Ministry of Advanced Education

PAYMENT REQUEST

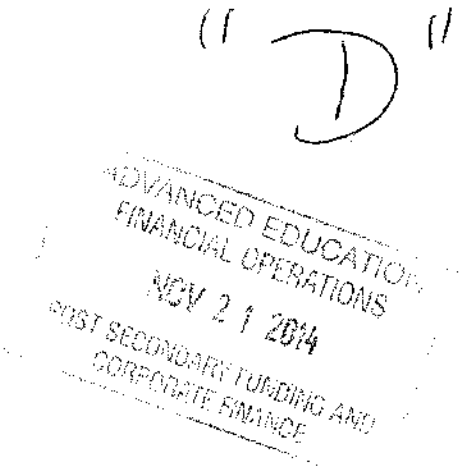
Date: November 20, 2014 **Invoice #:** see attached

Recipient: Dao Luu

Payment Amount: $128.79

Description: Reimbursement of toner for printer

Requested by: Anita Culleton
Governance and Quality Assurance Branch
3rd Fl, 835 Humboldt St



STAPLES Canada
Store # 45
1 6390 No 3 Road
Richmond, BC V6Y2B3
604-270-9599

Sale 00092 2 002 44288
0045 10/20/14 04:17

****

ENTER TO WIN!
$1,000 STAPLES SHOPPING SPREE

Staples listens and values your feedback.
Tell us how we did today!

Visit www.StaplesListens.ca

Your Survey Code: Barcode at the bottom
Expires: 10/27/2014

****
****

9999999

1 CANON 128 BLK TONE	
013803121674	114.99B
Subtotal	114.99
PST 7.00%	8.05
GST 5.00%	5.75
Total	$128.79
MasterCard	128.79

s.17

Mastercard	F	Achat
Autorisation		016498
0010012600	44288	66164404
92	10/20/14	16:17:19

01/027 APPROUVEE - MERCI
CARTE A PUCE GLISSEE

****

Thank you for shopping at STAPLES!
We will not be undersold!
Visit Staples.ca

IMPORTANT
Retain This Copy for Your Records

GST No. 126152586

0 0 4 5 1 ...

Goods/Services Received by: [signature]

D.90 LUV

2097157 19

Date D9

11110 18110 6305

110000 $128.79

e-sign
Mary Shaw

Culleton, Anita Y AVED:EX

From: Luu, Dao AVED:EX
Sent: Thursday, November 20, 2014 5:08 PM
To: Culleton, Anita Y AVED:EX
Subject: RE: Toner Reimbursement

Hi Anita,

The toner was purchased for my printer at home which I use exclusively for work purposes.

Thank you,
Dao

Dao T. Luu
Governance and Quality Assurance
Ministry of Advanced Education
Province of British Columbia
Cell: (604) 362-8087 | Fax: (250) 387-3750

From: Culleton, Anita Y AVED:EX
Sent: November-20-14 11:13 AM
To: Luu, Dao AVED:EX
Subject: Toner Reimbursement

Hello Dao,
Would you please send me an email confirming that you bought the toner for your printer while working at home? Finance has asked for this to be included with the request for reimbursement.

Thanks!

BRITISH COLUMBIA

Anita Culleton, B. Ed
Administrative Coordinator
Governance and Quality Assurance Branch
Ministry of Advanced Education
☎ 250 356-5406 Fax: (250) 387-3750

Hansen, Erin AVED:EX

From: Staples [bd.website@orders.staples.com]
Sent: Friday, October 24, 2014 12:04 PM
To: Hansen, Erin AVED:EX
Subject: Staples order #: 5408171804

Hello Erin Hansen,

Thank you for choosing Staples. Below is a summary of your recent order. We'll send you another email once it's shipped. You can check the status of your order anytime by visiting My Account on staples.ca® .

Order: 5408171804
Customer: s.17

Order Date: October 24, 2014
Order Total: $114.23

Deliver to: MINISTRY OF ADVANCED EDUCATION, 835 HUMBOLDT ST, VICTORIA, BC V8V4W8

Expected Delivery: **October 27, 2014**

Item Name	Price	Qty.	Subtotal
DC LEX,RETURN,BLACK,1.5K Item: 117469	$101.99	1	$101.99

Payment Information

Billing Address :
ERIN HANSEN
MINISTRY OF ADVANCED EDUCATION
835 HUMBOLDT ST
VICTORIA, BC V8V4W8

Exclusive offers have been applied where applicable.

Merchandise Total:	$101.99
Shipping:	FREE
GST (or HST):	$5.10
PST:	$7.14
Total:	**$114.23**

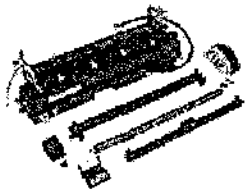
Payment Methods
MC ending in 9751

If you have any questions about your order, please visit our Help Centre.

YOU MIGHT ALSO LIKE:

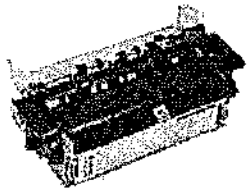
Lexmark 40X0100 115v Maintenance Kit

$355.06
Each



Lexmark 56P2036 115v Fuser Maintenance Kit

$310.32
Each



Lexmark 40X3569 Fuser Maintenance Kit

$267.89
Each

Free shipping on all orders over $45

Get fast shipping every day.

Free Returns

Not 100% satisfied? Return items easily online.

Price Match Guarantee

Pay the lowest price every time you shop. We'll match any competitor with an online and retail store.

Packing Slip - Bon de Livraison

REFER TO ORDER NO. FOR ALL INQUIRIES - MENTIONNER CE NO DE COMMANDE POUR TOUTE QUESTION

staples.ca/businessdepot.com
14840 KNOX WAY
RICHMOND, BC V6V 2Z7

TEL: 1-800-668-6888 staples.ca/businessdepot.com
FAX: 1-800-567-8260
ad.support@orders.staples.com GST# 12A 161 [illegible]

CUSTOMER NO. - NO DE CLIENT	SHIP DATE DATE D'EXPÉDITION	ORDER NO. - NO DE COMMANDE
s.17	10/24/14	[illegible]

PURCHASE ORDER NO. - NO DU BON D'ACHAT	RELEASE NO. - NO DE DISTRIBUTION

COST CENTER - CENTRE DE COÛTS	REQUISITIONER - DEMANDEUR

SHIPPING LOCATION:
ENDROIT D'EXPÉDITION: [illegible] VANCOUVER DEL CENTRE
[illegible]

CARRIER/ROUTE:
TRANSPORTEUR/ROUTE:
DELIVERY SCHEDULE:
HORAIRE DE LIVRAISON:
TOTAL PACKAGES:
NBRE DE PAQUETS AU TOTAL:
PAGE: of
PAGE: de

SHIP TO / EXPÉDIER À
MINISTRY OF ADVANCED EDUCATION
ERIN HANSEN
835 HUMBOLDT ST
VICTORIA, BC V8W4H8

SOLD TO / VENDU À
WELCOME TO STAPLES
ERIN HANSEN
[illegible]
VICTORIA, BC V8V4H8
(250) [illegible]

SPECIAL INSTRUCTIONS: / INSTRUCTIONS SPÉCIALES: [illegible] NONE

LINE GAMME	ITEM NUMBER NO D'ARTICLE	QTY ORDERED QTE COMMANDÉE	QTY SHIPPED QTÉ EXPÉDIÉE	QTY B/O QTÉ DIFFÉRÉE	UNIT MEAS. UNITÉ DE MES.	ITEM DESCRIPTION / DESCRIPTION DE L'ARTICLE / MODEL NUMBER / NUMÉRO DU MODÈLE	
	137489	1	1		EA	[illegible] 101.99	101.99
						Total # Items/Products :	101.99
						Shipping and Handling :	.00
						GST [illegible] 5.0000%	5.10
						PST [illegible] 7.0000%	7.14

MINISTRY OF ADVANCED EDUCATION
Goods/Services Received by: Erin Hansen
Supplier #
Client # 019
Vote
P.O./Contract #
Resp. 11005
Service Line 18100
Stob 6303
Project Code 1110000
Amount 114.23
Certified correct pursuant to Sections 32 and 33 of the Financial Administration Act and related policies.
e-sign
Date
Ministry Spending/Certification Authority Signature
Print Name of Spending/Certification Authority Keely Brandt

DEPUTY MINISTER'S OFFICE
MINISTRY OF ADVANCED EDUCATION
CLIFF NUMBER
REFER TO
☐ DRAFT Deputy Min ☐ DRAFT DM's Behalf ☐ INFO / FILE ☐ ADM ☐ Executive Director
OCT 2 7 2014
RECEIVED
NOTES

Loaded By: / Chargé par:	Delivered By: / Livré par:	Customer Signature: / Signature du client:
Boxes Loaded: / Boîtes chargées:	Total Boxes on Order: / Boîtes totales sur la comm.:	Customer Name (Print): / Nom du client (carac. d'imp.):

Delivery Status - État de la livraison: DLV PDL RDL RBC UDL Notes:

PAYMENT METHOD: / MÉTHODE DE PAIEMENT: MasterCard

TOTAL VALUE OF ORDER: / VALEUR TOTALE DE LA LIVRAISON: 114.23

BDD1011Q REV.06/06

Thank You For Your Business! - Merci de votre Fidelité!

Express Return Form - Formulaire de retour express
Hassle Free Returns - Retours sans problèmes

We are committed to exceptional service! Please check your order as soon as it arrives. Should you have a question or problem, please contact us at your earliest convenience. We will work with you to find a solution - your satisfaction is our goal.

Nous avons pris l'engagement d'un service exceptionnel! Prière de vérifier votre commande dès son arrivée. Si vous avez une question ou un problème, veuillez communiquer avec nous dès que vous le pouvez. Nous travaillerons en collaboration avec vous pour trouver une solution - nous voulons vous satisfaire.

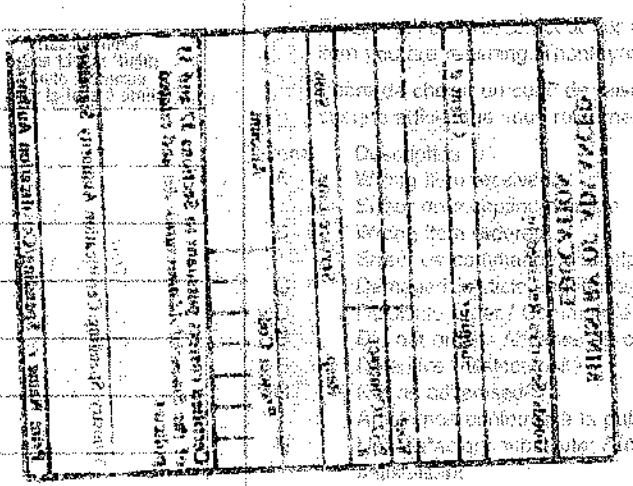
Please fill out the information below so that we can properly credit your account. Refer to the front of this packing slip or your catalogue for additional return instructions. Once completed call 1-800-668-6888 and request a Return Authorization Number from a customer service representative.

Veuillez indiquer les renseignements ci-dessous de façon à ce que nous puissions créditer votre compte correctement. Consultez l'avant du bordereau d'expédition ou votre catalogue pour obtenir de plus amples renseignements sur les retours. Une fois cela terminé, appelez le numéro 1-800-668-6888 et demandez un numéro d'autorisation de retour d'un représentant au service à la clientèle.

Your Name: / Votre nom: _____ Phone: / No de téléphone: ( ) _____ Date: / Postal: _____ DATE: _____

Order Number for items being returned (from front) / Numéro de commande des articles retournés (recto): _____

Qty. / Qté.	Reason for return / Raison du retour	Part No. / No d'article	Description



What Went Wrong?
Qu'est-ce qui ne va pas?

1 Needed merchandise sooner
Besoin de la marchandise plus tôt
2 Unsatisfactory product received
N'aime pas le produit reçu

Pitney Bowes
P.O. BOX 190, ORANGEVILLE, ONT. L9W 2Z6

PLEASE RETAIN THIS PORTION FOR YOUR RECORDS
CONSERVEZ CETTE PARTIE POUR VOS DOSSIERS

INVOICE / FACTURE

D.U.N.S. NO. 20 173 1197 HST/GST/T.P.S. NO.R 104212717 T.V.Q/Q.S.T. NO 10-0008-7617

DIRECT INQUIRIES TO / QUESTIONS? APPELEZ

1-800-672-6937
1-800-353-2052 (FAX/TÉLÉC)

Start using Web Tools today ! www.pitneybowes.ca/webtools
Shop for supplies online www.pitneybowes.ca/supplies

Commencez à utiliser les outils Web dès aujourd'hui www.pitneybowes.ca/outilsweb
Achetez vos fournitures en ligne! www.pitneybowes.ca/fournitures

ACCOUNT NO / Nº DE COMPTE: s.17

INVOICE NO / Nº DE FACTURE: 5908528

INVOICE DATE / DATE DE FACTURATION: Jun. 05,2014

PMT DUE UPON RECEIPT / PAYABLE DÈS LA RÉCEPTION

EQUIPMENT INSTALLED AT / ÉQUIPEMENT INSTALLÉ CHEZ: s.17

PBC MIN. OF ADVANCED EDUC
STUDENT SERV BRANCH
PO BOX 9173 STN PROV GOVT
VICTORIA, BC V8W 9H7

PAGE NO / Nº DE PAGE	BRANCH / SUCC	OUR ORDER NO / NOTRE Nº DE COMM	YOUR ORDER NO / VOTRE Nº DE COMM
1	319	0JU462	BREE ATCHISON

MODEL	SERIAL NO.	ACT	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
824-6		S	TONER CARTRIDGE	5	289.00	1,445.00
			SHIPPING & HANDLING	1	7.95	7.95
824-5		S	DRUM KIT (3500/5000/4033)	1	159.00	159.00
			GOODS AND SERVICES TAX	5.000	PCT. OF 1,611.95	80.60
			PROVINCIAL SALES TAX	7.000	PCT. OF 1,611.95	112.84

MINISTRY OF ADVANCED EDUCATION
Goods/Services Received by: | Client # | Supplier # | Resp | Service Line | STOB | Project | Amount
Certified correct pursuant to Sections 32 and 33 of the Financial Administration Act and related policies.
Expense Authority Signature | Date | Print Name of Expense Authority

AMOUNT DUE UPON RECEIPT/ MONTANT DÛ DÈS RÉCEPTION: 1,805.39

AMOUNT DUE IF PAID 30 DAYS AFTER INV DATE/ À PAYER SI RÉGLÉ 30 JOURS APRÈS LA FACTURATION: ~~1,841.49~~

SEE REVERSE FOR GENERAL INFORMATION
RENSEIGNEMENTS GÉNÉRAUX AU VERSO

Pitney Bowes
P.O. BOX 190, ORANGEVILLE, ONT. L9W 2Z6

PLEASE RETURN THIS STUB WITH YOUR PAYMENT
RETOURNEZ CETTE PARTIE AVEC VOTRE PAIEMENT

INVOICE DATE / DATE FACTURATION: Jun. 05,2014

ACCOUNT NO / Nº DE COMPTE: s.17

INVOICE NO / Nº DE FACTURE: 5908528

PBC MIN. OF ADVANCED EDUC
STUDENT SERV BRANCH
PO BOX 9173 STN PROV GOVT
VICTORIA, BC V8W 9H7

AMOUNT DUE UPON RECEIPT/ MONTANT DÛ DÈS RÉCEPTION: 1,805.39

AMOUNT DUE IF PAID 30 DAYS AFTER INV DATE/ À PAYER SI RÉGLÉ 30 JOURS APRÈS LA FACTURATION: ~~1,841.49~~

PLEASE INDICATE AMOUNT PAID
VEUILLEZ INDIQUER LE MONTANT PAYÉ

$, , .

s.17

5 5908528 000184149 000180539 0 2

⑆08986⑈900⑆ 96

GENERAL INFORMATION

PAYMENT INFORMATION

Payment Options
- By mail
- At most Financial Institutions

[illegible] Pitney Bowes [illegible]

Pitney Bowes Payment Centre address:

P.O. Box 190
Orangeville, Ontario
L9W 2Z6

NOTE: PROCESSING OF PAYMENTS SENT WITHOUT INVOICE STUBS WILL BE DELAYED.

[illegible]

- The above address for processing payments only. If you have other questions or concerns, please call the general inquiries number listed below.

CREDIT NOTES

[illegible]

Credit Notes cannot be used when paying at Financial Institutions.

CHANGE OF ADDRESS

[illegible]

GENERAL INQUIRIES

[illegible]

RENSEIGNEMENTS GÉNÉRAUX

INFORMATION RELATIVE AUX PAIEMENTS

Modalités de paiement :
- par la poste
- dans la plupart des institutions financières.

[illegible] Pitney Bowes. [illegible]

Adresse du Centre de traitement des paiements Pitney Bowes

P.O. Box 190
Orangeville, Ontario
L9W 2Z6

NOTA : LE TRAITEMENT DES PAIEMENTS NON ACCOMPAGNÉS D'UN TALON DE FACTURE SERA RETARDÉ.

[illegible]

- Vous ne devez utiliser l'adresse indiquée ci-dessus que pour expédier votre paiement. Si vous avez des questions, veuillez composer le numéro mentionné ci-dessous.

NOTES DE CRÉDIT

[illegible] Il n'est pas possible d'utiliser une note de crédit pour effectuer un paiement par l'intermédiaire d'une institution financière.

CHANGEMENT D'ADRESSE

[illegible]

QUESTIONS GÉNÉRALES

[illegible]

1-800-672-6937

1-800-672-6937

PITNEY BOWES OF CANADA LTD.
P.O. BOX 190
ORANGEVILLE, ON. L9W 2Z6

Invoice Nbr/N°du facture: 231659281
Invoice Date/
Date du facture : 11/28/2014
Page 1 / 1

GST#: 89008 9550 RT0001
QST#: 1018811266-TQ0005
Corporate Dunn No 20-964-5639

KONICA MINOLTA INVOICE/ FACTURE

Please Remit To/S'il vous plaît remettre à :
KONICA MINOLTA BUSINESS SOLUTIONS
(Canada) Ltd.
PO BOX # 4563 TORONTO STATION "A"
TORONTO, ON M5W 0H1
Phone Nbr/Téléphone Nbr 1 866-890-6600

Bill To/Facturer à :
PBC MIN. OF ADVANCED EDUC
STUDENT SERV BRANCH
PO BOX 9173 STN PROV GOVT
VICTORIA BC V8W 9H7
CANADA

Ship To/Expédier à :
PBC MIN OF ADVANCED EDUCATION
FOI & RECORD- STUDENT SVRS BR \SHARON
835 HUMBOLDT ST
4TH FLR ATT: SHARON EVANS
VICTORIA BC V8V 4W8
CANADA

PO#/Bon de Commande	Delivery #/N°de livraison	Sales Order #/Date/ N°de Commande/Date	Account #/N°de Compte
SHARON EVANS	3013204991	316540562 / 11/27/2014	s.17

Cartons	Total Weight/ Poids Total	Carrier/ Transporteur	Shipping Point/ Point d'expédition	Terms of payment/ Conditions de paiement	Comments/Commentaires
1	7.050	GND	7000	NET 30 DAYS	

Order Qty/ Quantité Commander	Not Shipped On 1st Release/ Non Expédié Le 1er Release	Material Nbr/ N°des matériaux	Description	Qty Shipped/ Quantité Epédié	Unit/ Unite	Net Price/ Prix Net	Amount/ Montant
			603582700259				
			IMAGISTICS 824-6	2	EA	344.00	688.00
			TONER CART				
			PB5000/3500				
			FOI & RECORD-				
			STUDENT SVRS BR				
			\SHAR - 2503872496				
			SUBTOTAL				688.00
			FREIGHT				16.10
			GST				35.21
			PST				49.29
			TOTAL NBR OF UNITS/ N°TOTAL DE PARTS :	2		**TTL AMT/ TTL MONDANT**	788.60

MINISTRY OF ADVANCED EDUCATION
Goods/Services Received by: SEvans
Supplier # | Client # 0019
Voss
P.O./Contract
Resp. | Service Line | Stob
1 1 0 | 3 0 | 1 1 8 | 1 0 | 6 5 0 8
Project Code | Amount
1 1 0 | 1 3 0 1 | $ 788.60
Resp. | Service Line | Stob
Project Code | Amount
Certified correct pursuant to Sections 32 and 36 of the Financial Administration Act and related policies.
esign
Date:
Expense Authority Signature Dana Porter Bruce Smith Bruce Smith
Print Name of Expense Authority

ADVANCED EDUCATION
FINANCIAL OPERATIONS
DEC 10 2014
POST SECONDARY BUILDING AND CORPORATE FINANCE

704.1 > 704

DETACH HERE AND RETURN WITH YOUR PAYMENT/DÉTACHER ICI ET RETOURNER AVEC VOTRE PAIEMENT

PBC MIN. OF ADVANCED EDUC
STUDENT SERV BRANCH
PO BOX 9173 STN PROV GOVT
VICTORIA BC V8W 9H7
CANADA

Cust #/N° de client	Inv Nbr/N° de facture	Amount/Montant
s.17	231659281	788.60
Date	**Sales Order/ N°de Commande**	**Payment Terms/ Conditions de Paiement**
11/28/2014	316540562	NET 30 DAYS

Remit Payment To/Remettre le Paiement à:
KONICA MINOLTA BUSINESS SOLUTIONS
(Canada) Ltd.
PO BOX # 4563 TORONTO STATION "A"
TORONTO, ON M5W 0H1

Claims must be made within 5 days of receipt of invoice/ goods. No returns allowed without our written permissions. Price subject to change without notice. Overdue accounts subject to interest charge of 2% per month (26.82% per annum)/Les réclamations doivent être faites dans les 5 jours suivant la réception de la facture/marchandises. Aucun retour autorisée sans notre autorisation écrite. Prix sujet à changement sans préavis. Les comptes en souffrance soumis à des frais d'intérêt de 2% par mois (26,82% par année).