

Control No.

E127341

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.

collection	n, please co	ontact you	ır Ministr	y's Direct	or/Mar	nager of Ir	nformation	and Privacy	<i>'</i> .					
Name	Ob-i-ti-						-	oyee ID				Numbe		
	no, Christia rganizatio						s.22 Job T					356-017 Group		
	ed Education		and Trail	ning				terial Assis	tant		3	Group	Code	•
	Completed	-		al Year		7. Speci	al Cheque			8. C	Cheque Stub	Inform	ation	ı
Type of				ason for	Trave	l				Hea	adquarters			
In Provi			1	ng Ministe							ctoria			
	ng Addres													
	9080 Stn F	Prov Govt	Victoria	, BC V8V	_									
16.	17.				18.		19.	20. & 21.			22.	20. &		
Travel	'	Places Tr	avelled			rsonal	Other		eals		Ladaina	N	liscel	laneous
Dates 2017	Destinati	on I	Start	End	Km	cle Use Cost	Transpor Costs	Claim	Cost		Lodging Costs	Cost		Describe
	c-Prince G			2359	1	0.00	PCARD	F-BLD		.25	167.04	Joost		Describe
09/22 P	G-Vancouv	er (AC)	0700	2359		0.00	PCARD	F-D		.25	N/C	Ĺ	8.50	√ Parking
09/25	Vancouv		0700	2359		0.00		F-B	41	.00	459.64		5.45	Sky Train
09/26	Vancouv	er	0700	2359		0.00		F-	51	.50	482.84	4		
09/27	Vancouv		0700	2359		0.00		F-		.50	482.84			
09/28	Vancouv		0700	2359		0.00		F-		.50	459.64		0.05	l Clare Trade
09/29	Vancouv nVictoria		0700 0700	2359 1900		0.00	DCADD	F-D		.25			3.25	√ Sky Train
10/01 v a	m-victoria	na	0700	1900		0.00	PCARD			.00				
TOTALS	OF COLU	IMNIC				36. \$ 0.00	37. \$ 0.00		38. \$ 274	1.25	39. \$ 2052.00	40.	7.20	Claim Total \$ 2343.45
48.	OF COLU	49.	50.			51.	52.		45		\$ 2052.00	φ 17	1.20	J 2343.43
	t Code	Resp.		Service L	ine	STOE		Project	43		Supplier Cod	le		Amount
	019	1100		18000		570	1	1100000			s.22			\$ 2122.41
(019	1100	1	18000)	5702	2 *	1100000						\$ 221.04
	019													
	019										_			
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									T DUE T	O EI	MPLOYEE			\$ 2343.45
	loyee Sigr				tatama	nt of	Prin	t Name			Date S	Signed		
	ed this trav ements ma						20							
	of travel or													
	h I have no													
party.														
	nding Auth						1	nt Name			Date	Signed		
	ed correct p				of the	Financial								
Adminis	tration Act	and relate	ed policie	es.										
57. Payr	nent Auth	ority Sign	ature (S	See Audit	Trail)		Pri	nt Name			Date	Signed		
	sition for pa		rsuant to	section	32 of th	ne Financ	ial					-		
Adminie	tration Act													

FIN 10 (EFI-F0012 v2.6.1)

09/30 Personal

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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by CDM Oct 25/17

1 of 36



COLUMBIA Where ideas work

Travel Voucher (Restricted Use)

Control No.

E127896

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Name	·					E	mployee ID				Phone N	lumber	*
Sharma,						S	.22				(250) 35		
	rganization					J	ob Title	A			Travel G	roup Cod	le
	and Family	Develop					Ainisterial A				3		
5. Date C 2018/01	completed		6. Fis	cal Year		7. Special	d Cheque is	sue	1	B. Ch	eque Stu	b Informa	tion
Type of				eason for	Travel				1	Head	quarters		
In Provin	nce			terial Trav	el					Victo	oria		
12. Maili	ng Address	for Che	que										
Rm 027-	-501 Bellevil	lle Street	Victor	ia, BC V8\	/1X4								
16.	17.				18.		19.	20. & 21.			22.	20. & 21.	
Travel	P P	laces Tr	avelled	Į.		sonal	Other		eals	į		Mis	cellaneous
Dates	*PCard	,				cle Use	Transport			1	Lodging	_ ,	i north i
2017	Destination		tart	End	Km	Cost	Costs	Claim	Cost		Costs	Cost	Describe
10/19	· Vancouve		1800	1830		0.00		1		,00		22.00 S.2	
10/20	Vancouve		0000	0900		0.00		H-		.75		17.50-	Taxi
10/20	Vancouve		1100	1330		0.00		1		.00		17.20 14.60	Taxi Taxi
10/23 *1	idVancouve		0000	2359		0.00	1	F-		.50		37.80	Taxi
10/27	Vancouve		0000 1530	1600		0,00		ļ		.00		17.80	Taxi
10/27	Vancouve		0000	0950		0.00		H-L		.25		31.50	Taxi
10/28	Vancouve		1100	1130	1	0.00		11-12		.00		31.50	Taxi
10/30	Vancouve		0000	0720		0.00	l			.00		14.90-	Taxi
10/30	Van>Vic		0800	0830	Į.	0.00	207,00	1		.00			1
,0,00	1 4000- 210	(4444)		1	-	36.	37.	1	38.		39.	40. 204.8	O Claim Total
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8.		19.	50			51.	52.			45.			- 1
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	039	/-							l		 -	-	54.
	• V	1		-				AMOUNT	DUET	OEN			s.22
45. Emp	loyee Sign	Ture (S	e Aud	it Trail)			Print	Name			Date	Signed	2
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	h I have not	been ar	id Will I	or pe teim	pursed	by any of	ner						
party.				10 1	14 mps #1	· ·	D-1-4	Mana				Architecture -	
so, Sper	nding Auth	onty Sig	nature	(See Aud	ic i rail) Einnestet		Name			Date	Signed	ť.
Admi-1	ed correct p	ursuant t	od section	JII 32 & 33	or the	rmancial	Pa	ıla Gu	MIN		1	+47/1_	
Adminis	stration Act	and relat	ed polic	nes.			Ide	1464	ALK I		4	100	,
57. Pavi	ment Autho	rity Sign	nature	See Audi	t Trail)		Print	Name			Date	Signed	· · · · · · · · · · · · · · · · · · ·
	sition for pay					ne Financi					1		3
	stration Act.		15-11-11										ž.
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Ministry Payment Authority ARCS 1050-06

Audited 2017Jan22



Where ideas work

Travel Voucher (Restricted Use)

Control No.

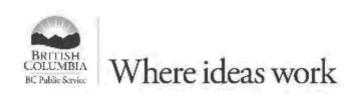
E127896

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Name							mployee ID				Phone I				7
Sharma,	Niki						5.22				4.5	56-5767			į.
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	and Famil						Ainisterial As				3	-			į.
	completed			iscal Year			I Cheque Is	sue		8. C	heque Stu	b Inform	atio	1	Š
2018/01			201			EFT	·				1				-
Type of				Reason for							dquarters				1
In Provir				isterial Trav	/el					Vic	toria				ź
12. Mailii	ng Addres	s for Ch	eque		1.4364						-				1
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16.	17.				18.		19.	20. & 21.		.	22.	20. & 21	-		3
Travel	ļ F	Places T	ravelle	ed		rsonal	Other	Me	eals		}	Mi	scel	laneous	į
Dates	1				Vehi	cle Use	Transport				Lodging				
2017	Destinati		Start	End	Km	Cost	Costs	Claim	Cost		Costs	Cost		Describ	e
10/19	Vancouv		1800	1830		0.00				0.00	1	23	.50	Taxi	
10/20	Vancouv		0000	0900		0.00		H-	25	5.75	4	19	.00	Taxi	Ž
10/20	Vancouv		1100	1330		0.00				0.00			.70	Taxi	ì
10/23	Vancouv		0000	2359		0.00				0.00	4		.10	Taxi	3
10/27	Vancouv		0000	0900		0.00		F-	51	.50)		.30	Taxi	ĝ
10/27	Vancouv		1530	1600		0.00			1 0	00.0	Ì		.30	Taxi	ŝ
10/28	Vancouv		0000	0950		0.00		H-L	15	.25	1		.65	Taxi	č Ž
10/28	Vancouv		1100	1130	l	0.00			0	00.0	1	33	.50	Taxi	1
10/30	Vancouv		0000	0720		0.00				.00	1		.40	Taxi	
10/30	Van>Vic		0800	0830		0.00	207.00			0.00	į		·		Å
TOTALS	OF COLUI	MNS				36. \$ 0.00	37. \$ 207.00		38 . \$ 92	2 50	39.	40.	AF.	Claim T	
48.		49.	le	0.		51.	5207.00				\$ 0.00	\$ 221	45	\$ 520	.95
	Code	49. Resi		o. Service	Lino	STOE		Duntank		45.	n				Ŷ
	39	18Y		1400		570	' 1	Project 1800000		'	Supplier C	ode		Amount	
	39	18Y		1400		571					s.22			\$ 22	
	39	18Y		1400		5750		1800000						\$ 20	
_	39	10.17		1400	<i>,</i> ,	5/50	' ['	8MTCCA						5 9	2.50
	vel Advan	Ce Ce													}- -
	39					1	1		1						ŷ.
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									DUE T	OE	IPLOYEE			\$ 52	0.95
45. Empl	oyee Sign	ature (S	ee Auc	lit Trail)			Print N	ame			Date	Signed			£
				n is a true si							3				i
				ances to wh											8
a result	of travel on	governr	nent bu	ısiness as d	letailed	above an	d								
	n i have not	been a	nd Will i	not be reimb	oursed	by any oth	er				1				9
party.		h. #*									1				ž,
56. Spen	aing Auth	ority Sig	nature	(See Audi	t Trail)		Print N	lame			Date	Signed			3
- Certifie	a correct p	ursuant	to secti	on 32 & 33	of the I	Financial	-								ě.
Administ	tration Act a	and relat	ed poli	cies.							1				Ţ
57. Paym	ent Autho	rity Sig	nature	(See Audit	Trail)		Print N	lame			Date	Signed		·	3
- Requis	ition for pay	yment pi	ursuant	to section 3	32 of th	e Financia	1								3
Administ	ration Act.														ļ.
FIN 10 (EF)	F0012 v2.6.	1)	Produ	ction *** Co	nyright	© Govern	nent of Britisl	Columbia		B./	linistry Sne	nding Aut	horit	ADCS 1	240.20

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Control No.

E127544

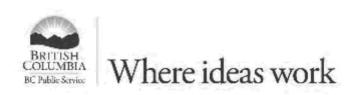
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Name Maartma	an, William rganization		, , , , , , , , ,	Em S. Jol	ployee 22 b Title		adorr and r		(250) 9	Number 953-4290 Group Code)	
5. Date 0 2017/11	Completed		Fiscal Ye	ear	7.	Special Cl	heque Issu	е	8. Che	que Stub In	forma	ation
Type of In Provi	Travel nce	14 N	l. Reason leetings/s						Heado Victor	juarters ia		
12. Maili , BC	ng Address f	or Cheque	Ð									
16. Travel		s Travelle	ed		rsonal	19. Other		1. leals	22.	20. & 21. N	liscell	laneous
Dates 2017 10/27	*PCard Destination Start Vic to Van 1300 Vic-Van(HJ) Van-Vic(W)		End 2200 J)	Vehi Km	Cle Use Cost 0.00	Costs	Claim	Cost 41.00	Lodging Costs	Cost 36.86		cribe tional Car rental
	OF COLUMN	ıs			36. \$ 0.0	37.	30	38. \$ 41.00	39. \$ 0.00	40. \$ 36.86		Claim Total \$ 128.16
(49. 162 162 162 162 162	Resp. 22001		rice Lir 06000		51. STOB 571-101		oject 00000	45. Տւ	ppplier Code S.22	•	Amount \$ 128.16
	vel Advance	22001		06000		1821						s.22
	,					1021	A	MOUNT DU	JE TO EM	PLOYEE		54.
- Certifie disburse a result for whice	loyee Signatued this travel e ements made of of travel on go h I have not be	xpense cla and/or allo overnment	aim is a tr wances to business	ue state which as deta	n I am e ailed at	ntitled as ove and	Print Nan	ne		Date Sig	ned	
- Certifie	nding Authori ed correct purs stration Act and	suant to se	ction 32 8			ancial	Print Na	me		Date Sig	gned	
- Requis	nent Authorit sition for paym stration Act.	ent pursua	ant to sec	tion 32	of the F		Print Na			Date Sig		hority ARCS 1240-20

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Audited 2017Nov17 SLP

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Travel Voucher (Restricted Use)

Control No.

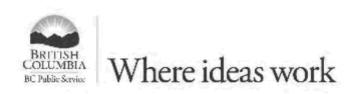
E127737

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collectio	n, please con	tact you	r Mir	nistry's Di	rector/N	/lanage	r of In	formation	and Priv	acy.			
Name								mployee	: ID			one Number	•
Talbot,								22			s.22		
	Organization n and Family	Dovolon	man					ob Title	I Assistar		Tra 3	vel Group C	ode
		Develop		Tiscal Ye		7 (viinisteria al Chequ	l Assistar	11		Ctub Infor	matian
2017/12	Completed			riscai re 118	ar	/	speci	ai Chequ	e issue		o. Cheque	Stub Infor	nation
Type of				Reason	for Tra	vel					Headquar	ters	
In Provi				BCM	101 110						Victoria	1010	
12. Mail	ing Address	for Che	que										
, 16.	17.				18.		1	9.	20. & 2	1	22.	20. & 21.	
Travel		es Trav	elled	d		rsonal	Ι.	Other		leals			cellaneous
Dates					Vehi	cle Us	е Т	ransport			Lodging		
2017	Destination	Sta	rt	End	Km	Cost		Costs	Claim	Cost	Costs	Cost	Describe
09/21	Vic-Van	080	00	2359	100	53.0	00			0.00		₹ 72.50	Ferry
09/24	Vancouver			2359		0.0			F-	51.50		^{30.75} s.2	Private Lodging
09/25	Vancouver			2359		0.0		57.10	F-	51.50		2	Private Lodging
09/26	Vancouver	1	- 1	2359		0.0		24.40	F-	51.50		-	Private Lodging
09/27	Vancouver			2359		0.0	00	,	F-L	41.00			Private lodging
09/28	Vancouver			2359		0.0		11.90	F-	51.50		W .	Private Lodging
09/29	Vancouver			2359		0.0		14.70	F-D	33.25			
10/02	Van-Vic	080	00	2359		0.0	00			0.00			
	HA - PCard	ı	1										
						36.		7. 108.10		38.	39.	40. 227.25	Claim Total
	S OF COLUM			=-		\$ 53		\$ s.22		\$ 280.25	\$ 0.00	\$s.22	\$ s.22 668.6
48. Clien	nt Code		- 1	50.	ice Lin	5	1. STOI	52.	Dunings	45.	Supplie	Cada	A
	039	Resp. 18YA			14001	e	570		Project 300000		s.22	Code	Amount 668.60 s.22
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	039		ı										
	039												
	avel Advance	е				1		1					
	039												54. 668.60
									AMO	OUNT DUE	TO EMPLO	YEE	s.22
45. Emp	oloyee Signa	ture (Se	e Aı	udit Trail)			Pri	nt Name			Date Signed	
 Certifi 	ied this travel	expense	cla	im is a tru	ie state							-	
	ements made												
	t of travel on g												
	ch I have not I	been an	d wil	I not be r	eimburs	sed by a	any ot	ner					
party.		'' 0'		(0 1		- ***			4 11			D 4 0	
	nding Autho						noial	Pr	int Name	!		Date Signe	a e
					33 01 1	ne Fina	ıncıaı						
Auminis	stration Act ar	iu relate	u po	nicies.									
	ment Author								int Name)		Date Signe	d
	isition for payr	ment pur	sua	nt to sect	ion 32 c	of the Fi	inanci	al					
Adminis	stration Act.										l		

FIN 10 (EFI-F0012 v2.6.1)

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Control No.

E127754

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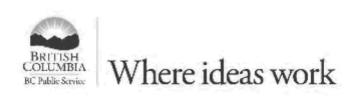
Client O Education			C Figure V	S. Jol Mi		e rial Assis				(250) Travel 3	Number 953-4290 Group Code		Al
2017/12	Completed 2/06		6. Fiscal Yo 2018	ear		7. Spec	al Che	que Issu	е	8. Ch	eque Stub Ir	ntorma	tion
Type of In Provi	Travel		14. Reason busines / s							Head Victo	quarters ria		
, BC	ng Address for	Cneq	lue										
16. Travel Dates	17. Places *PCard	Trave	lled		sona	.	ther		1. eals	22. Lodging	20. & 21. N	liscella	aneous
2017 10/11	Destination * Victoria (HJ)	Start 0800		Km	0.0	t C	osts	Claim F-B	41.00	Costs	40.86	Desci Natio	r ibe onal Car Rental
TOTALS	OF COLUMNS				36 . \$ 0	37.	5 0.00		38. \$ 41.00	39. \$ 0.00	40. \$ 40.86		Claim Total \$ 81.86
8.	49.	•	50.		\$0	51.	52		3 41.00	45 .	φ 40.00		φ 61.00
		Resp. 22001		/ice Lii 06000	ne	STO 57	B 1401		oject 00000	s	upplier Cod S.22	е	Amount \$ 81.86
_ess Tra	avel Advance												
(062					<u> </u>		Α	MOUNT D	UE TO EN	IPLOYEE		54. \$ 81.86
- Certifie disburse a result	loyee Signatured this travel ex ements made ar of travel on gov th I have not bee	pense nd/or a ernme	claim is a tr llowances to nt business	ue stat which as det	n I am ailed	entitled above a	as nd	Print Nar	ne		Date Sig	gned	
56. Sper - Certifie	nding Authority ed correct pursu stration Act and	ant to	section 32 8			inancial		Print Na	me		Date Si	gned	
- Requis	ment Authority sition for payme stration Act.	nt purs		tion 32	of the		ial	Print Na			Date Si		A DCC 4240

FIN 10 (EFI-F0012 v2.6.1)

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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

> Audited 2017Jan11 SLP



Control No.

E127600

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.

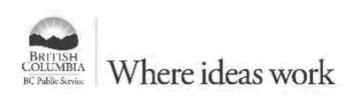
	n, Kenn rganization , Lands, Natural Re	source Oper	ations and	Rura	ıl Dev		Employee s.22 Job Title Ministeria		-	Phone N (250) 95 Fravel G 3	
5. Date C	Completed	6. Fiscal				neque Issue	•	8. C	neque Stub	Informa	ation
2017/11 Type of		2018	on for Tra					Hoo	dauartara		
In Provi		Ministeri		vei					dquarters oria		
	ng Address for C								0110		
PO BOX	C 9043 Stn Prov G	ovt Victoria,	BC V8W 9)E2							
16. Travel Dates	17. Place	Travelled			ersonal hicle Use	19. Other Transport	20. & 21. Me	als	22. Lodging	20. & 2 Mi	1. iscellaneous
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- Certifie	nding Authority S ed correct pursuan stration Act and rela	to section 32			nancial	Print Nam	ie		Date S	Signed	
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

CDM Nov 23/17



Control No.

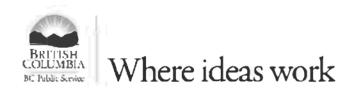
E127409

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Name Milne, G	ala ganization			-	Emplo S.22 Job Tit	yee ID			F	Phone Num (250) 387- Travel Grou 3	1866 up Code		
5. Date C 2017/10/	ompleted		6. Fis	cal Year		7. Specia	al Cheque Is	ssue		8. Cheque	Stub Inform	natio	n
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- Requis Administ	nent Authorit ition for paym tration Act. -F0012 v2.6.1)		rsuant	to section	32 of th			Name	io.		Date Signed		ty ARCS 1240-2

Ministry Payment Authority ARCS 1050-06

Audited by CDM October 26, 2017



Control No.

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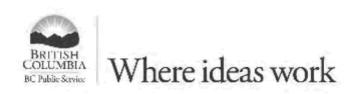
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by CDM Nov 21/17

AT18EXESLP34



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E127798

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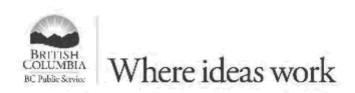
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	n, Veronica						s 22 Job Title				356-2178 Group Cod	lo.	
	rganizatio afety and		Gener	al		•		l Assistant		3	Group Coa	e	
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for whic	h I have no	t been	and wil	I not be reim	bursed	by any otl	her						
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

> Audited 2017Dec18 SLP



Travel Voucher (Restricted Use)

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E127294

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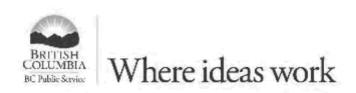
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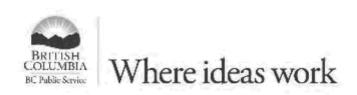
E127361

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collection, please c	ontact your	Ministry's				rmation and	Privacy.				
Name Smith, Jessica S. Client Organizatio Agriculture	√ on		Jo Jo	nployo 22 b Title		nt		(2	one Numb 50) 387-10 vel Group	23	
5. Date Completed 2017/10/13	1	6. Fiscal				Cheque Is	sue		Cheque S	tub Informa	tion
Type of Travel In Province		14. Reas	on for T						eadquarte	rs	
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2017		0700 2359		Km	Cost	Costs P/Card P/Card	Claim F-	51.50 0.00	Costs	4.10 12.50	Describe Canada Line Taxi
TOTALS OF COLL					36. \$ 0.00	37. \$ 0.00		38. ✓ \$ 51.50	39. \$ 0.00	40. \$ 16.60	Claim Total \$ 68.10
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45. Employee Signary Certified this travel disbursements may a result of travel of for which I have no party.	el expense de and/or a n governme	claim is a allowance ent busine	a true states to which ess as det	h I am tailed :	entitled as above and		ame		Da	te Signed	
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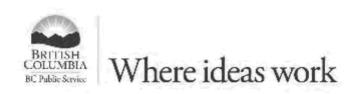
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	essica S rganization ure	✓			s.22 Job Ti	yee ID tle terial Assista	ant			(250)	Number 387-1023 Group Co	de		
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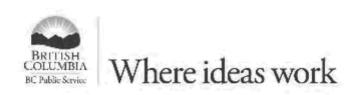
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collection	n, please contact	your Min	istry's Dire	ctor/Ma	nager of I	nformation a	and Privac	у.					
Name					yee ID					ne Number			
Riley, Ka				s 22) 387-7934			
	rganization			Job T						el Group Co	ode		
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5. Date C	Completed /10	6. F	iscal Year 18	•	7. Spec	ial Cheque	Issue		8. C	heque Stul	b Infor	matio	1
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09/20	Vic	0700	2300		0.00		F-		50	120.64			
09/21	Vic to Van (HA		1420		0.00	196.80	F-		50	0.00			
09/26	Van to Vic (HA		0805		0.00	207.00	F-		.50	120.64			
09/27	Vic Vic (HA	0700	2300		0.00	207.00	F-		50	120.64			
09/28	Vic	0700	2300		0.00		F-		50	120.64			
09/29	Vic to Van(HA		1635		0.00	213.60	F-		50	0.00			
10/01	Vic to Van (HA	0600	2300		0.00	11.20	' -		.00	0.00			
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48.	49.	50).		51.	52.		45.					
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Adminis	stration Act and re	elated po	licies.										
57. Payn	nent Authority S	Signature	e (See Aud	it Trail)	Prin	t Name			Date	Signe	d	
- Requis	sition for paymen	t pursuar	nt to section	1 32 of t	the Financ	cial					-		
Adminis	stration Act.												
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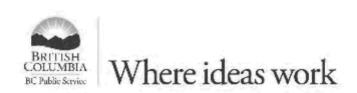
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	n, please co	ontact y	our Mini	stry's Dire			nformation a	and Priva	су.			
Name						oyee ID				Phone N		
Riley, K					s 25 Job 1) Fitto				(250) 38		
	rganizatio ' Services	n				r itie sterial Assi	etant			3	roup Code	
	Completed	<u> </u>	6 Eic	cal Year	IVIIIII	1	ial Cheque	leeue			eque Stub In	formation
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10/01	Vali to v	ic	0900	1000	04	44.52	191.51		0.00		655.75	ivioving vari, idei
						36. ✓	37. ✓		38.	39.	40. ✓	Claim Total
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Travel Voucher (Restricted Use)

Control No.

E127444

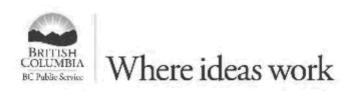
Freedom of Information and Protection of Privacy: The personal information you are providing is collected for the purposes of travel expense administration and under the authority of the Financial Administration Act. The collection, use and disclosure of personal information is in accordance with the 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.

	, please co	ontact yo	ur Minist	-		-	ormation and	Privacy.				
Name Riley, Ka	sul /				Employ	ee ID				one Numbe		
	ganizatio	n			s.22 Job Tit	le				50) 387-793 I vel Group (
	Services	"		•		erial Assist	ant		3	ivei Oloup	Joue	
5. Date C	ompleted		6. Fis	cal Year		7. Specia	I Cheque Iss	ue	8.	Cheque St	ub Informat	tion
Type of 7				eason for	Travel				H	eadquarters	<u> </u>	
In Provin						er Sims to	events			ictoria	•	
12. Mailir	ng Addres	s for Ch	eque	. , ,								
,				PO Box 9	9068 Str	Prov Gov't						
16.	17.				18.		19.	20. & 21		22.	20. & 21.	
Travel		Places 7	Travelled	t		rsonal	Other	M	eals	1	Misc	cellaneous
Dates	D = 41 = 4		044	l En al		icle Use	Transport	Olai-	04	Lodging	04	December
2017 10/16	Destinat Vic	ion	Start 1830	End 2000	Km	0.00	Costs 11.20	Claim	Cost 0.00	Costs	Cost	Describe
10/18	Vic		1900	1930		0.00	10.80		0.00	'		
10/26	Vic to Va	an (HA)	1600	1730		0.00	207.00		0.00			
10/30	Van to V	/ic (HA)	0730	0830		0.00	207.00		0.00			
		(/										
TOTALS	OF COLU	MNS				36. \$ 0.00	37.		38. \$ 0.00	39. \$ 0.00	40. \$ 0.00	Claim Total \$ 436.00
48.	01 0010	49.	50.			51.	52 .		45.	σ ψ σ.σσ	ψ 0.00	ψ 430.00
	Code	Res		Service	Line	STOB		oject	10.	Supplier C	ode	Amount
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	12											
	12 vel Advan											
	vei Advan 12	ice 	1			1	1					
	12											54.
								AMOUNT	DUE TO	EMPLOYE	E I	\$ 436.00
45. Empl	oyee Sigr	ature (S	ee Audi	t Trail)			Print Na	ame		Date	Signed	¥
 Certifie 	d this trav	el expen	se claim	is a true s								
						n entitled a						
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party.	n i nave no	ot been a	na wiii na	ot be reimi	bursea	by any oth	er					
	ding Auth	ority Si	nnatura	(See Audi	it Trail)		Print N	ama		Dat	e Signed	
	ed correct r						' ' ' ' ' '	airie		Dat	e Oigilea	
	tration Act				0	marrora.						
	ent Autho						Print N	ame		Dat	e Signed	
	tration for pa		ursuant t	o section :	32 of th	e Financia	11					

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EM18EXEDIJ 45



Travel Voucher (Restricted Use)

Control No.

E127782

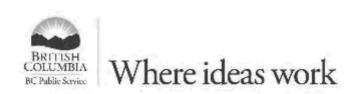
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Name	i, piodoo oomao	t your n	,		ploye		rmation and	i iivacy.	P	hone	Number		
	James ✓				22						87-4471		
	rganization			Jo S	b Title	•					Group Co	de	
Energy	and Mines			M	inister	ial Assista	nt			3			
	Completed	-	. Fiscal	Year	7	7. Special	Cheque Iss	ue		8. Che	que Stub	Informa	tion
2017/12			2018										
Type of				on for Ti							uarters		
In Provi				ial Meetin	gs					Minist	er's Office)	
	ng Address for			- DC \/0	M AV	4							
	01 Parliament B	ullaings	VICTOR	a, BC vo		4	40	20 0 24				20 0 2	4
16. Travel	17.	es Trav	اممالمد		18.	ersonal	19. Other	20. & 21	ı. eals	2	2.	20. & 2	ı. scellaneous
Dates	Fiac	es IIa	velleu			icle Use	Transport	W	eais		odging	IVII	scenaneous
2017	Destination	15	Start	End	Km	Cost	Costs	Claim	Cost	Ι,	Costs	Cost	Describe
10/12	Vic - Cranbroo		1500	2359			BTA128.00	H-		.75	124.20		20001100
10/13	Cran - Van	(AC)	0700	1850		0.00		F-LD	22	75			
10/14	Van - Vic	ferry	1600	1900		0.00	16.70		0.	.00			
		1											
						36.	37. ✓		38.		9. ✓	40.	Claim Tota
	OF COLUMNS	i	l=-			\$ 0.00	\$ 144.70		\$ 48		\$ 124.20	\$ 0.0	00 \$317.40
8.	49.		50.			51.	52.		45				
		Resp. 27011	8	ervice Li 26700	ne	STOB 5702		oject 700000		Su	pplier Co S.22	ode	Amount \$ 317.40
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	057												
Less Tra	vel Advance												
(057												
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		- 10		***				AMOUNT	DUE T	O EM			\$ 317.40
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	of travel on gov												
	h I have not bee												
party.						,,	.						
56. Sper	nding Authority	Signat	ture (Se	e Audit	Γrail)		Print Na	ame			Date	Signed	
	ed correct pursu					inancial						•	
Adminis	stration Act and r	related	policies.										
		01		A			D				P .	<u> </u>	
	ment Authority					Einensial	Print N	ame			Date	Signed	
- Requis	ment Authority sition for paymer stration Act.					Financial		ame			Date	Signed	

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Travel Voucher (Restricted Use)

Control No.

E127810

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collection	n, please contact yo	ur Minis	try's Dire	ctor/Ma	anager o	f Information	on and Pr	ivacy.					
Name					ovee ID				Phone N				
McNish,	, James ▼ rganization			S.22					(250) 38	7-4471 roup Code			
	and Mines				sterial As	ssistant			3	roup code	•		
	Completed	6. Fi	scal Year		-	ecial Chec	ue Issue	,	8. Cheq	ue Stub In	formatio	n	
Type of In Provi	Travel	14. F	Reason fo sterial Me						Headqu	r's Office	Victoria		1
	ing Address for Cl		Sterial ivit	eungs					IVIIIIISte	i s Office	Victoria		+
Room 3	01 Parliament Build	linas Vi	ctoria. B0	V8W	1X4								
16.	17.			18.	.,,,	19.	20. & 2	1.	22.	20. & 21.			1
Travel	Places Tr	avelled			sonal	Other		leals			Miscellan	eous	
Dates				Vehic	cle Use	Transpor	t		Lodging				
2017	Destination (AC)	Start	End	Km	Cost D	Costs	Claim	Cost	Costs	Cost	Descri	be	
10/21 10/22	Vic to Ter - PR PR- Ter - Vic (AC)	0700 0700	2359 1910		0.00	TA 385.00 BTA	F- F-	51.50 51.50	30.75	s.22	l		
l8. Clien	S OF COLUMNS 49. t Code Res 057 270 057		Servic	e Line 700		37. ✓ \$ 385.00 52. 5702	Proj		45. Sup	40. 0 oplier Code 3.22	,	Amount	518.
	057												
	avel Advance 057												
							AN	IOUNT DUE	TO EMP	LOYEE	5-	4. \$ s.22	518.
- Certifie disburse a result	eloyee Signature (\$ ed this travel expen ements made and/o of travel on govern th I have not been a	se claim or allowa ment bu	is a true inces to v siness as	vhich I a detaile	am entitl ed above	ed as	rint Nam			Date Sig	ned	- 3,22	
56. Sper	nding Authority Si ed correct pursuant stration Act and rela	to secti	on 32 & 3				Print Nam	ne		Date Sig	gned		
- Requis	ment Authority Sig sition for payment p stration Act.						Print Nam	ne		Date Sig	gned		

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Where ideas work

Travel Voucher (Restricted Use)

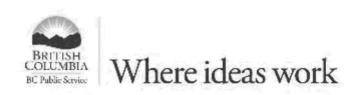
Control No.

E127443

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Name Xia, Evel Client Or					Jirivian	ager or mic	Employ S.22 Job Titl Ministe	ee ID	ant		s.22	ne Numbe rel Group		
5. Date C 2017/10/	ompleted		6. Fisc	al Year		7. Special	Cheque Iss	ue		8. C	heque Stu	b Informa	tion	
Type of 1 In Provin	Travel nce		14. Re Minist	ason for erial Busi						Hea	dquarters			
	ng Address 12 501 Belle			BC V8V/ 1	XΔ									
16. Travel Dates	17.	Places T			18. Pe	ersonal nicle Use	19. Other Transport	20. & 21 Me	eals		22. Lodging	20. & 21. Mis	cellaneous	
2017 10/06	Destinati DMO to I		Start 1500	End 1600	Km	Cost	Costs	Claim	Cos	st 0.00	Costs	15.0	Describe Taxi	
TOTALS	OF COLU	MNS				36. \$ 0.00	37. \$ 0.00		38.	0.00	39. \$ 0.00	40. \$ 15.0	Claim Tota	
0 0 0	Code 048 048 048 048	19. Resp 2900		Service I 6400		51. STOB 5701 6501		roject 900000	4	15.	Supplier C S.22	Code	Amount \$ 15.0	0
	vel Advan	се												
	140							AMOUNT	DUE	TO E	MPLOYEE		54. \$ 15.0	0,
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56. Spen - Certifie	ding Authord correct partition Act a	ursuant t	o sectior	32 & 33			Print N	ame			Date	Signed		
- Requis Administ	nent Autho ition for pay tration Act. -F0012 v2.6.	ment pu	rsuant to	section 3	32 of th		Print N					Signed	nority ARCS 1240	-20

Ministry Payment Authority ARCS 1050-06



Travel Voucher (Restricted Use)

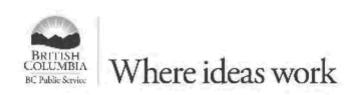
Control No.

E127434

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*Oct 14-15/17 -zero claims



Travel Voucher (Restricted Use)

Control No.

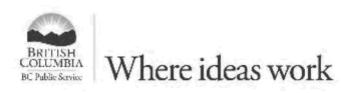
E127519

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	eline ✓ rganization ment and Clima	ite Cha	ange S	trategy			s 22 Job T		stant		s.22	ne Numbe ? el Group (
5. Date C	Completed		6. Fis 2018	cal Year		7. Speci	al Cheque Is	sue		8. C	heque Stu	b Informa	tion
Type of 1	Travel		14. Re	eason for		<u> </u>				Hea	dquarters	Victoria	
12. Mailir	ng Address fo		que									v ictoria	
Room 11	12 501 Bellevill 17.	e St V	ctoria,	BC V8V	1X4 18.		19.	20. & 21			22.	20. & 21.	
Travel Dates	1	es Tra	velled		Pei	rsonal cle Use	Other Transport		eals		Lodging		cellaneous
2017 10/31 11/01 11/02	Van	HJ) 10	art 600 700 700	End 2359 2359 0830	Km	0.00 0.00	Costs 325.00 P/Card	Claim F-BLI F- F-LDI	51	3.25 1.50).50	Costs 30.75 30.75	30.0 24.0 27.5	00 2x Taxi
	OF COLUMNS	<u> </u>				36. \$ 0.00	37.		1 -		39. ✓ \$ 61.50	40 . \$ 81.5	Claim Total 0 \$ 548.25
0	49. t Code 048 048 048	Resp. 29005	50.	Service 640		51. STO 570		Project 2900000	4	10.25 \$ 61.50 \$ 81. 45. Supplier Code \$.22			Amount \$ 548.25
Less Tra	vel Advance												
0	048							AMOUN'	T DUE	TO E	MPLOYEE		54. \$ 548.25
- Certifie disburse a result	loyee Signatured this travel exements made a of travel on goven the laws and the laws are the laws are signatured.	pense nd/or a ernme	claim allowar ent bus	is a true s nces to wh siness as o	nich I ar detailed	m entitled I above ar	nd	Name		_	Date	Signed	
56. Spen - Certifie	nding Authority and correct pursu tration Act and	uant to	sectio	n 32 & 33			Print	Name			Date	Signed	
- Requis	nent Authority sition for payme tration Act.							Name			Date	Signed	

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Travel Voucher (Restricted Use)

Control No.

E127388

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collectio	n, please con	tact you	r Ministry's	Directo	r/Manager o	of Informati	ion and P	rivacy.				
Name	Kassandra	1			nployee ID)				953-3547		
	Organization	*			.22 b Title				, ,	953-3547 I Group Cod	e	
Health	g				finisterial A	ssistant			3		•	
5. Date 2017/10	Completed 0/18		6. Fiscal 2018	Year	7. Sp	ecial Che	que Issu	9	8. Ch	eque Stub I	nformation	
	Travel		14. Reaso	on for T	ravel				Head	lquarters		
In Prov				n movii	ng expense	s			Victo	oria		
	ing Address											
	337, Minister	of Health	Office 501	_			_					
6. [17.	- T	llad		0.53	19.	20. & 2		22.	20. & 21.	dia a allama a u a	
ravel Dates	Place	s Trave	iiea		rsonal icle Use	Other Transpor		eals	Lodging	1	/liscellaneous	
2017	Destination	Start	End	Km	Cost	Costs	Claim	Cost	Costs	Cost	Describe	
10/06	vic-comox	0700		242	128.26	00313	F-	51.50	00313	0031	Describe	
10/07	comox	1200			0.00		'	0.00		3.36	packing tape	
10/08	comox-vic	1200	0 1700	242	128.26			0.00		1089.38	moving company	
10/08	victoroia	1200			0.00			0.00		84.00	moving truck park	ing
09/16	Courtney	1000	0 1030		0.00			0.00		8.75	Packing Supplies	
		-			36. ✓	37.		38. ✓	39.	40. ✓	Claim Total	
	S OF COLUM	NS		84 kms	\$ 256.52			\$ 51.50		\$ 1185.49	\$ 1493.51	
В.		9.	50.		51.	52.			5.			
Clier	nt Code	Resp.		e Line	522	B	Projec			plier Code	Amount	0.54
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											54.	. = .
			- A 114 T	- 111				UNT DUE	TO EMPI		\$ 149	3.51
	ployee Signa ied this travel				tomont of		Print Nam	ie		Date Sig	gnea	
	sements made					led as						
	t of travel on											
	ch I have not											
party.					-							
	nding Autho						Print Nar	ne		Date Si	gned	
	ied correct pu			2 & 33 o	f the Financ	cial						
Admini	stration Act a	na relate	a policies.									
7 Pav	ment Author	ity Sian	ature (See	Audit 7	[rail)		Print Nar	ne		Date Si	ianed	
	isition for pay						i illit ival	110		Date Si	gilea	
	stration Act.	pui										
	FI-F0012 v2.6.1)	Production	*** Cor	yright © Go	vernment o	f British C	olumbia	M	inistry Spendi	ing Authority ARCS 12	240-20

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HE18EXEDIL 13



Where ideas work

Travel Voucher (Restricted Use)

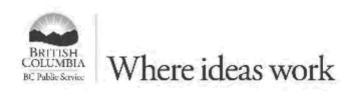
Control No.

E127322

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Client O Health	arsen, Amanda Irganization		Fiscal V	ODE		e rial Assist			1.	(250 Trav 3	ne Number 1) 953-3547 el Group C	ode	^	
2017/10	0/10		i. Fiscal Y 2018		"	pecial C	heque issu	2)		8. Ch	eque Stub	Inform	ation	
Type of In Provi		1	4. Reaso	n for Ti	ravel	- /					quarters			7
	ing Address fo	or Chegu	relocation	moving	expense	es 🗸				Victo	ria			-
Minister	of Health Office	e Rm 33	7, Parlian	nent Bu	ildings Vi	ctoria, BC	V8V 1X4							
16. Travel	17.	Traveli	ad	18. (0.53 rsonal	19.	20. & 2		22.	- :	20. & 21.			
Dates	Places	Haven	eu		cle Use	Other		als	Lodg	ina	1	VIISCEII	aneous	
2017	Destination	Start	End	Km	Cost	Costs	Claim	Cost	Cos		Cost	Desc	ribe	
10/05 09/25 10/08	Van to Vic Van to Vic Van to Vic	0700 0700 0700	1700 1700 1700	74	39.22 0.00 0.00	s.22 72.5	50.	0.00 0.00 0.00			1546.56 1546.61		ng (deposit) ng final payment	
	·				le	ss, extra	passenger		*					
TOTALS	OF COLUMN	s	74	kms	36. \$ 39.22	37. 72.5	50	38. \$ 0.00	39.	.00	40. ✓ \$ 3093.17		Claim Total	3204
18.	49.		50.	KIIIS	51.		2.	\$ 0.00	45.		\$ 3093.17	1	_s.22	- 3204
		Resp. 66001		ice Lin 14000		5225 5226	Proje 6660			Su	pplier Cod s.22	Đ	Amount \$ s 22	320
	avel Advance					<u>-</u> -								1
	026	,	l				ΔM	OUNT D	UF TO		OVEE		54. \$ s.22	3204
 Certific disburse a result for whice party. 	loyee Signatu ed this travel ex ements made a of travel on go th I have not be	opense of ind/or all vernment en and v	laim is a to owances to tousiness vill not be	rue stat o which as det reimbu	n I am en ailed abo rsed by a	titled as	Print Nan	10	- I		Date S	igned	<u> </u>	
- Certific Adminis	nding Authorit ed correct purs stration Act and	uant to s related	ection 32 policies.	& 33 of	the Fina	ncial	Print Nar	ne			Date S	igned		
- Requis	nent Authority sition for payme stration Act. I-F0012 v2.6.1)	ent pursu	ant to sec	tion 32	of the Fi		Print Nar				Date S	igned	,	

D/J Oct 13/17



Control No.

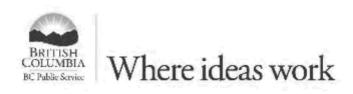
E127325

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Name	sen, Aman	da √			Em S.2	ployee ID)				one Number (50) 953-354		
	ganization				Job	Title				,	avel Group		
Health	g					nisterial A	ssist	tant		3			
	ompleted			scal Year		7. Spec	ial C	heque Is	sue	8. 0	Cheque Stu	ıb Informa	tion
2017/10/ Type of T			2018	eason for	Trave	1				Шо	adquarters		
In Provin				CM & misc							auquarters ctoria		
	ng Address	for Che		JIVI & IIII30	meetin	ys				1	ctoria		
	of Health C			arliament	Buildin	as Victoria	a. B0	C V8V 1X	(4				
16.	17.				18.	3	19.		20. & 21		22.	20. & 21	
Travel		laces Tr	avelled	t	Per	rsonal		Other		leals			cellaneous
Dates					Vehi	cle Use	Tra	ansport			Lodging		
2017	Destination		tart	End	Km	Cost	(Costs	Claim	Cost	Costs	Cost	Describe
	- Vancouve		0600	1900		0.00		QT	F-	51.50	1		
09/25	Vancouve		0600	2000		0.00			F-	51.50	1		
09/26	Vancouve		0600	2000		0.00			F-	51.50			
09/27	Vancouve		0600	2000		0.00			F-	51.50			
09/28	Vancouve		0600	2000		0.00			F-	51.50			
09/29	Vancouve		0600	2000		0.00			F-	51.50			
10/02	Vancouve		0600	2000		0.00			F-	51.50	1		
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09/15	vancouve	*	0000	2000		0.00			F-	51.50	'		
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- Certifie	d correct parties ration Act a	ursuant t	o sectio	on 32 & 33				Fillit	Ivaille		Date	e Signed	
	ent Autho ition for pay ration Act.						ial	Print	Name		Date	Signed	

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Ministry Payment Authority ARCS 1050-06



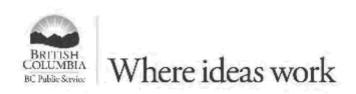
Control No.

E127700

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	rsen, Amanda ganization	a ✓			s.2 Job	oloyee ID 2 Title histerial As	sistant		(T	hone Nun (250) 953- ravel Gro	3547 up Code	
5. Date C 2017/11/	ompleted		6. Fis	cal Year		7. Specia	I Cheque Is	sue	8.	Cheque S	Stub Informa	ation
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16.	17.				18.	,	19.	20. & 21		22.	20. & 21	
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	vel Advance 26		1			1	1		1			
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45 Empl	oyee Signat	ure (Se	ibuA ac	t Trail\			Print N		I DOL IC		te Signed	ψ 104.30
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	ding Author	ity Sia	nature	(See And	it Trail)	1	Print	Name		- n	ate Signed	
	d correct pur						- -	Tame			ate orgined	
	tration Act an				01 1110	aiioiai						
- Requis	nent Authori ition for payn tration Act.					e Financia	Print	Name		D	ate Signed	

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Travel Voucher (Restricted Use)

Control No.

E127703

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	14. Rea	son for T	ravel				Hea	dquarters		
		gs in Van	couver				Vic	toria		
		liament Bı	uildings	s Victoria, I	BC V8V 1X4					
	-		18.		19.			22.	20. & 21	
Places Tr	avelled		Pe	ersonal	Other	M	eals		Mis	cellaneous
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Travel Voucher (Restricted Use)

Control No.

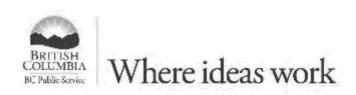
E127708

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 van Baa	n, please contact y arsen, Amanda rganization	√ VOUI IVI	inistry's Dire	Er S. Jo	nployee 22 bb Title			and Pri	vacy.		(250	e Number) 953-3547 el Group Cod	le	
5. Date (Completed		Fiscal Yea	ır	7. Sp	ecial Che	equ	e Issue			8. Che	eque Stub In	form	ation
Type of In Provi	Travel nce	14 R	I. Reason f			(Head Victo	quarters ria		
	ng Address for 0 of Health Office F			nt Buildi	nas Vict	oria, BC \	V8V	/ 1X4						
16. Travel Dates	17. Places	Fravell	ed		sonal le Use	19. Other		20. & 21 Me	l. als	22 Lo	dging		isce	llaneous
2017 10/01 10/11 10/14 11/05	Destination rent cleaning cost cleaning cost cleaning cost	Start 0700 0900 0900 0900	1700 1200 1200		Cost 0.00 0.00 0.00 0.00	Costs		Claim	0.00 0.00 0.00 0.00 0.00		costs	Cost 1300.00 75.00 75.00 50.00	do for for	scribe uble residence 3hrs of cleaning 3hrs of cleaning 2hrs of cleaning
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56. Sper	nding Authority sed correct pursual stration Act and re	nt to se	ection 32 &			cial	Pr	int Nam	е			Date Sig	jned	
- Requis	ment Authority S sition for payment stration Act.	pursua	•	on 32 of	the Fina			int Name				Date Sig		thority ARCS 1240-2

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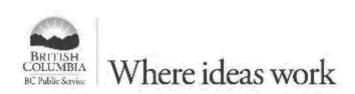
E127342

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Name Lindsay- Client Or Mental H	Baugh, Anna S. ganization lealth and Addicti	√ ons 6. Fi	scal Year		Emp s 22 Job Mini	oyee ID	ant		s.2 Tr 3	one Nu 2 avel Gro que Stu	up Co		1	
Type of I	Travel nce	Rele	8 Reason fo ocation ex						Headq vanco	uarters uver				
12. Mailir , 16. Travel Dates 2017 10/06	ng Address for C 17. Places Destination van/ vic	Travelled Start 0900	d End 2359		rsonal cle Use Cost 0.00	19. Other Transport Costs S.22 = 1995.00	Claim	leals Cost		odging Costs 149.31	20. &		llaneous Describe	
48. Client 02 02 02	27 66N 27 27 27 27		Service 4490		36. \$ 0.00 51. STOB 5226		roject MHA00	38. \$ 51 45	Supi	. 3 149.31 Dilier Coo 22			Claim Total (c 22 Amount 81 S.22	2195
	vel Advance 27					A	MOUNT	DUE TO	EMPL	OYEE		54.	2195.81 s.22	
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56. Spen - Certifie	ding Authority Sed correct pursuar tration Act and re	nt to secti	on 32 & 3			Print	Name			Date	Signe	d		
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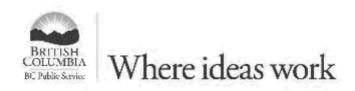
E127344

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collectio	n, please c	ontact	your Mi	inistry's D	irector/	Manager o	of Inform	nation	and Pri	vacy.				
Name							mployee	e ID				e Number		
	/-Baugh, Ar		4				22				s.22		4.	
	Organizatio Health and		tions				ob Title Inisteria	al Acc	eietant		3	I Group Cod	ae	
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Type of				. Reason	for Tr	avel					Headquar	ters		
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	ing Addres	s for												
,	J		•]	PO Box 9	9087 S	tn Prov	Gov't				
16.	17.				18. 0		19.		20. & 2		22.	20. & 21.		
Travel	PI	aces 1	Fravelle	d		rsonal	Othe	er	N	leals		Mis	scellaneous	
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10/01	Van/ Vic	(terry)	1730	2200	71	37.63	94.	.50	_	0.00	145.28	15.75	parking at hotel	
10/02	vic		0700	2359		0.00			F-	51.50	145.28	15.75	parking at hotel	
10/03	vic		0700	2359		0.00			F-	51.50	145.28	15.75	parking at hotel	
10/04	vic	£	0700	2359	74	0.00	70		F-	51.50	s 22	7.50	parking at hotel	
10/05	vic/ van (terry)	1600	1830	71	37.63	/2.	.50	F-D	33.25	116.37			
						36. ✓	37.	4		38. ✓	39. 552.21	40. ✓	Claim Total	
TOTALS	S OF COLU	IMNS		14	2 kms	\$ 75.26	\$ 167	7.00		\$ 187.75		\$ 54.75	\$ s.22	1036.97
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56. Spe	nding Auth	ority	Signatu	ure (See A	Audit 1	Γrail)		Pr	int Nam	е		Date Signed	d	
	ied correct i						cial					•		
Admini	stration Act	and re	elated p	olicies.										
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	ment Auth							Pr	int Nam	е		Date Signed	d	
	isition for pa		t pursua	ant to sect	ion 32	of the Fina	ancial							
Admini	stration Act													_

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Control No.

E127686

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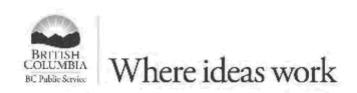
	ghan rganization ade and Te		,	,		Employ s.22 Job Tit Ministe		t		7	Phone Nun (604) 363- Fravel Gro 3	7607 u p Code	
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2017/11 Type of In Provir	Travel			ason for						Head Vict	dquarters oria		
	ng Address			0									
	's Office Ro	om 138,	Parliame	ent Buildin	-	toria, BC V		00 0 04			00	00 0 04	
l6. Travel Dates	17.	Places T	ravelled		1 .	ersonal nicle Use	19. Other	20. & 21. Mea	als		22. Lodging	20. & 21. Misc	ellaneous
2017 10/06 10/07 10/08	Vic to Val Van perso Van perso	n (Ferry) onal	Start 1800 0700 0700	End 2359 2359 2359	Km	Cost 0.00 0.00 0.00	Transport Costs ✓ 16.70	Claim F-BLDI F-BLDI	(st 0.00 0.00	Costs √30.75	Cost	Describe
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TOTALS	OF COLUI	MNS				36. \$ 0.00	37. \$ 33.40		38. \$	0.00	39. \$ 30.75	40. \$ 0.00	Claim Total \$ 64.15
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	125							AMOUNT	DUE	TO E	 MPLOYEE		54. \$ 64.15
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56. Spen	nding Authord correct potential transfer in the desired correct potentia	ursuant t	o section	n 32 & 33			Print N	lame			Date	Signed	
- Requis	nent Autho sition for pay tration Act.	yment pu	rsuant to	section 3	32 of th		Print N					Signed	rity ARCS 1240-2

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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Nov 29-17



Control No.

E127687

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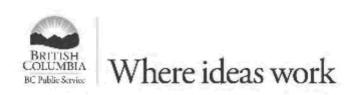
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Type of In Provir	Travel nce		14. R Staff	eason for ing Ministe		l				Head Victo	quarters ria			
12. Maili	ng Addres 's Office Ro	s for Che	eque Parliam	ent Ruildi	nae Via	toria BC	\/8\/ 1\/							
16. Travel	17.	Places Tr			18.	rsonal	19. Other	20. & 21. Me	als	2	22.	20. & 2		laneous
Dates 2017 10/26 10/27	Destination Vic to Va	on n(Ferry) -VAN(AC)	Start 1800 0700	End 2359 2359		Cle Use Cost 0.00 0.00	Transport Costs 16.70	Claim F-	Cost 30.50 S	.2	Costs 30.75 30.75	Cost		Describe
10/28 10/29 10/30	Van pers Van pers Van to V		0700 0700 0700	2359 2359 0800		0.00 0.00 0.00	16.70	F-BLDI F-BLDI	0	.00 .00 .00	s.22			
	OF COLU	MNS				36. \$ 0.00			\$5		39. \$ 61.50	40.	.00	Claim Total
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Less Tra	ivel Advan	ce												
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								AMOUNT	DUE T	O EM	PLOYEE		54.	\$ 176.90
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45. Emp - Certified disburse a result for which party. 56. Spen - Certified	loyee Sign ed this trave ements mad of travel or	el expens de and/or a governm t been an ority Sig oursuant t	e claim allowa nent bus nd will n nature o sectio	is a true s nces to wh siness as o ot be reim (See Aud on 32 & 33	nich I ar detailed bursed it Trail	m entitled d above an by any ot	as nd ther		DUE T	O EM	Date S	Signed Signed		

*0/27 Private Accomadation in Vancouver

Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Nov 28-17

Phone Number



Travel Voucher (Restricted Use)

Control No.

E127502

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Employee ID

	icqueline ganization ade and Tech	nology				S.22 Job Tit	le erial Assistant			s.22 Travel G 2	roup Code	
5. Date C	ompleted	lilology		cal Year			l Cheque Iss			8. Cheque S	tub Informa	tion
2017/10/			2018									
Type of T				eason for	Travel					Headquarter	S	
In Provin	ce ig Address f	or Che	Meet	ırıg						Victoria		
, wann	ig Addiess i	or one	que									
16.	17.				18.		19.	20. & 21		22.	20. & 21.	
Travel	Pla	aces Tr	avelle	d l		rsonal	Other	M∈	eals			cellaneous
Dates		١.				icle Use	Transport	a		Lodging		l
	Destination ic-Vancouver in-Victoria		tart 1800 1600	2100 2100 2100	Km	0.00 0.00	Costs	Claim	Cost	Costs	Cost √ 16.7 √16.7	- ,
TOTALS	OF COLUMN	NS				36. \$ 0.00	37. \$ 0.00		38. \$ 0	.00 \$ 0.00	40. \$ 33.40	Claim Total \$ 33.40
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1:	Code 25 25 25 25	Resp. 51956		Service 080		STOB 5701		roject 111111		Supplier S.22	Code	Amount \$ 33.40
	vel Advance	!										
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- Certifie	ding Author d correct pur ration Act an	suant to	sectio	n 32 & 33			Print N	ame		Da	te Signed	
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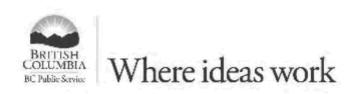
FIN 10 (EFI-F0012 v2.6.1)

Name

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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Nov 03-17



Control No.

E127812

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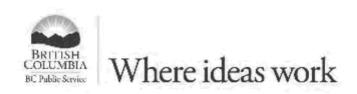
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5. Date C 2017/12	completed /13	6. Fis	scal Year		7. Specia	I Cheque Is	sue		8. Cheq	ue St	ub Informat	tion
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16. Travel Dates	17. Places	Travelle	d		rsonal	19. Other Transport	20. & 21 Me	i. eals	22.	iina	20. & 21. Misc	ellaneous
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1 1		956	080		570		5111111			.22		\$ 33.40
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56. Spen	ding Authority Sed correct pursuar tration Act and re	nt to section	on 32 & 33	it Trail of the) Financial	Print I	Name			Dat	te Signed	
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Jan 16-18



Control No.

E127425

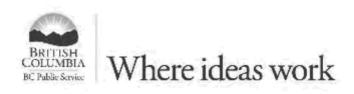
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^{*}Supplemental to TV E127424



Control No.

E127427

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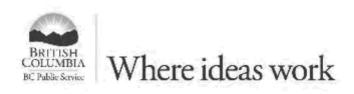
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Nov 27-17



Control No.

E127416

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collection	, please co	ontact your	Ministry	's Directo	r/Mana	ager of Info	rmation and	l Privacy.				
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