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BRITISH COLUMBIA BC Public Service

# Where ideas work

### **Travel Voucher (Restricted Use)**

Control No.

E113444 Freedom of Information and Protection of Privacy: The personal information you are providing is collected for the purposes of travel expense administration and under the authority of the Financial Administration Act. The collection, use and disclosure of personal information is in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions regarding this collection, please contact your Ministry's Director/Manager of Information and Privacy. Name Employee ID Phone Number Macintyre, Sara (250) 387-1715 s22 **Client Organization** JOD HILE Travel Group Code Office of the Premier **Director of Communications** 5. Date Completed 6. Fiscal Year 7. Special Cheque Issue 8. Cheque Stub Information 2012/09/20 2013 Type of Travel 14. Reason for Travel Headquarters In Province **Business / Travel** Victoria 12. Mailing Address for Cheque 16. 17. 20. & 21. 18 19. 22. 20. & 21. Travel Places Travelled Other Personal Meals Miscellaneous Dates Vehicle Use Transport Lodging 2012~ Destination Start End Cost Claim Cost Km Costs Cost Costs Describe 09/05 180.12 ≮ F-BL 180.12 ≮ F-I Vic-Van 1645 2300 0.00 30.50 195.60 09/06 Van-Vic 0700 2030 0.00 39.25 36. 37. 38. 39 40. Claim Total TOTALS OF COLUMNS \$ 0.00 \$ 360.24 \$ 69.75 \$ 195.60 \$ 0.00 \$ 625.59 48. 49 50. 51. 52, 45. **Client** Code STOB Service Line Resp. Project Supplier Code Amount 004 36AID 65015701 004 36200 ~ 3600000 \$ 625.59 004 004 004 s22 Less Travel Advance 004 54. AMOUNT DUE TO EMPLOYEE \$ 625,59 45. Employee Signature (See Audit Trail) Print Name Date Signed - Certified this travel expense claim is a true statement of disbursements made and/or allowances to which I am entitled as a result of travel on government business as detailed above and for which I have not been and will not be reimbursed by any other party. 56. Spending Authority Signature (See Audit Trail) Print Name **Date Signed** - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies. 57. Payment Authority Signature (See Audit Trail) Print Name Date Signed - Requisition for payment pursuant to section 32 of the Financial Administration Act. FIN 10 (EFI-F0012 v2.6.1) Production \*\*\* Copyright © Government of British Columbia Ministry Spending Authority ARCS 1240-20

Ministry Payment Authority ARCS 1050-06



Audit Trail for Travel Voucher (Restricted Use) E113444 for MacIntyre, Sara

Date/Time	Who	On Behalf Of	Action	Next To Act
2012/09/20 13:54:18	Haakstad. Kim s15 Louise.Ross@gov.bc.ca	MacIntyre, Sara Sara.MacIntyre@gov.bc.ca	Saved	MacIntyre, Sara Sara.MacIntyre@gov.bc.ca
2012/09/20 13:54:25	Haakstad, Kim s15 Louise.Ross@gov.bc.ca	Macintyre, Sara Sara.Macintyre@gov.bc.ca	Notified	MacIntyre, Sara Sara.MacIntyre@gov.bc.ca
2012/09/21 13:36:33	MacIntyre, Sara s15 Sara.MacIntyre@gov.bc.ca		Approved	dLeamy, Michelle Michelle.Leamy@gov.bc.ca
2012/10/01 09:37:57	Leamv. Michelle s15 Michelle.Leamy@gov.bc.ca			IFSA MIN OFF, FIN FINFSAMINOFF@gov.bc.ca

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Notes for Travel Voucher (Restricted Use) E113444 for MacIntyre, Sara									
Created On	Author	Note							
2012/09/20 13:54:18	Haakstad. Kim s15 Louise.Ross@gov.bc.ca	09/05/12 Vic-Van HA/FL#2220 \$180.12 / 1- Night ACC \$195.60 09/06/12 Van-Vic HA/FL#227 \$180.12							

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#### http://gww.eforms.gov.bc.ca/Libraries/PrintFormsShell.htm

## Page 3 FIN-**201220180**504

	s15		×	Room Folio # Invoice # Cashier # Page #	:	s22 s15 1 of 1		
Victoria BC Canada	Stn Prov Gov	ŧ		Arrival Departure s <sup>2</sup>	: : 15, s22	09-05-12 09-06-12		
Date	. Topsarlution		Additional/Inform	ation			Charges	Credits
09-05-12	Room Charge	•					169.00	
09-05-12	Destination M	arketing Fee*					2.22	
09-05-12	Hotel Room T	ax					3.42	
09-05-12	Room HST						20.96	
09-06-12	s22		XXXXXXXXXXXXX	s22	XX/XX	(		195.60
			Total				195.60	195.60
			Balance	Due			0.00	
<u>GST Sum</u> Room : F&B : <u>Other :</u> Total :	<u>mary</u> 0.00 0.00 0.00 0.00	HST Summary Room : F&B : Other : Total :	20.96 0.00 0.00 20.96					

s15

Doyle, Chief of Staff Dan

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## Harbour Air Seaplanes

Vancouver	(604)	274-1277
Victoria	(250)	384-2215
Nana imo	(250)	714-0004

Toll-free 1-800-665-0212 Website: www.harbourair.com 05/09/2012 5:05:41 PM GST: 84295 5858 RT0001

s15

CUSTOMER COPY

Booking Information:

Louise Ross (Office Of The Premier) Flight #2220 / 1 Passenger(s) Wednesday, September 5, 2012 Departs Victoria Harbour 0 17:20 PM Arrives Vancouver Harbour 0 17:55 PM

Group list:

o MacIntyre, Sara

## Invoice #: 3538607

1.00	Sked 200	: Carbon Offset \$0.50	CDN
1.00	Sked 200	; Fuel Surcharge \$5.00	CDN
1.00	Sked 200	: Web Fare - \$ \$155,32	

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Louise Ross (Office Of The Premier) Flight #227 / 1 Passenger(s) Thursday, September 6, 2012 Departs Vancouver Harbour @ 19:00 PM Arrives Victoria Harbour @ 19:35 PM

Group list: o MacIntyre, Sara

## Invoice #: 3538608

1.00 Sked 200 : Carbon Offset \$0.50 CDN 1.00 Sked 200 : Fuel Surcharge \$5.00 CDN 1.00 Sked 200 : Web Fare - \$ \$155.32 CDN

Harmonized Sales Tax - \$38.60 HST

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Gracer (See

160.24 CDN

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#### **SMARTTEC Travel Confirmation**

| Traveller:<br>Prepared By: | Sara MacIntyre<br>Louise Ross | $\checkmark$ |
|----------------------------|-------------------------------|--------------|
| Purpose of Travel:         | Business/Travel               |              |

SMARTTEC Confirmation Number: s22

If there is an expense claim associated with this travel then attach this PDF to your iExpenses travel claim. The SMARTTEC PDF report must be saved with the default name assigned by the system before attaching it to your iExpenses claim. Any change to the file name will flag your claim as non-compliant when your Ministry reports on it.

| Outbound<br>Date<br>2012/09/05       | Travel Mode                                | From<br>Victoria Harbour  | To<br>Vancouver Harbour | Distance<br>99.0 | CO2e kg<br>21.1 | Flight#<br>2220 |
|--------------------------------------|--------------------------------------------|---------------------------|-------------------------|------------------|-----------------|-----------------|
| Return Tri<br>Date<br>2012/09/06     | p<br>Travel Mode<br>Airplane - Float Plane | From<br>Vancouver Harbour | To<br>Victoria Harbour  | Distance<br>99.0 | CO2e kg<br>21.1 | Flight#<br>227  |
| <b>Accommo</b><br>Date<br>2012/09/05 | dations<br>Accommodation Provider<br>s15   |                           | Address<br>Vancouver    |                  | Nights<br>1     | CO2e kg<br>12.6 |

Total CO2 Equivalent Emissions: 54.8 kg

The emissions (CO2e) reported above are based on emission factors approved by the Ministry of Environment at the time your travel was finalized. Please note that emission factors are updated periodically and may change your emission records retroactively. These changes would be reflected in SMARTTool.

| BRITISH<br>COLUMBIA<br>FOR SALE      | ere ideas w                              | ork                          |            | Ministry of Fina<br>INVOICE C                              |                                       |                                    |                            | CHEQUE TO MINI<br>(if yes, ente                                                                     |                                                                                                                |
|--------------------------------------|------------------------------------------|------------------------------|------------|------------------------------------------------------------|---------------------------------------|------------------------------------|----------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| <u>Link to Invoice Codi</u> i        | ng Sheet completion                      | <u>i instructions.</u>       |            |                                                            |                                       | F                                  |                            | FOREIGN CURRI<br>(if yes, ente                                                                      |                                                                                                                |
| PAYEE NAME                           | OMEGA AI                                 | R CORPOR/                    | ATION      |                                                            |                                       | _ * Supf                           | PLIER # 08                 | 1270 * SITE                                                                                         | 002                                                                                                            |
| CONTRACT/PO #                        | ŧ                                        |                              | _ INV      | OICE DATE                                                  | 25-SEP-20                             |                                    |                            | 106215                                                                                              |                                                                                                                |
| DATE INVOICE R                       | ECEIVED                                  | 25-SEP-201                   | .2         | DATE GOODS                                                 | / SERVICES RE                         | EC'D                               | 20-SEP-2012                | RECEIPT #                                                                                           |                                                                                                                |
| NAME &/OR AD                         | DRESS OVERRID                            | E:                           |            |                                                            | DESCRIPTIC                            | ON FOR CH                          | IEQUE STUB:                | • • • • • • • • • • • • • • • • • • •                                                               |                                                                                                                |
|                                      | •                                        |                              | ·          |                                                            |                                       |                                    |                            |                                                                                                     |                                                                                                                |
| DATE CHQ/EFT  <br>ONLY IF URGENT)    | REQ'D                                    | DD-MMM-YYYY                  |            | GL DATE (if ap                                             | plicable)                             |                                    | •MMM-YYYY                  | PAY ALONE? YE                                                                                       | s 🗋                                                                                                            |
| AMOUNT<br>(INCLUDING TAX)            | PRE-TAX<br>AMOUNT                        | TAX RATE<br>12%, 11%, 5%, 6% | CL         | RESP<br>not response                                       | SERVICE<br>LINF                       | STOB                               | PROJECT                    | NAME & SUPPLIER<br># if STOB 57                                                                     | OFA STOB &<br>ASSET #                                                                                          |
| . >                                  |                                          |                              |            |                                                            |                                       |                                    | •                          |                                                                                                     |                                                                                                                |
|                                      |                                          |                              |            | :                                                          |                                       |                                    |                            |                                                                                                     |                                                                                                                |
|                                      |                                          |                              |            |                                                            | · .                                   |                                    |                            |                                                                                                     | I                                                                                                              |
|                                      |                                          |                              |            | no                                                         | t responsive                          |                                    |                            |                                                                                                     |                                                                                                                |
| 507.84                               | 453.43                                   | 12%                          | <i>∞</i> 4 | 36A10                                                      | 36200                                 | 5712                               | 36mtsac                    | macintyres                                                                                          | Sarata                                                                                                         |
| not responsive                       | TOTAL                                    | ·                            |            |                                                            |                                       |                                    |                            |                                                                                                     |                                                                                                                |
| EXPENSE AUT                          | IORITY (EA) INF                          |                              | •          |                                                            |                                       | D RECEIVI                          | ER (QR) CERTIFI            |                                                                                                     |                                                                                                                |
|                                      | EA PRINTER                               | LE LEAMY                     |            |                                                            | *                                     |                                    | ALISHA OL<br>QR PRINTED I  | VAME                                                                                                |                                                                                                                |
| BRIEF PAYMEN<br>Note: This is also t | IT DESCRIPTION<br>he line description of |                              |            |                                                            | properly received<br>correct quantity | d and document<br>and suitable qua | ation to support the accou | ted or reviewed; and the good<br>Int has been verified (I.e., goo<br>d, appropriate deliverables ar | ds: as ordered,                                                                                                |
|                                      | hall a                                   |                              |            |                                                            | *                                     | Â                                  | hlf                        |                                                                                                     |                                                                                                                |
| ADDITIONAL INF                       | ORMATION OR                              |                              | ONS:       | MQAnay ar an a fair an ann an Anna Anna Anna Anna Anna Ann |                                       |                                    | QR SIGNATI                 |                                                                                                     |                                                                                                                |
|                                      |                                          |                              |            | ******                                                     |                                       |                                    |                            | AECEIVA                                                                                             | 2                                                                                                              |
|                                      |                                          |                              | HONE       | NUMBER:                                                    |                                       |                                    | AĆC                        | OUNTS DATE STA                                                                                      | the second s |
| Note: Fields with                    | (250) 356-260<br>an asterisk do no       |                              | comple     | ted for iBrocuron                                          |                                       |                                    | , \c                       | CORPORATE AND MINISTR<br>SUPPORT SERVICES<br>FSA                                                    |                                                                                                                |

| BLACKCOM<br>Aviation<br>HELICOPTER AND JET CHARTER SERV                                                                 |                                       |                                                |                       | Nautial                      |  |
|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------|------------------------------------------------|-----------------------|------------------------------|--|
| September 25, 2012                                                                                                      |                                       | Invoice No.                                    | 106215                | Nautial<br>nile<br>1) 151 nm |  |
| Office of the Premier<br>PO Box 9041<br>Stn Prov Govt<br>Victotia, BC<br>V8W 9E1                                        |                                       | Trip No.<br>Cust. No.<br>Quote No.             | 6140<br>s17, s22      | 2) 151 nr<br>302             |  |
| Attn: Tamara Davidson                                                                                                   |                                       | •                                              |                       |                              |  |
| Description                                                                                                             | Trip                                  | Sequence                                       |                       |                              |  |
| Service Date Aircraft<br>20-Sep-12 C-FMCG                                                                               | Departure<br>Vancouver, BC            | Destination<br>Kelowna, BC                     | Passengers<br>not res | sponsive                     |  |
| 20-Sep-12 C-FMCG                                                                                                        | Kelowna, BC                           | Vancouver, BC                                  | Same 3 Paxs           | 5                            |  |
|                                                                                                                         | DEC                                   | EIVEN                                          | not                   | responsive                   |  |
| Aircraft<br>Air Travellers Security Charge<br>Int'l Processing Fees<br>Fuel Surcharges<br>Landing Fees<br>Crew Expenses | DEPUTY MI                             | P 2 6 2012<br>NISTER'S OFFICE<br>F THE PREMIER | \$                    |                              |  |
| Special Request Catering<br>Third Party Exp.                                                                            |                                       |                                                | not respo             | onsive                       |  |
|                                                                                                                         | Subtotal<br>HST<br>Total              | 89422 0383RT                                   | \$                    | ~                            |  |
| Terms : Due on Receipt                                                                                                  | · · · · · · · · · · · · · · · · · · · |                                                |                       |                              |  |
| Thank you for your Business<br>Remit payment to:<br>Omega Air Corporation<br>#400 - 375 Water st.                       |                                       |                                                |                       |                              |  |

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