date August 18, 2005	Requested By (Please Print) Lynn Redford	
Department Office of the CEO	Site Southport	Phone No (in full) 943-1225
MAKE CHEQUE PAYABLE TO: Calgary Nose Hill PC Association		Employee/Supplier #623389
MAILING ADDRESS (for forwarding of cheque) Attention: Ken McIvor		
Canada Post: 30 th Floor, Fifth Avenue Place, 237 – 4 Avenue SW		
City <u>Calgary</u> Province <u>AB</u> Postal Code <u>T2P 4X7</u>		
Interoffice Mail: Department <u>Office of the CEO</u>		
Site <u>Southport</u>		
Purpose of Request <u>(1) Ticket for reception</u>		
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS <u>please provide cheque to Lynn Redford who will forward the cheque to the organization</u>		

CODING & AUTHORIZATION

FINANCIAL CODE													AMOUNT	GL DESCRIPTION							
ORG	FUNCTIONAL CENTRE					ACCOUNT															
0	1	7	1	1	0	5	0	0	0	0	0	1	6	7	5	0	0	0	0	100.00	
ENTERED AUG 23 2005																					
TOTAL AMOUNT OF CHEQUE:													100.00	<input type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other							
Expenditure Officer Authorization <i>[Signature]</i>													Print Name Patti Grier								
Authorizer's Employee Number													Authorizer Phone # (in full) 943-1128								

ACCOUNTS PAYABLE ONLY s.17(1), 17(4)(g)(i)

Invoice # _____	Comments: <div style="border: 2px solid black; padding: 5px; text-align: center;">RECEIVED AUG 22 2005 FINANCE</div>
Supplier # <u>40817</u>	
Recurring Payment: _____	
Start Date _____	
End Date _____	
# of Payments _____	
Cycle _____	

00074

00074

APPLICANT COPY

October 25, 2005 "Cocktail Reception with The Honorable Ralph Klein"

Subject: October 25, 2005 "Cocktail Reception with The Honorable Ralph Klein"

Date: Thu, 18 Aug 2005 12:19:57 -0600

From: "McIvor, Ken" <ken.mcivor@fmc-law.com>

To: "lynn.redford@calgaryhealthregion.ca" <Lynn.Redford@CalgaryHealthRegion.ca>

Hi Lynn:

Sorry for the delay in getting a copy of the ticket to you; unfortunately, I have no way of providing an actual invoice to you. Cheques should be made payable to the "Calgary Nose-Hill Progressive Conservative Association" and can be mailed to my attention. Tax receipts will be issued to all contributors by our Treasurer. Once I receive your cheque, I will forward the actual ticket to you.

< <DAE6608.pdf> >


Thanks for your support.

Best regards,

Ken McIvor

FRASER MILNER CASGRAIN LLP
30th Floor
Fifth Avenue Place
237 - 4th Avenue S.W.
Calgary, AB T2P 4X7
(403) 268-7165 Direct Line
(403) 268-3100 Fax
ken.mcivor@fmc-law.com

This message, and any documents attached hereto, is intended only for the addressee and may contain privileged or confidential information. Any unauthorized disclosure is strictly prohibited. If you have received this message in error, please notify us immediately so that we may correct our internal records. Please then delete the original message. Thank you.

 DAE6608.pdf	Name: DAE6608.pdf Type: Acrobat (application/pdf) Encoding: base64 Download Status: Not downloaded with message
---	--

Name: _____

Address: _____

Postal Code: _____

Tel: _____

Tel: _____

Seller: _____

Tel: _____

Nº 0032

Neil Brown

Nº 0032

20 Alberta - Calgary-Nose Hill

Provincial Progressive Conservative Association

COCKTAIL RECEPTION WITH
THE HONOURABLE RALPH KLEIN

Tuesday, October 25, 2005 - 5:00 - 7:00 p.m.

Calgary Winter Club
4611 - 14th St. N.W., Calgary



Premier



M.L.A.

(Tax receipts will be issued for \$75)

- Business Attire -
SPONSORED BY CALGARY - NOSE HILL

APPLICANT COPY

84 178 5



calgary health region

CHEQUE REQUISITION

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. **ORIGINAL DOCUMENTS MUST BE ATTACHED**

Date March 3, 2005		Requested By (Please Print) Lynn Redford	
Department Office of the CEO		Site Southport	Phone No (in full) 943-1225
MAKE CHEQUE PAYABLE TO: Calgary Egmont PC Association			Employee/Supplier #623389
MAILING ADDRESS (for forwarding of cheque)			
Canada Post: 14728 Deer Run Drive SE			
City Calgary		Province AB	Postal Code T2J 5Z3
Interoffice Mail: Department Office of the CEO			
Site Southport			
Purpose of Request		(2) Tickets for breakfast speaker	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS _please provide cheque to Lynn Redford who will forward the cheque to the organization_____			

MAR 08 2005

CODING & AUTHORIZATION

FINANCIAL CODE				AMOUNT	GL DESCRIPTION
ORG	FUNCTIONAL CENTRE	ACCOUNT			
0 1	7 1 1 0 5 0 0 0 0 0 1	6 7 5 0 0 0 0 0 0	150.00		
ENTERED MAR 09 2005					
TOTAL AMOUNT OF CHEQUE:				150.00	GST \$ <input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other
Expenditure Officer Authorization <i>[Signature]</i>				Print Name Patti Grier	
Authorizer's Employee Number				Authorizer Phone # (in full) 943-1128	

ACCOUNTS PAYABLE ONLY

Invoice # _____	Comments:
Supplier # <u>38652</u>	
Recurring Payment:	
Start Date _____	
End Date _____	
# of Payments _____ Cycle _____	

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APPLICANT COPY

EGMONT PC CONSTITUENCY ASSOCIATION
BREAKFAST FUNDRAISER
Monday, May 16, 2005

14728 Deer Run Drive S.E.
Calgary, Alberta T2J 5Z3
Judy Morris
Direct Line: 403 278-2925
E-Mail: ejmorris@telusplanet.net

February 28, 2005

Calgary Health Region,
10101 Southport Road S.W.
CALGARY, Alberta
T2W 3N2

Attention: Ms. Lynn Redford,
Government Relations Advisor

Dear Ms. Redford:

On behalf of Calgary-Egmont MLA Denis Herard and our constituency association, I would like to thank you for your request to purchase two tickets to our breakfast fundraiser at the Fairmont Palliser Hotel, on Monday, May 16, 2005 beginning at 7:00 A.M. The tickets for this event are \$75.00 each with a tax receipt to be issued in the amount of \$50.00.

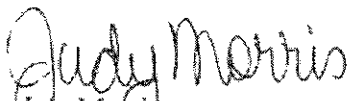
Tickets will be forwarded to you on receipt of payment which you advised would be forthcoming on receipt of our notice.

Sincere thank you for your request and we look forward to meeting you at this event. It should be very interesting.

Best regards,

Yours very truly,

Egmont PC Constituency Association


J.A. Morris
President

/jm

APPLICANT COPY

896584



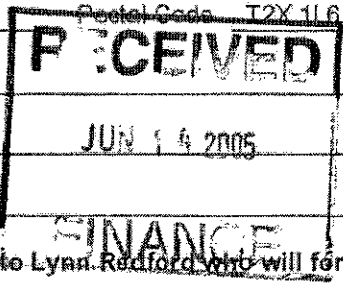
calgary health region

CHEQUE REQUISITION

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date June 3, 2005	Requested By (Please Print) Lynn Redford	
Department Office of the CEO	Site Southport	Phone No (in full) 943-1225
MAKE CHEQUE PAYABLE TO: Calgary Shaw PC Association		Employee/Supplier #623389
MAILING ADDRESS (for forwarding of cheque)		
Canada Post:	7 Midlake Green SE	
	City Calgary	Province AB Postal Code T2X 1L6
Interoffice Mail:	Department Office of the CEO	
	Site Southport	
Purpose of Request	(2) Tickets for breakfast	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS please provide cheque to Lynn Redford who will forward the cheque to the organization _____		



CODING & AUTHORIZATION

FINANCIAL CODE			AMOUNT	GL DESCRIPTION
ORG	FUNCTIONAL CENTRE	ACCOUNT		
0 1	7 1 1 0 5 0 0 0 0 0 1	6 7 5 0 0 0 0 0	150.00	
ENTERED JUN 16 2005				
TOTAL AMOUNT OF CHEQUE:			150.00	GST \$ <input type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other
Expenditure Officer Authorization 			Print Name Patti Grier	
Authorizer's Employee Number			Authorizer Phone # (in full) 943-1128	

ACCOUNTS PAYABLE ONLY

Invoice # _____	Comments:
Supplier # _____	
Recurring Payment: <u>39969</u>	
Start Date _____	
End Date _____	
# of Payments _____ Cycle _____	

00074

APPLICANT COPY

Duncan L. McKillop Q.C.
BARRISTER AND SOLICITOR

7 MIDLAKE GREEN S.E.
CALGARY, ALBERTA, CANADA
T2X 1L6

TEL. (403) 256-5547
FAX. (403) 256-5291
EMAIL: MCKILLOP@CADVISION.COM

JUNE 3/05

CALGARY HEALTH REGION
ATT LYN REDFORD 943-1124

INVOICE

To Two Tickets For Cindy Adv
BREAKFAST JUNE 29 2005

150⁰⁰

D L McKillop

WANTED

INFRASTRUCTURE FOR THE PROVINCE OF ALBERTA

\$75 PER PERSON



MLA CINDY ADY ★ DOC LYLE OBERG

JOIN CINDY ADY, MLA AND HER GUEST SPEAKER
MINISTER OF INFRASTRUCTURE AND TRANSPORTATION

DR. LYLE OBERG

AT THE CALGARY SHAW PROGRESSIVE CONSERVATIVE PARTY
FUNDRAISER BREAKFAST

7:30 AM WEDNESDAY, JUNE 29

APPLICANT COPY

922838



calgary health region

CHEQUE REQUISITION

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. **ORIGINAL DOCUMENTS MUST BE ATTACHED**

Date August 8, 2005	Requested By (Please Print) Lynn Redford	
Department Office of the CEO	Site Southport	Phone No (in full) 943-1225
MAKE CHEQUE PAYABLE TO: Calgary Buffalo PC Association		Employee/Supplier #623389
MAILING ADDRESS (for forwarding of cheque)		
Canada Post:	65 Galway Crescent SW	
	City <u>Calgary</u>	Province <u>AB</u> Postal Code <u>T3E 4Y4</u>
Interoffice Mail:	Department <u>Office of the CEO</u>	<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: auto;"> <p>RECEIVED</p> <p>AUG 10 2005</p> <p>FINANCE</p> </div>
	Site <u>Southport</u>	
Purpose of Request	<u>(4) Tickets for dinner</u>	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS <u>please provide cheque to Lynn Redford who will forward the cheque to the organization</u>		

CODING & AUTHORIZATION

FINANCIAL CODE			AMOUNT	GL DESCRIPTION
ORG	FUNCTIONAL CENTRE	ACCOUNT		
0171105000001	67500000		400.00	
				GST \$
TOTAL AMOUNT OF CHEQUE:			400.00	<input type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other
Expenditure Officer Authorization 			Print Name Patti Grier	
Authorizer's Employee Number			Authorizer Phone # (in full) 943-1128	

ENTERED AUG 10 2005

ACCOUNTS PAYABLE ONLY s.17(1), 17(4)(g)(i)

Invoice # _____	Comments:
Supplier # <u>30814</u>	
Recurring Payment:	
Start Date _____	
End Date _____	
# of Payments _____ Cycle _____	

00074

APPLICANT COPY



The Calgary Buffalo P.C. Association

Invoice

August 4, 2005
Invoice# 081001

Sold to: **CHR, Lynn Redford**

Qty	Event	Ticket Price
4	2005 Chinese Cultural Fundraiser September 29 th	\$100.00 each
	Invoice payable on receipt. Tickets will be sent out upon receipt of payment.	
Total		\$ 400.00

Make cheques payable to: Calgary Buffalo PC Association
65 Galway Cres. SW
Calgary, Alberta, T3E 4Y4
(403) 244-3985

A tax receipt for \$75.00 per ticket will be issued

Visa or MasterCard payments can be made by calling 244-3985

Thank you for your support!

APPLICANT COPY

1239491

*Pay site pls
Thy jaci*

Calgary Mc Call P.C. Association
c/o 47 Coralsprings Blvd. N.E.
Calgary Alberta T3J 3J3

Invoice No. 102

INVOICE

Customer		Date	
Name	Calgary Health Region	Date	2/5/2007
Address		Order No.	
City	Calgary State AB ZIP	Rep	
Phone		FOB	

Qty	Description	Unit Price	TOTAL
8	8 Dinner Tickets, cost of meals only	\$45.00	\$360.00

Payment Details

Cash
 Check
 Credit Card

Name _____

CC # _____

Expires _____

Sub Total	\$360.00
Shipping & Handling	\$0.00
Taxes State	
TOTAL	\$360.00

Office Use Only

PO # 490594 (Feb. 20.07)

APPLICANT COPY

Purchase Order Distributions (CRHA-OU)

Number	Deliver To Person	Release	Line	Shipment	Distribution	Item
400594	NELSON, KAREN		1	1	1	

APPLICANT COPY

174/680

Calgary Loughheed PC Association
 Box 73064 WPO
 206 2525 Woodview Dr. SW
 Calgary Alberta T2W 6E8

INVOICE

DATE: February 26, 2007

To: Calgary Health Region
 c/o Karen Nelson
 10101 Southport Road SW
 Calgary AB T2W 3N2

Ship To: Same

SALESPERSON	P.O. NUMBER	DATE SHIPPED	SHIPPED VIA	F.O.B. POINT	TERMS
NA	NA		NA	NA	Due upon Receipt

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
2	Tickets to March 9 th Dave Rodney/Premier Stelmach Breakfast	\$40.00	\$80.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00

SUBTOTAL	\$80.00
SALES TAX	NA
SHIPPING & HANDLING	NA
TOTAL DUE	\$80.00

PO# 483423 (Feb 29 07)

Make all checks payable to: Calgary Loughheed PC Assoc.
 If you have any questions concerning this invoice, call: Bob Young 850-5575

THANK YOU FOR YOUR SUPPORT!

APPLICANT COPY

Purchase Order Distributions (CRHAOU)

Number	Deliver To Person	Release	Line	Shipment	Distribution	Item
463423	NELSON, KAREN		1	1	1	

New Release New PO New Order

APPLICANT COPY

DAVE RODNEY
MLA, CALGARY LOUGHEED
CALGARY CAUCUS CHAIR

1/24/68



Invites you to the

**CALGARY LOUGHEED PC ASSOCIATION
ANNUAL BREAKFAST FUNDRAISER**

With special guest:

THE HON. ED STELMACH
PREMIER OF ALBERTA



DATE: Friday March 9, 2007

PLACE: Fairmont Palliser Hotel Crystal Ballroom
133 - 9th Avenue SW

TIME: 7:00am doors and coffee, 7:30am breakfast, 8:00am speakers
We will have you out by 9:00am

Tickets: Regular: \$125 (provincial tax receipt will be issued)
Tables of 8 - \$850
Students/youth (under 25): \$40 (no tax receipt)

Please complete the ticket order form below. Tickets are limited!
For more information call Bob Young 257-4904

Please send me: _____ regular seat(s) @ \$125 _____ student seat(s) @ \$40
_____ table(s) @ \$850

Payment method (circle one): CHEQUE VISA MASTERCARD

Card #: _____ expiry date: _____

Best Copy Possible

Signature: _____

Name: Karen Nelson Company: Calgary Health Region

Address: 1912 Southmount Rd SW Postal: T2W 3M2

Phone: 943-1383

Issue tax receipt to: _____

Additional names of those attending: 2 tickets at main price = \$250.00

Ruth Grier and Mark Kofner will attend.
please send to attend

Please make cheque payable to: Calgary Lougheed PC Association
and mail to: 73064 WPO; 206, 2525 Woodview Drive SW; Calgary, AB; T2W 6E4

fax to (403)291-0037 attn: Bob Young
or email to: robertnyoung@gmail.com

received
Oct. 16 / 2007

PC Alberta

Calgary Foothills PC Association

c/o 139 Wood Valley Drive SW, Calgary, AB T2W 5T5

Invoice No.: 20071001

Date: October 12, 2007

To: Ms. Karen Nelson
Calgary Health Region
10101 Southport Road SW
Calgary, Alberta
T2W 3N2

Quantity	Description	Unit Price	Total Amount
2	Calgary Foothills PC Fundraising Banquet at Regency Palace Restaurant, Food Cost ONLY	\$30.00	\$60.00

PAYMENT DUE UPON RECEIPT

Please make cheque payable to: Calgary Foothills PC Association

Thank you