



Cardholder Activity

Name: MICHAEL BRENNEIS

Account Number:

Cycle End Date: 11/28/2022

Trans Date Posting Date	Merchant Name City, State/Prov.	Transaction Total	National	Regional	Source Currency	Currency Amount
		Allocation Amounts			Accounting Code	Allocation Comment
10/31/2022	PAPA JOHN'S PIZZA # 11	\$53.27	\$2.54	\$0.00	CAD	53.27
11/01/2022	780-459-7299, AB	\$53.27	\$2.54	\$0.00	46145000000024	Purchase Reimbursed by MRB via personal cheque
11/19/2022	RENAISSANCE EDMONTON AIRP	\$216.91	\$9.95	\$0.00	CAD	216.91
11/21/2022	EDMONTON, AB	\$216.91	\$9.95	\$0.00	46545000000024	PD Accommodations - MRB
11/25/2022	THE CAJUN HOUSE	\$131.59	\$5.39	\$0.00	CAD	131.59
11/28/2022	ST ALBERT, AB	\$131.59	\$5.39	\$0.00	46145000000024	Meeting, Active Communities - Krimsen S., Matt B., Matt B. & Michael B.

Activity Totals	Purchases	Payments	National Taxes	Regional Taxes
\$401.77	\$401.77	\$0.00	\$17.88	\$0.00

Cardholder Name: Michael Brenneis

Signature:

Supervisor Name: Krimsen Summers

Signature:

MICHAEL

BRENNEIS

DATE 20 22 - 11 - 30
Y Y Y Y M M D D

PAY TO THE
ORDER OF

St. Albert Public Schools

\$ 53.27

- Fifty Three

27

100 DOLLARS



MEMO

reimbursement

Michael Brenneis

MP

BRENNEIS/MICHAEL		199.00	11/18/22	11:06		
NAME		RATE	DEPART	TIME	ACCT#	GROUP
GQ			11/17/22	18:05		
TYPE			ARRIVE	TIME		
27						
ROOM					MBV#:	
CLERK	ADDRESS	PAYMENT				
DATE	REFERENCES	CHARGES	CREDITS	BALANCES DUE		
11/17	ROOM 336, 1	199.00				
11/17	GST 336, 1	9.95				
11/17	TRSM LEV 336, 1	7.96				
11/18	CCARD-VS			216.91		
	PAYMENT RECEIVED BY: VISA					.00

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Gst # 813149820 RT0001

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 HOTELS

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 4236-36 STREET
 ED INTRN. APT. AB T9E 0V4
 780-488-7159 FAX: 780-488-6372

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This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amounts shown in the credit column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount, if you are direct billed, in the event payment is not made within 25 days after check-out, you will owe us interest from the check-out date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

Signature X



7 St Anne Street
 St. Albert, AB T8N 2X4
 780-460-8772
 GST#: R130221641

*Krimson S
 Matt Bac
 Matt Ben
 Michael B*

THE CAJUN HOUSE
 SUITE 102 7 ST ANNE ST
 ST ALBERT, AB, T8N 2X4
 780-460-8772

SALE

Batch #: 562
 11/25/22 13:20:33
 APPR CODE:
 Trace: 12
 VISA Chip
 *** **/**

AMOUNT \$113.09
 TIP \$18.60
 TOTAL \$131.59

APPROVED

VISA CREDIT
 AID: A0000000031010 00
 TSt: EB 00

THANK YOU / MERCI
 CUSTOMER COPY

10 LADY DI

Tot 13/ Chk 2464 Gst 4
 Nov 25 '22 11:52AM

1 SEAFOOD BOWL	9.00
1 SOUP AND SALAD	14.00
1 VITALITY TEA	3.95
3 POP @ 3.25	9.75
1 STEAK SAND	22.00
1 CHIX JACKSON	30.00
1 LOUISIANA JAMBAL	19.00

Subtotal 107.70
 107.70 GST 5.39
 Amount Due **113.09**

Thanks for Dining With Us!
 PLEASE PAY SERVER