



### Travel Voucher (Restricted Use)

Control No.

E127704

**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.

<b>Name</b> Smith, Jessica C. ✓				<b>Employee ID</b> s.22				<b>Phone Number</b> (250) 387-1023			
<b>Client Organization</b> Agriculture				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3			
<b>5. Date Completed</b> 2017/11/28			<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>			<b>8. Cheque Stub Information</b>			
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Meetings with Minister					<b>Headquarters</b> Victoria/Vancouver			
<b>12. Mailing Address for Cheque</b> PO Box 9043 Stn Prov Govt , BC V8W 9E2											
<b>16. Travel Dates</b> 2017	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b> Km Cost		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b> Claim Cost		<b>22. Lodging Costs</b>	<b>20. &amp; 21. Miscellaneous</b> Cost Describe	
11/02	Vic to Saltspr (ferry)	1800	2359		0.00					12.20	ferry
11/03	Saltspr to Vic	0700	2359		0.00		F-L	41.00			
11/16	Vic-Van (AC)	0700	2359		0.00	P/Card	F-B	41.00		28.00	taxi
11/20	Van to Vic (HA)	0700	1200		0.00	P/Card		0.00		20.20 s.22	taxi
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> \$ 0.00		<b>38.</b> ✓ \$ 82.00	<b>39.</b> \$ 0.00	<b>40.</b> 60.40 \$ s.22	<b>Claim Total</b> \$ s.22
<b>48. Client Code</b> 130 130 130 130	<b>49. Resp.</b> 29001 29001	<b>50. Service Line</b> 30000 30000	<b>51. STOB</b> 5701 5702	<b>52. Project</b> 2900000 2900000	<b>45. Supplier Code</b> s.22	<b>Amount</b> 89.20 \$ s.22 53.20					
<b>Less Travel Advance</b> 130											
							<b>AMOUNT DUE TO EMPLOYEE</b>		<b>54.</b> \$ s.22		
<b>45. Employee Signature (See Audit Trail)</b> - 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.						<b>Print Name</b>		<b>Date Signed</b>			
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.						<b>Print Name</b>		<b>Date Signed</b>			
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>		<b>Date Signed</b>			



## Control No.

E127769

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Smith, Jessica C. ✓	s.22	(250) 387-1023
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Agriculture	Ministerial Assistant	3

2017/12/07	2018	
Type of Travel In Province	14. Reason for Travel Meetings with Minister	Headquarters Victoria/Vancouver

16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport	20. & 21. Meals		22. Lodging Costs	20. & 21. Miscellaneous		
	Destination	Start	End	Km	Cost	Costs	Claim	Cost		Cost	Describe	
2017												
11/16	Vic-Van (AC)	0700	2200		0.00	Card 57.80	F-B	41.00		0 s.22	taxi, rental car	Pop
11/21	Vic to home	2100	2200		0.00			0.00		6.90 s.22	taxi s.22	TV
12/01	Vic-Van-Pen(AC)	0700	2359		0.00	Card	F-D	33.25	97.75	58.00	taxi, hotel	
12/02	Pen-Kel-Van(AC)	0700	2359		0.00	Card 28.00	F-BL	30.50		26.00	taxi, baggage fee	

TOTALS OF COLUMNS	36. \$ 0.00	37. ✓ \$ 85.80	38. ✓ \$ 104.75	39. ✓ \$ 97.75	40. 90.90 \$ s 22	Claim Total \$ s.22
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379.20

48.	49.	50.	51.	52.	45.	
<b>Client Code</b>	<b>Resp.</b>	<b>Service Line</b>	<b>STOB</b>	<b>Project</b>	<b>Supplier Code</b>	<b>Amount</b>
130	29001	30000	5701	2900000	s.22	379.20 \$ s.22
130						
130						
130						

Less Travel Advance										
	130									

[illegible]

<b>45. Employee Signature (See Audit Trail)</b> - 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.	<b>Print Name</b>	<b>Date Signed</b>
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<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.	<b>Print Name</b>	<b>Date Signed</b>
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<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.	<b>Print Name</b>	<b>Date Signed</b>
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### Travel Voucher (Restricted Use)

Control No.

E127573

**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.

<b>Name</b> Riley, Karl ✓				<b>Employee ID</b> s.22				<b>Phone Number</b> (250) 387-7934			
<b>Client Organization</b> Citizens' Services				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3			
<b>5. Date Completed</b> 2017/11/14			<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>			<b>8. Cheque Stub Information</b>			
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Staffing Minister Sims in Vancouver					<b>Headquarters</b> Victoria			
<b>12. Mailing Address for Cheque</b> PO Box 9068 Stn Prov Gov't											
<b>16. Travel Dates</b>	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b>		<b>22. Lodging Costs</b>	<b>20. &amp; 21. Miscellaneous</b>	
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>		<b>Claim</b>	<b>Cost</b>		<b>Cost</b>	<b>Describe</b>
11/09 Vic	Vancouver (ferry)	1600	2200		0.00			16.70		0.00	
11/14	Victoria (HA)	0700	0830		0.00			207.00		0.00	
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> \$ 223.70 ✓		<b>38.</b> \$ 0.00	<b>39.</b> \$ 0.00	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 223.70
<b>48. Client Code</b>		<b>49. Resp.</b>	<b>50. Service Line</b>		<b>51. STOB</b>	<b>52. Project</b>		<b>45. Supplier Code</b>		<b>Amount</b>	
112		32805	34610		5701	3200000		s.22		\$ 223.70	
112											
112											
112											
<b>Less Travel Advance</b>											
112											
										<b>54. AMOUNT DUE TO EMPLOYEE</b> \$ 223.70	
<b>45. Employee Signature (See Audit Trail)</b> - 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.						<b>Print Name</b>			<b>Date Signed</b>		
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.						<b>Print Name</b>			<b>Date Signed</b>		
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>			<b>Date Signed</b>		



### Travel Voucher (Restricted Use)

Control No.

E127749

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<b>Name</b> Riley, Karl ✓				<b>Employee ID</b> s.22				<b>Phone Number</b> (250) 387-7934			
<b>Client Organization</b> Citizens' Services				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3			
<b>5. Date Completed</b> 2017/12/05			<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>			<b>8. Cheque Stub Information</b>			
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Staffing Minister					<b>Headquarters</b> Victoria			
<b>12. Mailing Address for Cheque</b> PO Box 9068 Stn Prov Gov't											
<b>16. Travel Dates</b> 2017 11/30 12/04	<b>17. Places Travelled</b>  <b>Destination</b> Vic to Van (ferry) Van to Vic (HA)  <b>Start</b> 1500 0730  <b>End</b> 1900 0830			<b>18. Personal Vehicle Use</b>  <b>Km</b>  <b>Cost</b> 0.00 0.00		<b>19. Other Transport Costs</b>  16.70 207.00	<b>20. &amp; 21. Meals</b>  <b>Claim</b>  <b>Cost</b> 0.00 0.00		<b>22. Lodging Costs</b>  0.00 0.00	<b>20. &amp; 21. Miscellaneous</b>  <b>Cost</b>  <b>Describe</b>	
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> ✓ \$ 223.70		<b>38.</b> \$ 0.00	<b>39.</b> \$ 0.00	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 223.70
<b>48. Client Code</b> 112 112 112 112		<b>49. Resp.</b> 32805	<b>50. Service Line</b> 34610		<b>51. STOB</b> 5701	<b>52. Project</b> 3200000		<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ 223.70	
<b>Less Travel Advance</b> 112											
					<b>AMOUNT DUE TO EMPLOYEE</b>					<b>54.</b> \$ 223.70	
<b>45. Employee Signature (See Audit Trail)</b> - 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.						<b>Print Name</b>			<b>Date Signed</b>		
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.						<b>Print Name</b>			<b>Date Signed</b>		
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>			<b>Date Signed</b>		





# Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127519

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<b>Name</b> Xia, Eveline ✓				<b>Employee ID</b> s.22				<b>Phone Number</b> (778) 679-5842																																																																											
<b>Client Organization</b> Environment and Climate Change Strategy				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3																																																																											
<b>5. Date Completed</b> 2017/11/03			<b>6. Fiscal Year</b> 2018			<b>7. Special Cheque Issue</b>			<b>8. Cheque Stub Information</b>																																																																										
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Ministerial Business						<b>Headquarters</b> MO Victoria																																																																										
<b>12. Mailing Address for Cheque</b> Room 112 501 Belleville St Victoria, BC V8V 1X4																																																																																			
<table border="1"> <tr> <th>16. Travel Dates</th> <th colspan="3">17. Places Travelled</th> <th colspan="2">18. Personal Vehicle Use</th> <th>19. Other Transport Costs</th> <th colspan="2">20. &amp; 21. Meals</th> <th>22. Lodging Costs</th> <th colspan="2">20. &amp; 21. Miscellaneous</th> </tr> <tr> <th></th> <th>Destination</th> <th>Start</th> <th>End</th> <th>Km</th> <th>Cost</th> <th></th> <th>Claim</th> <th>Cost</th> <th></th> <th>Cost</th> <th>Describe</th> </tr> <tr> <td>2017</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>10/31</td> <td>Vic-Van (HJ)</td> <td>1600</td> <td>2359</td> <td></td> <td>0.00</td> <td></td> <td>F-BLI</td> <td>18.25</td> <td></td> <td>30.75</td> <td>2x Taxi</td> </tr> <tr> <td>11/01</td> <td>Van</td> <td>0700</td> <td>2359</td> <td></td> <td>0.00</td> <td></td> <td>F-</td> <td>51.50</td> <td></td> <td>30.75</td> <td>2x Taxi</td> </tr> <tr> <td>11/02</td> <td>Van-Vic (HJ)</td> <td>0700</td> <td>0830</td> <td></td> <td>0.00</td> <td>P/Card</td> <td>F-LDI</td> <td>10.50</td> <td></td> <td></td> <td>2x Taxi</td> </tr> </table>												16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport Costs	20. & 21. Meals		22. Lodging Costs	20. & 21. Miscellaneous			Destination	Start	End	Km	Cost		Claim	Cost		Cost	Describe	2017												10/31	Vic-Van (HJ)	1600	2359		0.00		F-BLI	18.25		30.75	2x Taxi	11/01	Van	0700	2359		0.00		F-	51.50		30.75	2x Taxi	11/02	Van-Vic (HJ)	0700	0830		0.00	P/Card	F-LDI	10.50			2x Taxi
16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport Costs	20. & 21. Meals		22. Lodging Costs	20. & 21. Miscellaneous																																																																									
	Destination	Start	End	Km	Cost		Claim	Cost		Cost	Describe																																																																								
2017																																																																																			
10/31	Vic-Van (HJ)	1600	2359		0.00		F-BLI	18.25		30.75	2x Taxi																																																																								
11/01	Van	0700	2359		0.00		F-	51.50		30.75	2x Taxi																																																																								
11/02	Van-Vic (HJ)	0700	0830		0.00	P/Card	F-LDI	10.50			2x Taxi																																																																								
<b>TOTALS OF COLUMNS</b>						36. \$ 0.00	37. ✓ \$ 325.00	38. ✓ \$ 80.25	39. ✓ \$ 61.50	40. ✓ \$ 81.50	Claim Total \$ 548.25 ✓																																																																								
48. Client Code		49. Resp.		50. Service Line		51. STOB		52. Project		45. Supplier Code																																																																									
048		29005		64000		5701		2900000		s.22																																																																									
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57. Payment Authority Signature (See Audit Trail) - Requisition for payment pursuant to section 32 of the Financial Administration Act.						Print Name			Date Signed																																																																										



## Where ideas work

### Travel Voucher (Restricted Use)

Control No.

E127724

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<b>Name</b> Xia, Eveline ✓				<b>Employee ID</b> s.22				<b>Phone Number</b> (778) 679-5842			
<b>Client Organization</b> Environment and Climate Change Strategy				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3			
<b>5. Date Completed</b> 2017/11/30			<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>				<b>8. Cheque Stub Information</b>		
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Ministerial Business				<b>Headquarters</b> MO				
<b>12. Mailing Address for Cheque</b> Room 112 501 Belleville St Victoria, BC V8V 1X4											
<b>16. Travel Dates</b> 2017 11/19	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b> Km Cost 0.00		<b>19. Other Transport Costs</b> 172.30	<b>20. &amp; 21. Meals</b> Claim F-BD Cost 22.75		<b>22. Lodging Costs</b>	<b>20. &amp; 21. Miscellaneous</b> Cost Describe	
<b>TOTALS OF COLUMNS</b>					36. \$ 0.00	37. ✓ \$ 172.30	38. ✓ \$ 22.75	39. \$ 0.00	40. \$ 0.00	Claim Total \$ 195.05	
<b>48. Client Code</b> 048 048 048 048		<b>49. Resp.</b> 29005	<b>50. Service Line</b> 64000		<b>51. STOB</b> 5701	<b>52. Project</b> 2900000		<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ 195.05	
<b>Less Travel Advance</b> 048											
										<b>54.</b> \$ 195.05	
<b>45. Employee Signature (See Audit Trail)</b> - 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.						<b>Print Name</b>		<b>Date Signed</b>			
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.						<b>Print Name</b>		<b>Date Signed</b>			
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>		<b>Date Signed</b>			



### Travel Voucher (Restricted Use)

Control No.

E127691

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Dycke, Cassandra	s.22	(250) 953-3547
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Health	Ministerial Assistant	3

<b>5. Date Completed</b> 2017/11/27	<b>6. Fiscal Year</b> 2018	<b>7. Special Cheque Issue</b>	<b>8. Cheque Stub Information</b>
<b>Type of Travel</b> In Province	<b>14. Reason for Travel</b> Opening of Comox & Campbell River Hospitals		<b>Headquarters</b> Victoria

## 12. Mailing Address for Cheque

Room 337, Minister of Health Office 501 Belleville St Victoria, BC V9V 1X4

16. Travel Dates	17. Places Travelled	18. Personal Vehicle Use	19. Other Transport Costs	20. & 21. Meals	22. Lodging Costs	20. & 21. Miscellaneous			
	Destination <small>rental car</small>	Start	End	Claim	Cost	Cost	Describe		
2017									
11/14	Vic to Comox	0700	1900		F- 51.50	136.85			
11/15	Comox-Campbell R	0700	2000		F- 51.50	179.80			
11/16	Campbell R to Vi	0700	1900		F- 51.50				
						s.22 195.74	Budget car Nov 14- 16		
<b>TOTALS OF COLUMNS</b>				<b>36.</b>	<b>37.</b>	<b>38.</b>	<b>39.</b>	<b>40.</b>	<b>Claim Total</b>
				\$ 0.00	\$ 0.00	\$ 154.50	\$ 316.65	\$ s.22 195.74	\$s.22

666.89

48.	Client Code 026 026 026 026	49. Resp. 66001026	50. Service Line 44000 66004	51. STOB 5702	52. Project 6660000	45. Supplier Code s.22	Amount 666.89 \$ s.22
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[illegible]

	AMOUNT DUE TO EMPLOYEE						54.	666.89 \$ 22
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<b>45. Employee Signature (See Audit Trail)</b> - 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.	Print Name	Date Signed
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.	Print Name	Date Signed
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act	Print Name	Date Signed



### Travel Voucher (Restricted Use)

Control No.

E127717

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<b>Name</b> Dycke, Kassandra ✓			<b>Employee ID</b> s.22			<b>Phone Number</b> (250) 953-3547						
<b>Client Organization</b> Health			<b>Job Title</b> Ministerial Assistant			<b>Travel Group Code</b> 3						
<b>5. Date Completed</b> 2017/11/30		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>		<b>8. Cheque Stub Information</b>						
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Re-location expenses ✓				<b>Headquarters</b> Victoria						
<b>12. Mailing Address for Cheque</b> Room 337, Minister of Health Office 501 Belleville St Victoria, BC V9V 1X4												
<b>16. Travel Dates</b>	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>		<b>20. &amp; 21. Meals</b>		<b>22. Lodging Costs</b>	<b>20. &amp; 21. Miscellaneous</b>	
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>			<b>Claim</b>	<b>Cost</b>		<b>Cost</b>	<b>Describe</b>
2017												
09/03	Victoria	0700	1700		0.00				0.00		925.00	15 days of rent
09/18	Victoria	0700	1700		0.00				0.00		420.00	re-location expense
11/01	Comox	0800	1700		0.00				0.00		785.00	cleaning
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> \$ 0.00		<b>38.</b> \$ 0.00	<b>39.</b> \$ 0.00	<b>40.</b> ✓ \$ 2130.00	<b>Claim Total</b> \$ 2130.00	
<b>48. Client Code</b>	<b>49. Resp.</b>	<b>50. Service Line</b>		<b>51. STOB</b>	<b>52. Project</b>		<b>45. Supplier Code</b>		<b>Amount</b>			
026	66001 026	44000 66004		5702	6600000		s.22		\$ 2130.00			
026				5226	6600000							
026												
026												
<b>Less Travel Advance</b>												
026												
											<b>54.</b>	\$ 2130.00
<b>AMOUNT DUE TO EMPLOYEE</b>												
<b>45. Employee Signature (See Audit Trail)</b> - 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.								<b>Print Name</b>		<b>Date Signed</b>		
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.								<b>Print Name</b>		<b>Date Signed</b>		
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.								<b>Print Name</b>		<b>Date Signed</b>		



## Travel Voucher (Restricted Use)

Control No.

E127700

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
van Baarsen, Amanda ✓	s.22	(250) 953-3547
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Health	Ministerial Assistant	3

5. Date Completed 2017/11/28	6. Fiscal Year 2018	7. Special Cheque Issue	8. Cheque Stub Information
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<b>Type of Travel</b> In Province	<b>14. Reason for Travel</b> MoH Meetings	<b>Headquarters</b> Victoria
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**12. Mailing Address for Cheque**  
Minister of Health Office Rm 337, Parliament Buildings Victoria, BC V8V 1X4

16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport	20. & 21. Meals		22. Lodging	20. & 21. Miscellaneous	
	Destination	Start	End	Km	Cost	Costs	Claim	Cost	Costs	Cost	Describe
2017											
10/26	Victoria	1400	1600		0.00	14.10		0.00			
11/16	Victoria	1300	1410		0.00	15.30		0.00			
11/17	Vic - Van (HA)	0830	1900		0.00	QT 50.50	F-	51.50	30.75		
11/18	Van - Vic (HA)	0700	1330		0.00	QT	F-LD	22.75			

TOTALS OF COLUMNS	36. \$ 0.00	37. ✓ \$ 79.90	38. ✓ \$ 74.25	39. ✓ \$ 30.75	40. \$ 0.00	Claim Total \$ 184.90
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48.	49.	50.	51.	52.	45.	
Client Code	Resp.	Service Line	STOB	Project	Supplier Code	Amount
026	66001	44000	6501	6600000	s.22	\$ 29.40
026	66001	44000	5701	6600000		155.50 \$ 50.50
<del>026</del>	<del>66001</del>	<del>44000</del>	<del>5702</del>	<del>6600000</del>		<del>\$ 105.00</del>
026						

[illegible]

	AMOUNT DUE TO EMPLOYEE	54. \$ 184.90
--	------------------------	---------------

<b>45. Employee Signature (See Audit Trail)</b> - 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.	<b>Print Name</b>	<b>Date Signed</b>
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<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.	<b>Print Name</b>	<b>Date Signed</b>
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57. <b>Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.	<b>Print Name</b>	<b>Date Signed</b>
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### Travel Voucher (Restricted Use)

Control No.

E127708

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
van Baarsen, Amanda ✓	s.22	(250) 953-3547
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Health	Ministerial Assistant	3

5. Date Completed 2017/11/29	6. Fiscal Year 2018	7. Special Cheque Issue	8. Cheque Stub Information
---------------------------------	------------------------	-------------------------	----------------------------

2017/11/29	2016		
Type of Travel In Province	14. Reason for Travel Re-location expenses	✓	Headquarters Victoria

## 12. Mailing Address for Cheque

Minister of Health Office Rm 337, Parliament Buildings Victoria, BC V8V 1X4

16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport Costs	20. & 21. Meals		22. Lodging Costs	20. & 21. Miscellaneous	
	Destination	Start	End	Km	Cost		Claim	Cost		Cost	Describe
2017											
10/01	rent	0700	1700		0.00			0.00		1300.00	double residence
10/11	cleaning cost	0900	1200		0.00			0.00		75.00	for 3hrs of cleaning
10/14	cleaning cost	0900	1200		0.00			0.00		75.00	for 3hrs of cleaning
11/05	cleaning cost	0900	1100		0.00			0.00		50.00	for 2hrs of cleaning

TOTALS OF COLUMNS	36. \$ 0.00	37. \$ 0.00	38. \$ 0.00	39. \$ 0.00	40. ✓ \$ 1500.00	Claim Total \$ 1500.00
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<b>Client Code</b>	<b>Resp.</b>	<b>Service Line</b>	<b>STOB</b>	<b>Project</b>	<b>Supplier Code</b>	<b>Amount</b>
026	66001	44000	5702 5226	6600000	s.22	\$ 1500.00
026						
026						
026						

025	
Less Travel Advance	
026	

AMOUNT DUE TO EMPLOYEE

54.	\$ 1500.00	
-----	------------	--

45. Employee Signature (See Audit Trail)

- 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.

Print Name \_\_\_\_\_

Date Signed \_\_\_\_\_

56. Spending Authority Signature (See Audit Trail)

- Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.

Print Name

Date Signed \_\_\_\_\_

57. Payment Authority Signature (See Audit Trail)

- Requisition for payment pursuant to section 32 of the Financial Administration Act.

Print Name

Date Signed \_\_\_\_\_



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127668

**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.

<b>Name</b> Milne, Gala		<b>Employee ID</b> s.22		<b>Phone Number</b> (250) 387-1866	
<b>Client Organization</b> Attorney General		<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> 3	
<b>5. Date Completed</b> 2017/11/23		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>	
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Ministerial Business		<b>8. Cheque Stub Information</b>	
<b>12. Mailing Address for Cheque</b> PO Box 9044 Stn Prov Govt Victoria, BC V8W 9E2					
<b>16. Travel Dates</b> 2017 11/16 11/17	<b>17. Places Travelled</b>		<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>
	Victoria-Kamloop [TAC] 2000	2359	2359	26	13.78
	Kamloops-Vic [TAC] 0000	0000	2359	26	13.78
					<b>20. &amp; 21. Meals</b>
					<b>Claim</b>
					<b>Cost</b>
					<b>22. Lodging Costs</b>
					<b>Cost</b>
					<b>20. &amp; 21. Miscellaneous</b>
					<b>Cost</b>
					<b>Describe</b>
			<b>36.</b>	<b>37.</b>	<b>38.</b>
			\$ 27.56	70.90 \$ s.22	\$ 41.00
					<b>39.</b>
					\$ 135.72
					<b>40.</b>
					\$ 0.00
					<b>Claim Total</b>
					\$ s.22
<b>TOTALS OF COLUMNS</b>					
<b>48. Client Code</b>	<b>49. Resp.</b>	<b>50. Service Line</b>	<b>51. STOB</b>	<b>52. Project</b>	<b>45. Supplier Code</b>
105	15002	10005	5702	1500000	s.22
105					
105					
105					
<b>Less Travel Advance</b>					
105					
					<b>54.</b>
					\$ s.22
<b>45. Employee Signature (See Audit Trail)</b>					
- 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.					
<b>Print Name</b>					
<b>Date Signed</b>					
<b>56. Spending Authority Signature (See Audit Trail)</b>					
- Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.					
<b>Print Name</b>					
<b>Date Signed</b>					
<b>57. Payment Authority Signature (See Audit Trail)</b>					
- Requisition for payment pursuant to section 32 of the Financial Administration Act.					
<b>Print Name</b>					
<b>Date Signed</b>					



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127756

**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.

<b>Name</b> Godfrey, Sam		<b>Employee ID</b> s.22		<b>Phone Number</b> (250) 387-1866																																			
<b>Client Organization</b> Attorney General		<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> 3																																			
<b>5. Date Completed</b> 2017/12/06		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>																																			
<b>8. Cheque Stub Information</b>																																							
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Ministerial Business			<b>Headquarters</b> Victoria																																		
<b>12. Mailing Address for Cheque</b> PO Box 9044 Stn Prov Govt Victoria, BC V8W 9E2																																							
<b>16. Travel Dates</b> 2017 11/30 12/01 12/03	<b>17. Places Travelled</b> *PCard <table border="1"> <tr> <th>Destination</th> <th>Start</th> <th>End</th> </tr> <tr> <td>*Vic-Van (AC)</td> <td>2000</td> <td>2359</td> </tr> <tr> <td>Vancouver</td> <td>0000</td> <td>2359</td> </tr> <tr> <td>*Van-Vic (HA)</td> <td>0000</td> <td>2359</td> </tr> </table>		Destination	Start	End	*Vic-Van (AC)	2000	2359	Vancouver	0000	2359	*Van-Vic (HA)	0000	2359	<b>18. Personal Vehicle Use</b> <table border="1"> <tr> <th>Km</th> <th>Cost</th> </tr> <tr> <td></td> <td>0.00</td> </tr> <tr> <td></td> <td>0.00</td> </tr> <tr> <td></td> <td>0.00</td> </tr> </table>	Km	Cost		0.00		0.00		0.00	<b>19. Other Transport Costs</b> <table border="1"> <tr> <td></td> <td>10.85</td> </tr> <tr> <td></td> <td>13.75</td> </tr> <tr> <td></td> <td>11.00</td> </tr> </table>		10.85		13.75		11.00	<b>20. &amp; 21. Meals</b> <table border="1"> <tr> <th>Claim</th> <th>Cost</th> </tr> <tr> <td>F-</td> <td>0.00</td> </tr> <tr> <td></td> <td>51.50</td> </tr> <tr> <td></td> <td>0.00</td> </tr> </table>	Claim	Cost	F-	0.00		51.50		0.00
Destination	Start	End																																					
*Vic-Van (AC)	2000	2359																																					
Vancouver	0000	2359																																					
*Van-Vic (HA)	0000	2359																																					
Km	Cost																																						
	0.00																																						
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Claim	Cost																																						
F-	0.00																																						
	51.50																																						
	0.00																																						
	<b>22. Lodging Costs</b> <table border="1"> <tr> <td></td> <td>146.38</td> </tr> <tr> <td></td> <td>30.75</td> </tr> </table>		146.38		30.75	<b>20. &amp; 21. Miscellaneous</b> <table border="1"> <tr> <th>Cost</th> <th>Describe</th> </tr> </table>		Cost	Describe																														
	146.38																																						
	30.75																																						
Cost	Describe																																						
<b>TOTALS OF COLUMNS</b>			<b>36.</b> \$ 0.00	<b>37.</b> \$ 35.60	<b>38.</b> \$ 51.50																																		
			<b>39.</b> \$ 177.13	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 264.23																																		
<b>48. Client Code</b> 105 105 105 105	<b>49. Resp.</b> 15002	<b>50. Service Line</b> 10005	<b>51. STOB</b> 5701	<b>52. Project</b> 1500000	<b>45. Supplier Code</b> s.22																																		
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<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.			<b>Print Name</b>		<b>Date Signed</b>																																		

CF18FXFCDM6



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127743

**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.

<b>Name</b> Talbot, Sarena				<b>Employee ID</b> s.22		<b>Phone Number</b> s.22																																																																																																																																																	
<b>Client Organization</b> Children and Family Development				<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> 3																																																																																																																																																	
<b>5. Date Completed</b> 2017/12/04		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>		<b>8. Cheque Stub Information</b>																																																																																																																																																	
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Staffing a meeting in Van				<b>Headquarters</b> Victoria																																																																																																																																																	
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16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport Costs	20. & 21. Meals		22. Lodging Costs	20. & 21. Miscellaneous																																																																																																																																													
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FIN 10 (EFI-F0012 v2.6.1)

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

CDM Dec 11/17



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127899

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Name Sharma, Niki	Employee ID s.22	Phone Number (250) 356-5767
Client Organization Children and Family Development	Job Title Ministerial Assistant	Travel Group Code 3

5. Date Completed 2018/01/10	6. Fiscal Year 2018	7. Special Cheque Issue EFT	8. Cheque Stub Information
Type of Travel In Province	14. Reason for Travel Ministerial Business	Headquarters Victoria	

12. Mailing Address for Cheque  
Rm 027-501 Belleville Street Victoria, BC V8V 1X4

16. Travel Dates	17. Places Travelled	18. Personal Vehicle Use	19. Other Transport Costs	20. & 21. Meals	22. Lodging Costs	20. & 21. Miscellaneous
	PCard Destination Start End	Km Cost		Claim Cost		Cost s.22 Describe
2017	Vancouver 0000 0723	0.00			0.00	14.80 Taxi
11/01	Vancouver(HJ) 1530 1610	0.00			0.00	17.60 Taxi
11/09	Van>Rich 0000 0800	0.00		F-D 33.25	0.00	34.00 Taxi
11/16	Rich> Van 1600 1654	0.00		0.00	0.00	37.60 Taxi
11/16	VancouverVic(I) 0000 0700	0.00		0.00	0.00	14.90 Taxi
11/20	Victoria Van(A) 0000 0807	0.00		0.00	0.00	58.60 Taxi
11/24	VancouverVic(I) 0000 0701	0.00		0.00	0.00	13.90 Taxi
11/27						

TOTALS OF COLUMNS	36. \$ 0.00	37. \$ 0.00	38. \$ 33.25	39. \$ 0.00	40. 191.40 \$ s.22	Claim Total \$ s.22
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48. Client Code	49. Resp.	50. Service Line	51. STOB	52. Project	45. Supplier Code	Amount
039	18YAB	14001	5701	1800000	s.22	\$ s.22
039	18YAB	14001	5750	1800000		\$ s.22
039						
039						

Less Travel Advance  
039

AMOUNT DUE TO EMPLOYEE  
54. \$ s.22

45. Employee Signature (See Audit Trail) - 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.	Print Name	Date Signed
56. Spending Authority Signature (See Audit Trail) - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.	Print Name Paula Gunn	Date Signed 
67. Payment Authority Signature (See Audit Trail) - Requisition for payment pursuant to section 32 of the Financial Administration Act.	Print Name	Date Signed

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Ministry Payment Authority ARCS 1050-08Audited 2018Jan22  
SLP





Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E128118

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<b>Name</b> Sharma, Niki				<b>Employee ID</b> s.22				<b>Phone Number</b> (250) 356-5767						
<b>Client Organization</b> Children and Family Development				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3						
<b>5. Date Completed</b> 2018/02/15			<b>6. Fiscal Year</b> 2018			<b>7. Special Cheque Issue</b> EFT			<b>8. Cheque Stub Information</b>					
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Ministerial Business						<b>Headquarters</b> Victoria					
<b>12. Mailing Address for Cheque</b> Rm 027-501 Belleville Street Victoria, BC V8V 1X4														
<b>16. Travel Dates</b>		<b>17. Places Travelled</b> *PCard			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>		<b>20. &amp; 21. Meals</b>		<b>22. Lodging Costs</b>		<b>20. &amp; 21. Miscellaneous</b>	
		<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>			<b>Claim</b>	<b>Cost</b>			<b>Cost</b>	<b>Describe</b>
2017														
11/30		*Victoria (HJ)	1530	1547		0.00				0.00			8.40	Taxi
11/30		Vancouver	1700	1727		0.00				0.00			16.00	Taxi
12/05		Vancouver	1130	1156		0.00				0.00			9.40	Taxi
12/06		*Vancouver (HA)	0000	0728		0.00				0.00			14.90	Taxi
12/08		Vancouver	0000	0839		0.00				0.00			36.70	Taxi
12/19		*Vancouver (AC)	1345	1434		0.00				0.00			29.40	Taxi
<b>TOTALS OF COLUMNS</b>						<b>36.</b> \$ 0.00	<b>37.</b> \$ 0.00		<b>38.</b> \$ 0.00	<b>39.</b> \$ 0.00	<b>40.</b> \$ 114.80	<b>Claim Total</b> \$ 114.80		
<b>48. Client Code</b>		<b>49. Resp.</b>		<b>50. Service Line</b>		<b>51. STOB</b>		<b>52. Project</b>		<b>45. Supplier Code</b>		<b>Amount</b>		
039		18YAB		14001		57016501		1800000		s.22		\$ 114.80		
039														
039														
039														
<b>Less Travel Advance</b>														
039														
												<b>54.</b> \$ 114.80		
												<b>AMOUNT DUE TO EMPLOYEE</b>		
<b>45. Employee Signature (See Audit Trail)</b> - 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.								<b>Print Name</b>		<b>Date Signed</b>				
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.								<b>Print Name</b>		<b>Date Signed</b>				
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.								<b>Print Name</b>		<b>Date Signed</b>				



## Control No.

E127857

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Maartman, William	s.22	(250) 953-4290
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Education	Ministerial Assistant	3

<b>5. Date Completed</b> 2017/12/27		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>			<b>8. Cheque Stub Information</b>				
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> business / support staff*					<b>Headquarters</b> Victoria				
<b>12. Mailing Address for Cheque</b> , BC											
<b>16. Travel Dates</b> 2017	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b>		<b>22. Lodging Costs</b>	<b>20. &amp; 21. Miscellaneous</b>	
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>		<b>Claim</b>	<b>Cost</b>		<b>Cost</b>	<b>Describe</b>
11/17	*Vic to Kamloops(AC)	0600	1800		0.00	76.10	F-	51.50			
11/15	Vic to Camp. Riv	0600	2100		0.00		F-	51.50	114.84		
11/16	Camp Riv to Vic	0600	2100		0.00		F-	51.50			
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> \$ 76.10		<b>38.</b> \$ 154.50	<b>39.</b> 114.84 \$ s.22	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ s.22
<b>48. Client Code</b> 062 062 062 062		<b>49. Resp.</b> 22001	<b>50. Service Line</b> 06000		<b>51. STOB</b> 571102	<b>52. Project</b> 2200000		<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ s.22	
<b>Less Travel Advance</b> 062											
						<b>AMOUNT DUE TO EMPLOYEE</b>					<b>54.</b> \$ s.22
<b>45. Employee Signature (See Audit Trail)</b> - 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.						<b>Print Name</b>			<b>Date Signed</b>		
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.						<b>Print Name</b>			<b>Date Signed</b>		
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>			<b>Date Signed</b>		



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127828

**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.

<b>Name</b> Lawson, Liam				<b>Employee ID</b> s.22		<b>Phone Number</b> (250) 812-2547					
<b>Client Organization</b> Public Safety and Solicitor General				<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> 3					
<b>5. Date Completed</b> 2017/12/18		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>		<b>8. Cheque Stub Information</b>					
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Tour Nanaimo facilities with Minister				<b>Headquarters</b> Victoria					
<b>12. Mailing Address for Cheque</b> PO Box 9080 Stn Prov Govt Victoria, BC V8W 9E2											
<b>16. Travel Dates</b> 2017 11/12 12/12	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b>  <b>Claim</b> F-B 41.00 F-DI s.2 21.00	<b>22. Lodging Costs</b> 144.00	<b>20. &amp; 21. Miscellaneous</b> <b>Cost</b> (inc. Parking) <b>Describe</b>		
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>						
	Nanaimo	0700	0845	147	77.91						
	Victoria	1400	1530	147	77.91						
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 155.82	<b>37.</b> \$ 0.00	<b>38.</b> 62.00 \$ s.22	<b>39.</b> \$ 144.00	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ s.22	
<b>48. Client Code</b> 010 010 010 010	<b>49. Resp.</b> 150011001	<b>50. Service Line</b> 1000018000	<b>51. STOB</b> 5702	<b>52. Project</b> 15000001100000	<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ s.22				
<b>Less Travel Advance</b> 010											
								<b>AMOUNT DUE TO EMPLOYEE</b>		<b>54.</b> \$ s.22	
<b>45. Employee Signature (See Audit Trail)</b> - 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.					<b>Print Name</b>		<b>Date Signed</b>				
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.					<b>Print Name</b>		<b>Date Signed</b>				
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.					<b>Print Name</b>		<b>Date Signed</b>				

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Ministry Payment Authority ARCS 1050-06Audited 2018Jan08  
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## Control No.

E127716

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Wood, Jessica	s.22	(250) 953-4844
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Indigenous Relations and Reconciliation	Ministerial Assistant	3

5. Date Completed 2017/11/30	6. Fiscal Year 2018	7. Special Cheque Issue	8. Cheque Stub Information
Type of Travel In Province	14. Reason for Travel Tour with Minister		Headquarters Salt Spring Island

**12. Mailing Address for Cheque**  
PO Box 9051 Stn Prov Gov Victoria, BC V8W 9E2

[illegible]

TOTALS OF COLUMNS

48.	Client Code 120 120 120 120	49.	Resp. 0794A	50.	Service Line 52000	51.	STOB 5702	52.	Project 0700000	45.	Supplier Code s.22	Amount \$ 1579.29
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Less Travel Advance	
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[illegible]

AMOUNT DUE TO EMPLOYEE

<b>45. Employee Signature (See Audit Trail)</b> - 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.	Print Name	Date Signed
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.	Print Name	Date Signed
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.	Print Name	Date Signed



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## Travel Voucher (Restricted Use)

Control No.

E127688

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<b>Name</b> Sali, Meghan			<b>Employee ID</b> s.22			<b>Phone Number</b> s.22					
<b>Client Organization</b> Jobs, Trade and Technology			<b>Job Title</b> Ministerial Assistant			<b>Travel Group Code</b> 3					
<b>5. Date Completed</b> 2017/11/27		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>		<b>8. Cheque Stub Information</b>					
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Staffing Minister				<b>Headquarters</b> Victoria					
<b>12. Mailing Address for Cheque</b> Minister's Office Room 138, Parliament Buildings Victoria, BC V8V 1X4											
<b>16. Travel Dates</b>	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>		<b>20. &amp; 21. Meals</b>			
2017	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>			<b>22. Lodging Costs</b>			
11/23	Vic to Van(Ferry)	1800	2359		0.00	✓ 16.70		✓ 30.75			
11/24	Van	0700	2359		0.00	F- ✓ 51.50		✓ 30.75			
11/25	Van	0700	2359		0.00	F- ✓ 51.50		✓ 30.75			
11/26	Van to Vic (Ferry)	0700	1000		0.00	✓ 33.70		0.00			
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> \$ 50.40		<b>38.</b> \$ 103.00	<b>39.</b> \$ 92.25	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 245.65
<b>48. Client Code</b>	<b>49. Resp.</b>	<b>50. Service Line</b>		<b>51. STOB</b>	<b>52. Project</b>		<b>45. Supplier Code</b>		<b>Amount</b>		
125	51000	08001		5701	5111111		s.22		\$ 245.65		
125											
125											
125											
<b>Less Travel Advance</b>											
125											
										<b>54.</b> \$ 245.65	
<b>AMOUNT DUE TO EMPLOYEE</b>											
<b>45. Employee Signature (See Audit Trail)</b> - 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.						<b>Print Name</b>		<b>Date Signed</b>			
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.						<b>Print Name</b>		<b>Date Signed</b>			
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>		<b>Date Signed</b>			





Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127863

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<b>Name</b> Louie, Jacqueline				<b>Employee ID</b> s.22		<b>Phone Number</b> (250) 387-9142	
<b>Client Organization</b> Jobs, Trade and Technology				<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> =2= 3	
<b>5. Date Completed</b> 2017/12/28		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b>		<b>8. Cheque Stub Information</b>	
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Accompanying Minister				<b>Headquarters</b> Victoria	
<b>12. Mailing Address for Cheque</b> 027 Parliament Buildings Victoria, BC V8V 1X4							
<b>16. Travel Dates</b>	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b>
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>		<b>Claim</b>
2017							<b>Cost</b>
11/02	Vancouver	0700	2130		0.00	16.70	DI 30.50 s.22
11/03	Vancouver	0700	1800		0.00		BI 22.75
11/10	Vancouver	0700	1600		0.00	16.70	
11/18	Victoria	0700	1700		0.00	16.70	
<b>TOTALS OF COLUMNS</b>				<b>36.</b>	<b>37.</b>		<b>38.</b>
				\$ 0.00	\$ 50.10		\$ 53.25 s.22
<b>48. Client Code</b>	<b>49. Resp.</b>	<b>50. Service Line</b>	<b>51. STOB</b>	<b>52. Project</b>	<b>45. Supplier Code</b>	<b>Amount</b>	
125	51956	08006	5701	5111111	s.22	\$ 103.35 s.22	
125	51956	08006	5750	5111111		\$	
125							
125							
<b>Less Travel Advance</b>							
125							
						<b>54. \$ 103.35 s.22</b>	
						<b>AMOUNT DUE TO EMPLOYEE</b>	
<b>45. Employee Signature (See Audit Trail)</b> - 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.				<b>Print Name</b>		<b>Date Signed</b>	
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.				<b>Print Name</b>		<b>Date Signed</b>	
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.				<b>Print Name</b>		<b>Date Signed</b>	

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

Audited by PL Jan 16-18



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## Travel Voucher (Restricted Use)

Control No.

E127811

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<b>Name</b> Louie, Jacqueline				<b>Employee ID</b> s.22				<b>Phone Number</b> s.22																																																																																							
<b>Client Organization</b> Jobs, Trade and Technology				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 2= 3																																																																																							
<b>5. Date Completed</b> 2017/12/13			<b>6. Fiscal Year</b> 2018			<b>7. Special Cheque Issue</b>			<b>8. Cheque Stub Information</b>																																																																																						
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Accompanying MGC						<b>Headquarters</b> Victoria																																																																																						
<b>12. Mailing Address for Cheque</b> 027 Parliament Buildings Victoria, BC V8V 1X4																																																																																															
<table border="1"> <thead> <tr> <th colspan="2">16. Travel Dates</th> <th colspan="2">17. Places Travelled</th> <th colspan="2">18. Personal Vehicle Use</th> <th colspan="2">19. Other Transport Costs</th> <th colspan="2">20. &amp; 21. Meals</th> <th colspan="2">22. Lodging Costs</th> <th colspan="2">20. &amp; 21. Miscellaneous</th> </tr> <tr> <th></th> <th></th> <th>Destination</th> <th>Start</th> <th>End</th> <th>Km</th> <th>Cost</th> <th></th> <th>Claim</th> <th>Cost</th> <th></th> <th></th> <th>Cost</th> <th>Describe</th> </tr> </thead> <tbody> <tr> <td>2017</td> <td>11/24</td> <td>Vic-Vancouver (Ferry)</td> <td>0800</td> <td>1700</td> <td></td> <td>0.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>16.70</td> <td>Ferry Ride</td> </tr> <tr> <td></td> <td>11/30</td> <td>Vic-Vancouver (Ferry)</td> <td>0800</td> <td>2100</td> <td></td> <td>0.00</td> <td></td> <td>DI</td> <td>30.50</td> <td>s.22</td> <td></td> <td>16.70</td> <td>Ferry Ride</td> </tr> <tr> <td></td> <td>12/04</td> <td>Van-Victoria (Ferry)</td> <td>0700</td> <td>2100</td> <td></td> <td>0.00</td> <td></td> <td>BLDI</td> <td>=</td> <td>51.50</td> <td></td> <td>54.08</td> <td>BC Ferries Connector</td> </tr> <tr> <td colspan="6"><b>TOTALS OF COLUMNS</b></td> <td><b>36.</b> \$ 0.00</td> <td><b>37.</b> \$ 0.00</td> <td></td> <td><b>38.</b> 82.00 \$ s.22</td> <td><b>39.</b> \$ 0.00</td> <td><b>40.</b> \$ 87.48</td> <td colspan="2"><b>Claim Total</b> \$ s.22</td> </tr> </tbody> </table>												16. Travel Dates		17. Places Travelled		18. Personal Vehicle Use		19. Other Transport Costs		20. & 21. Meals		22. Lodging Costs		20. & 21. Miscellaneous				Destination	Start	End	Km	Cost		Claim	Cost			Cost	Describe	2017	11/24	Vic-Vancouver (Ferry)	0800	1700		0.00						16.70	Ferry Ride		11/30	Vic-Vancouver (Ferry)	0800	2100		0.00		DI	30.50	s.22		16.70	Ferry Ride		12/04	Van-Victoria (Ferry)	0700	2100		0.00		BLDI	=	51.50		54.08	BC Ferries Connector	<b>TOTALS OF COLUMNS</b>						<b>36.</b> \$ 0.00	<b>37.</b> \$ 0.00		<b>38.</b> 82.00 \$ s.22	<b>39.</b> \$ 0.00	<b>40.</b> \$ 87.48	<b>Claim Total</b> \$ s.22	
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125		51956		08006		5701		5111111		s.22		\$ 169.48 s.22																																																																																			
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Ministry Spending Authority ARCS 1240-20  
Ministry Payment Authority ARCS 1050-06

Audited by PL Jan 16-18



## Where ideas work

### Travel Voucher (Restricted Use)

Control No.

E127891

**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.

<b>Name</b> Cheevers, Michael				<b>Employee ID</b> s.22				<b>Phone Number</b> s.22			
<b>Client Organization</b> Labour				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3			
<b>5. Date Completed</b> 2018/01/08			<b>6. Fiscal Year</b> 2018			<b>7. Special Cheque Issue</b> EFT			<b>8. Cheque Stub Information</b>		
<b>Type of Travel</b> In Province			<b>14. Reason for Travel</b> Meetings						<b>Headquarters</b> Victoria		
<b>12. Mailing Address for Cheque</b> PO Box 9064 Stn Prov Govt Victoria, BC V8W 9E2											
<b>16. Travel Dates</b>	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b>		<b>22. Lodging Costs</b>	<b>20. &amp; 21. Miscellaneous</b>	
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>		<b>Claim</b>	<b>Cost</b>		<b>Cost</b>	<b>Describe</b>
2017											
11/13	Vic-Van (Ferry)	1800	2100		0.00			0.00			
11/16	Vancouver	0830	1700		0.00		F-	51.50			
11/17	Van	1000	1700		0.00		F-L	41.00			
11/19	Van-Vic (Ferry)	1700	2000		0.00	72.50 s.22		0.00			
12/06	Vic-Van (Ferry)	1800	2100		0.00	16.70		0.00			
12/07	Van-Surrey-Van	0930	1330	63	33.39		F-	51.50			
12/08	Van-Surrey-Van	0900	2100		0.00		F-	51.50			
12/09	Van-Vic (Ferry)	1200	1500		0.00	72.50		0.00			
12/13	Vic-Van (Ferry)	1800	2100		0.00	93.50		0.00			
12/14	Vancouver	1130	1600		0.00		H-	25.75			
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 33.39	<b>37.</b> \$ 327.70 \$ s.22		<b>38.</b> \$ 221.25	<b>39.</b> \$ 0.00	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ s.22
<b>48. Client Code</b>	<b>49. Resp.</b>	<b>50. Service Line</b>		<b>51. STOB</b>	<b>52. Project</b>		<b>45. Supplier Code</b>		<b>Amount</b>		
127	51608	52080		5701	5155555		s.22		\$ 582.34 \$ s.22		
127											
127											
127											
<b>Less Travel Advance</b>											
127											
										<b>54.</b>	\$ 582.34 \$ s.22
<b>AMOUNT DUE TO EMPLOYEE</b>											
<b>45. Employee Signature (See Audit Trail)</b> - 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.						<b>Print Name</b>			<b>Date Signed</b>		
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.						<b>Print Name</b>			<b>Date Signed</b>		
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>			<b>Date Signed</b>		



## Control No.

E127641

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Gardea, Daniela	s.22	s.22
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Municipal Affairs and Housing	Ministerial Assistant	4

<b>5. Date Completed</b> 2017/11/21	<b>6. Fiscal Year</b> 2018	<b>7. Special Cheque Issue</b> EFT	<b>8. Cheque Stub Information</b>
<b>Type of Travel</b> In Province	<b>14. Reason for Travel</b> Meetings		<b>Headquarters</b> Victoria

16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport Costs	20. & 21. Meals	22. Lodging Costs	20. & 21. Miscellaneous	
2017	Destination	Start	End	Km	Cost		Cost		Cost	Describe
11/10	Vic-Van (HJ)	1000	2359		0.00		30.50	✓		
11/16	Van	1000	2359		0.00	34.80	30.50	✓	30.75	✓
11/17	Van -Van (HJ)	0600	1600		0.00	122.00	33.25	✓		
*PCARD /O-TIX										

	36.	37.	38.	39.	40.	<b>Claim Total</b>
TOTALS OF COLUMNS	\$ 0.00	\$ 156.80	\$ 94.25	\$ 30.75	\$ 0.00	\$ 281.80

48.	Client Code 060 060 060 060	49.	Resp. 51057	50.	Service Line 54000	51.	STOB 5701	52.	Project 5100000	45.	Supplier Code s.22	Amount \$ 281.80
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[illegible]

**AMOUNT DUE TO EMPLOYEE**

54.	\$ 281.80
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<b>45. Employee Signature (See Audit Trail)</b> - 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.	<b>Print Name</b>	<b>Date Signed</b>
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<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.	<b>Print Name</b>	<b>Date Signed</b>
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<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.	<b>Print Name</b>	<b>Date Signed</b>
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Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E128084

**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.

<b>Name</b> Gardea, Daniela				<b>Employee ID</b> s.22		<b>Phone Number</b> s.22	
<b>Client Organization</b> Municipal Affairs and Housing				<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> 4	
<b>5. Date Completed</b> 2018/02/09		<b>6. Fiscal Year</b> 2018		<b>7. Special Cheque Issue</b> EFT		<b>8. Cheque Stub Information</b>	
<b>Type of Travel</b> In Province		<b>14. Reason for Travel</b> Meetings				<b>Headquarters</b> Victoria	
<b>12. Mailing Address for Cheque</b> ,							
<b>16. Travel Dates</b> 2017 11/19 12/19	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b>
	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>		<b>Cost</b>
	Van - Vic	1600	1700		0.00	✓ 21.00	
	Vancouver	0800	1600		0.00	✓ 19.00	
<b>TOTALS OF COLUMNS</b>				<b>36.</b> \$ 0.00	<b>37.</b> \$ 40.00	<b>38.</b> \$ 0.00	<b>39.</b> \$ 0.00
				<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 40.00		
<b>48. Client Code</b> 060 060 060 060	<b>49. Resp.</b> 51057	<b>50. Service Line</b> 54000	<b>51. STOB</b> 5701	<b>52. Project</b> 5100000		<b>45. Supplier Code</b> s.22	<b>Amount</b> \$ 40.00
<b>Less Travel Advance</b> 060							
						<b>AMOUNT DUE TO EMPLOYEE</b>	
						<b>54.</b> \$ 40.00	
<b>45. Employee Signature (See Audit Trail)</b> - 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.				<b>Print Name</b>		<b>Date Signed</b>	
<b>56. Spending Authority Signature (See Audit Trail)</b> - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.				<b>Print Name</b>		<b>Date Signed</b>	
<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.				<b>Print Name</b>		<b>Date Signed</b>	

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

\*12/19 supplemental to E127870

Audited by PL Feb 20-18





## Where ideas work

### Travel Voucher (Restricted Use)

Control No.

E127574

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<b>Name</b> Infante, James				<b>Employee ID</b> s.22				<b>Phone Number</b> (778) 679-4931																																																															
<b>Client Organization</b> Tourism, Arts and Culture				<b>Job Title</b> Ministerial Assistant				<b>Travel Group Code</b> 3																																																															
<b>5. Date Completed</b> 2017/11/14				<b>6. Fiscal Year</b> 2018				<b>7. Special Cheque Issue</b>																																																															
<b>8. Cheque Stub Information</b>																																																																							
<b>Type of Travel</b> In Province				<b>14. Reason for Travel</b> Parliamentary Secretary Staffing				<b>Headquarters</b> Minister's Office																																																															
<b>12. Mailing Address for Cheque</b> s.22																																																																							
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16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport Costs	20. & 21. Meals		22. Lodging Costs	20. & 21. Miscellaneous																																																													
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11/14	Victoria (Ferry)	0700	0930		0.00	16.70		0.00																																																															
<b>TOTALS OF COLUMNS</b>						36. \$ 0.00	37. 33.40 s.22	38. \$ 30.50	39. \$ 0.00	40. 92.80 s.22	<b>Claim Total</b> \$ 156.70																																																												
<b>48. Client Code</b> 126 126 126 126		<b>49. Resp.</b> 51384		<b>50. Service Line</b> 54006		<b>51. STOB</b> 5701		<b>52. Project</b> 5188888		<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ 156.70																																																											
<b>Less Travel Advance</b> 126																																																																							
										<b>54. AMOUNT DUE TO EMPLOYEE</b> \$ 156.70																																																													
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<b>57. Payment Authority Signature (See Audit Trail)</b> - Requisition for payment pursuant to section 32 of the Financial Administration Act.						<b>Print Name</b>			<b>Date Signed</b>																																																														