



## Control No.

E128154

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Avendano, Christian	s.22	(250) 356-0179
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Advanced Education, Skills and Training	Ministerial Assistant	3

<b>5. Date Completed</b> 2018/02/20	<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

PO Box 9080 Stn Prov Govt Victoria, BC V8W 9E2

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											
12/07	V <sub>1</sub> Vancouver **	1600	2359		0.00				✓ 30.75		
12/08	Vancouver	0700	2359		0.00	✓ 5.45	F-BDI	10.50			
12/09	Vancouver	0700	2359		0.00			0.00			
12/10	V <sub>2</sub> Victoria (H.I.)	0700	1826		0.00	✓ 12.10		0.00			
<div>*PCARD** Ferry paid for by J. Papadopoulos</div>											

TOTALS OF COLUMNS	36. \$ 0.00	37. \$ 17.55		38. \$ 10.50	39. \$ 30.75	40. \$ 0.00	Claim Total \$ 58.80
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<b>48.</b>	<b>Client Code</b> 019 019 019 019	<b>49.</b>	<b>Resp.</b> 11001	<b>50.</b>	<b>Service Line</b> 18000	<b>51.</b>	<b>STOB</b> 5701	<b>52.</b>	<b>Project</b> 1100000	<b>45.</b>	<b>Supplier Code</b> S.22	<b>Amount</b> \$ 58.80
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[illegible]

	AMOUNT DUE TO EMPLOYEE	54. <u>\$ 58.80</u>
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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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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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[AE18EXECDM7]



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E128161

**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> Avendano, Christian				<b>Employee ID</b> s.22		<b>Phone Number</b> (250) 356-0179	
<b>Client Organization</b> Advanced Education, Skills and Training				<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> 3	
<b>5. Date Completed</b> 2018/02/21		<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 9080 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>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>		<b>22. Lodging Costs</b>
2017							
12/12	Vancouver (H.I.)	1150	2359		0.00	✓ 10.40	✓ 30.75
12/13	Vancouver	0700	2359		0.00	✓ 7.65	
12/14	Vancouver	0700	2359		0.00		
12/15	Vancouver	0700	2359		0.00	✓ 5.45	
12/16	Vancouver	0700	2359		0.00		
12/17	Vancouver	0700	2359		0.00		
12/18	Vancouver	0700	2359		0.00	✓ 3.25	
Returned to Victoria on January 7th see E1281							
PCAR							
<b>TOTALS OF COLUMNS</b>				<b>36.</b>	<b>37.</b>	<b>38.</b>	<b>39.</b>
				\$ 0.00	\$ 26.75	\$ 49.75	\$ 30.75
				<b>40.</b>	<b>Claim Total</b>		
				\$ 0.00	\$ 107.25		
<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>	
019	11001	18000	5701	1100000	s.22	\$ 107.25	
019							
019							
019							
<b>Less Travel Advance</b>							
019							
<b>AMOUNT DUE TO EMPLOYEE</b>						<b>54.</b>	
						\$ 107.25	
<b>45. Employee Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</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>56. Spending Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.							
<b>57. Payment Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Requisition for payment pursuant to section 32 of the Financial Administration Act.							

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

[Audited by CDM March 8/18]



## 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> (250) 387-2060			
<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			
<b>12. Mailing Address for Cheque</b>											
<b>16. Travel Dates</b> 2017 11/29 12/04	<b>17. Places Travelled</b>  <b>Destination</b> Vic-Van Van-Vic HA			<b>18. Personal Vehicle Use</b> <b>Km</b> 100 <b>Cost</b> 53.00 0.00		<b>19. Other Transport Costs</b>  159.00	<b>20. &amp; 21. Meals</b>  <b>Claim</b>  <b>Cost</b> 0.00 0.00		<b>22. Lodging Costs</b>  459.00	<b>20. &amp; 21. Miscellaneous</b>  <b>Cost</b> ✓ 89.50 <b>Describe</b> Ferry	
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 53.00	<b>37.</b> 159.00 \$ 0.00		<b>38.</b> \$ 0.00	<b>39.</b> \$ 459.00	<b>40.</b> \$ 89.50	<b>Claim Total</b> \$ 301.50
<b>48. Client Code</b> 039 039 039 039		<b>49. Resp.</b> 18YAA	<b>50. Service Line</b> 14001		<b>51. STOB</b> 5701	<b>52. Project</b> 1800000		<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ 301.50	
<b>Less Travel Advance</b> 039											
										<b>54.</b> \$ 301.50	
<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.

E128118

**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> 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> 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	
2017		Destination			Start End									
11/30		*Victoria (HJ)			1530 1547								8.40 Taxi	
11/30		Vancouver			1700 1727								16.00 Taxi	
12/05		Vancouver			1130 1156								9.40 Taxi	
12/06		*Vancouver (HA)			0000 0728								14.90 Taxi	
12/08		Vancouver			0000 0839								36.70 Taxi	
12/19		*Vancouver (AC)			1345 1434								29.40 Taxi	
<b>TOTALS OF COLUMNS</b>					36. \$ 0.00		37. \$ 0.00		38. \$ 0.00		39. \$ 0.00		40. \$ 114.80	
													Claim Total \$ 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. \$ 114.80</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>				



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127851

**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> Maartman, William		<b>Employee ID</b> s.22		<b>Phone Number</b> (250) 953-4290	
<b>Client Organization</b> Education		<b>Job Title</b> Ministerial Assistant		<b>Travel Group Code</b> 3	
<b>5. Date Completed</b> 2017/12/22		<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 12/14 12/15	<b>17. Places Travelled</b> *PCard			<b>18. Personal Vehicle Use</b> Km Cost 0.00 0.00	<b>19. Other Transport Costs</b> 16.00 15.00
	<b>Destination</b>	<b>Start</b>	<b>End</b>		
	Victoria travel	0900	2000		
	* vic to van day (HJ)	0800	1900		
				<b>20. &amp; 21. Meals</b> Claim Cost F- BD 22.75 s.22	<b>22. Lodging Costs</b> Cost Describe 38.54 Car Rental
<b>TOTALS OF COLUMNS</b>				<b>36.</b> \$ 0.00	<b>37.</b> \$ 31.00
				<b>38.</b> 22.75 s.22	<b>39.</b> \$ 0.00
				<b>40.</b> \$ 38.54	<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> 571401	<b>52. Project</b> 2200000	<b>45. Supplier Code</b> s.22
<b>Less Travel Advance</b> 062					
					<b>54.</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 1050-06Audited 2017Jan11  
SLP



## Control No.

E127848

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Maartman, William	165139	(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> 2017/12/21		<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 12/08	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b> s.22 200.58		<b>20. &amp; 21. Meals</b>		<b>22. Lodging Costs</b>		<b>20. &amp; 21. Miscellaneous</b>		
	<b>Destination</b> Van. day trip	<b>Start</b> 0800	<b>End</b> 2300	<b>Km</b>	<b>Cost</b> 0.00			<b>Claim</b> F-	<b>Cost</b> 51.50			<b>Cost</b> 40.72	<b>Describe</b> Car Rental	
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> 200.58 s.22		<b>38.</b> \$ 51.50	<b>39.</b> \$ 0.00	<b>40.</b> \$ 40.72	<b>Claim Total</b> \$ 292.58			
<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>		
062		22001		06000		571401		2200000		s.22		s.22		
062		22001		06000		5701		2200000				\$16.70		
062														
062														
<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>				

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

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2018-01-11



# Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127755

**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> 2017/12/06		<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 12/03 12/04	<b>17. Places Travelled</b> *PCard <table border="1"> <thead> <tr> <th>Destination</th> <th>Start</th> <th>End</th> </tr> </thead> <tbody> <tr> <td>* Vic-Van (HJ)</td> <td>1800</td> <td>1930</td> </tr> <tr> <td>* Van-Vic (AC)</td> <td>2000</td> <td>2200</td> </tr> </tbody> </table>			Destination	Start	End	* Vic-Van (HJ)	1800	1930	* Van-Vic (AC)	2000	2200	<b>18. Personal Vehicle Use</b> <table border="1"> <thead> <tr> <th>Km</th> <th>Cost</th> </tr> </thead> <tbody> <tr> <td></td> <td>0.00</td> </tr> <tr> <td></td> <td>0.00</td> </tr> </tbody> </table>	Km	Cost		0.00		0.00	<b>19. Other Transport Costs</b> <table border="1"> <thead> <tr> <th>Costs</th> </tr> </thead> <tbody> <tr> <td>14.00</td> </tr> <tr> <td>55.50</td> </tr> </tbody> </table>	Costs	14.00	55.50	<b>20. &amp; 21. Meals</b> <table border="1"> <thead> <tr> <th>Claim</th> <th>Cost</th> </tr> </thead> <tbody> <tr> <td>F-BL</td> <td>0.00</td> </tr> <tr> <td></td> <td>30.50</td> </tr> </tbody> </table>	Claim	Cost	F-BL	0.00		30.50	<b>22. Lodging Costs</b> <table border="1"> <thead> <tr> <th>Costs</th> </tr> </thead> <tbody> <tr> <td>151.57</td> </tr> </tbody> </table>	Costs	151.57	<b>20. &amp; 21. Miscellaneous</b> <table border="1"> <thead> <tr> <th>Cost</th> <th>Describe</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Cost	Describe		
Destination	Start	End																																				
* Vic-Van (HJ)	1800	1930																																				
* Van-Vic (AC)	2000	2200																																				
Km	Cost																																					
	0.00																																					
	0.00																																					
Costs																																						
14.00																																						
55.50																																						
Claim	Cost																																					
F-BL	0.00																																					
	30.50																																					
Costs																																						
151.57																																						
Cost	Describe																																					
<b>TOTALS OF COLUMNS</b>				<b>36.</b> \$ 0.00	<b>37.</b> \$ 69.50	<b>38.</b> \$ 30.50	<b>39.</b> \$ 151.57	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 251.57																													
<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	<b>Amount</b> \$ 251.57																																
<b>Less Travel Advance</b> 105																																						
						<b>AMOUNT DUE TO EMPLOYEE</b>			<b>54.</b> \$ 251.57																													
<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>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.

E127804

**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> Harrison, Veronica S.2				<b>Employee ID</b> S.22		<b>Phone Number</b> (250) 356-2178	
<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> 2017/12/12		<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> Accompany Minister to Announcement				<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>	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b>		<b>19. Other Transport Costs</b>	<b>20. &amp; 21. Meals</b>
	<b>*PCard Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>		<b>Claim F-BLD</b>
2017							
12/01	Victoria Airport	0510	0542		0.00	56.60	S.22
12/01	* Victoria to Van (WJ)	0635	0706		0.00		
12/01	Van to Event	0720	0806		0.00	68.70	2
12/01	Event - Downtown	1118	1200		0.00		5.60
12/01	Taxi to Helijet	1200	1241		0.00	6.70	S.22
12/01	* Van to Vic (HJ)	1320	1355		0.00		315.00
12/01	Helijet to home	1400	1409		0.00	9.90	S.22
<b>TOTALS OF COLUMNS</b>				<b>36.</b>	<b>37.</b>	<b>38.</b>	<b>39.</b>
				\$ 0.00	462.50 S.22	33.25 S.22	\$ 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>	
010	15001-10001	10000-48000-	570201	1500000-100000-	S.22	S.22	
010	15001	10000	5711	1500000		\$ 315.00	
010							
010							
<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>	





## Control No.

E127820

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Milne, Gala	s.22	(250) 387-1866
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Attorney General	Ministerial Assistant	3

<b>5. Date Completed</b> 2017/12/15	<b>6. Fiscal Year</b> 2018	<b>7. Special Cheque Issue</b>	<b>8. Cheque Stub Information</b>
<b>Type of Travel</b> Out of Province	<b>14. Reason for Travel</b> Ministerial Business		<b>Headquarters</b> Victoria

## 12. Mailing Address for Cheque

PO Box 9044 Stn Prov Govt Victoria, BC V8W 9E2

16. Travel Dates	17. Places Travelled			18. Personal Vehicle Use		19. Other Transport	20. & 21. Meals		22. Lodging Costs	20. & 21. Miscellaneous	
	*PCard Destination	Start	End	Km	Cost	Costs	Claim	Cost		Cost	Describe
2017											
12/10	*Vic-Otta (WJ/AC)	0635	1700		0.00	100.20	F-	51.50	201.12		
12/11	Ottawa	0000	2359		0.00		F-BL	30.50	201.12		
12/12	*Otta-Vic (AC)	1500	2359		0.00		F-BL	30.50			
12/13	Victoria	0000	0100		0.00	56.20		0.00		-157.86	Cell reimbursement

[illegible]

<b>48.</b>	<b>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>
	105	15002	10005	6316	1500000	S.22	\$ -157.86
	105	15002	10005	5705	1500000		\$ 671.14
	105						
	105						

[illegible]

	<b>AMOUNT DUE TO EMPLOYEE</b>	54. \$ 513.28
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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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## TRAVEL AUTHORIZATION

This form must be used for all out-of-province travel requests.  
It may, at the discretion of ministries, be used for in-province travel requests.

☒ Out-of-Province    ☐ Out-of-Canada    ☐ In-Province

MINISTRY / ENTITY / CORPORATE NAME (IF CONTRACTOR)

Ministry of Attorney General

VOTE

EMPLOYEE NAME

Gala Milne

EMPLOYEE ID.

S.22

POSITION

Ministerial Assistant

BARGAINING UNIT / GROUP NO.

OIC

BRANCH / LOCATION / REGION

Minister's Office

DATE DEPARTING

YYYY / MM / DD

2017/12/10

DATE RETURNING

YYYY / MM / DD

2017/12/12

NO. OF WORKDAYS AWAY

3

ESTIMATED OVERTIME CLAIM

HOURS

IDENTITY OF ORGANIZATION (OTHER THAN PROV. OF B.C.) PAYING ANY OF THE COSTS

☐ N/A, OR:

DESTINATIONS

Ottawa

METHOD OF TRAVEL

Air

PURPOSE OF TRAVEL

Give details of event to be attended, project name / number, program involved, benefits to Ministry, etc.

To support Minister Eby and attend the Federal-Provincial-Territorial Meeting of Ministers Responsible for Human Rights

EMPLOYEE'S SIGNATURE

DATE SIGNED  
YYYY / MM / DD

2017-11-20

### SIGNATURES

Refer to CPPM 10.3.4 Policy 1 and 10.4.4 for approval authorities.  
PLEASE SIGN ONE BOX ONLY

DIRECTOR

APPROVED

NOT APPROVED

DATE SIGNED  
YYYY / MM / DD

ASSISTANT DEPUTY MINISTER

APPROVED

NOT APPROVED

DATE SIGNED  
YYYY / MM / DD

DEPUTY MINISTER

APPROVED

NOT APPROVED

DATE SIGNED  
YYYY / MM / DD

MINISTER

APPROVED

NOT APPROVED

DATE SIGNED  
YYYY / MM / DD

2017/11/21



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127877

**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> 2018/01/03		<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> Victoria					
<b>12. Mailing Address for Cheque</b> PO Box 9044 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											
12/17	Vic-Van	0900	1100	66	34.98	72.50			30.75		
12/18	Vancouver	0000	2359		0.00		F-BD	22.75			
12/22	Van-Vic	1100	1300	66	34.98	72.50		0.00			
No claim Dec 19-21											
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 69.96	<b>37.</b> \$ 145.00		<b>38.</b> \$ 22.75	<b>39.</b> \$ 30.75	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 268.46
<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>			
105	15002	10005		5701	1500000	s.22		\$ 268.46			
105											
105											
105											
<b>Less Travel Advance</b>											
105											
<b>AMOUNT DUE TO EMPLOYEE</b>										<b>54.</b> \$ 268.46	
<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.

E127894

**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> 2018/01/09			<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>		<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>	
		*PCard			Km Cost		Cost		Claim Cost		Lodging Costs		Cost Describe	
2017		Destination Start End							F-B F-D		151.57 151.57			
12/13		*Vic-Van (HJ) 1030 1230			0.00		10.00		41.00 \$ 2					
12/14		Vancouver 0000 2359			0.00		19.85		F- 51.50		151.57			
12/15		* Van-Vic (HA) 1400 1700			0.00		23.00		F-D 33.25					
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00		<b>37.</b> \$ 52.85		<b>38.</b> 125.75 \$ S.22		<b>39.</b> \$ 303.14		<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>		
105 105 105 105		15002		10005		5701		1500000		S.22		\$ s.22		
<b>Less Travel Advance</b>														
105														
										<b>AMOUNT DUE TO EMPLOYEE</b>			<b>54.</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.

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																																						
	0.00																																						
	0.00																																						
	10.85																																						
	13.75																																						
	11.00																																						
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  <b>Amount</b> \$ 264.23																																		
<b>Less Travel Advance</b> 105																																							
					<b>54.</b> \$ 264.23																																		
<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.

E127769

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Smith, Jessica S.2 ✓	S.22	(250) 387-1023
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Agriculture	Ministerial Assistant	3

<b>5. Date Completed</b> 2017/12/07	<b>6. Fiscal Year</b> 2018	<b>7. Special Cheque Issue</b>	<b>8. Cheque Stub Information</b>
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<b>Type of Travel</b> In Province	<b>14. Reason for Travel</b> Meetings with Minister	<b>Headquarters</b> Victoria/Vancouver
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**12. Mailing Address for Cheque**  
PO Box 9043 Stn Prov Govt - BC V8W 9E2

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												
11/16	Vic-Van (AC)	0700	2200		0.00	Card	F-B	41.00		0.00	taxi, rental car	Pd to Minister
11/21	Vic to home	2100	2200		0.00			0.00		6.90	taxi	Popham X Ref
12/01	Vic-Van-Pen(AC)	0700	2359		0.00	Card	F-D	33.25	97.75	58.00	taxi, hotel	TV#127678
12/02	Pen-Kel-Van(AC)	0700	2359		0.00	Card	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. \$ 22	Claim Total	379.20
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48.	Client Code 130 130 130 130	49.	Resp. 29001	50.	Service Line 30000	51.	STOB 5701	52.	Project 2900000	45.	Supplier Code s.22	Amount 379.20 \$s.22
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[illegible]

	AMOUNT DUE TO EMPLOYEE	54,379.20 \$5,22
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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.	<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.

E127856

**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 s.2		<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> 2017/12/27		<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> Meetings with Minister			<b>Headquarters</b> Victoria
<b>12. Mailing Address for Cheque</b> PO Box 9043 Stn Prov Govt , 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>
2017	<b>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>
12/04	van-vic (HA)	0800	0900		0.00
12/07	vic-van (ferry)	0700	2359		0.00
12/08	van	0700	2359		0.00
12/11	van-vic	0800	0900		0.00
				<b>36.</b>	<b>37.</b>
				\$ 0.00	s.22 153.7
				<b>38.</b>	<b>39.</b>
				\$ 66.50	\$ 0.00
				<b>40.</b>	<b>Claim Total</b>
				\$ 0.00	\$ s.22 220.20
<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>
130	29001	30000	5701	2900000	s.22
130	29001	30000	5701	2900000	
130				William Beale	
130					
<b>Less Travel Advance</b>					
130					
					<b>54.</b>
					220.20
					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>

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

cont'd from TV#E127769



## Control No.

E128078

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Smith, Jessica S. ✓	8 22	(250) 387-1023
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Agriculture	Ministerial Assistant	3

<b>5. Date Completed</b> 2018/02/08		<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	
<b>12. Mailing Address for Cheque</b> PO Box 9043 Stn Prov Govt , BC V8W 9E2							
<b>16. Travel Dates</b> 2017 12/11	<b>17. Places Travelled</b>			<b>18. Personal Vehicle Use</b> Km Cost 0.00	<b>19. Other Transport Costs</b> 325.00	<b>20. &amp; 21. Meals</b> Claim Cost 0.00	<b>22. Lodging Costs</b>
	<b>Destination</b> Van-Vic (HJ)	<b>Start</b> 0900	<b>End</b> 1000				<b>20. &amp; 21. Miscellaneous</b> Cost Describe X RefTV#E127856
<b>TOTALS OF COLUMNS</b>				<b>36.</b> \$ 0.00	<b>37.</b> ✓ \$ 325.00	<b>38.</b> \$ 0.00	<b>39.</b> \$ 0.00
				<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 325.00	✓	
<b>48. Client Code</b> 130 130 130 130	<b>49. Resp.</b> 29001	<b>50. Service Line</b> 30000	<b>51. STOB</b> 5701	<b>52. Project</b> 2900000	<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ 325.00
<b>Less Travel Advance</b> 130							
						<b>AMOUNT DUE TO EMPLOYEE</b>	<b>54.</b> \$ 325.00
<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>	





Where ideas work

## 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>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>
	Vic to Van (ferry)	1500	1900		0.00
	Van to Vic (HA)	0730	0830		0.00
					207.00
				<b>Claim</b>	<b>Cost</b>
					0.00
					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> 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>54.</b> \$ 223.70 ✓
<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.

E128036

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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> 2018/02/05	<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 Assistant duties (Dec 7, 2017 to Dec 14, 2017)			<b>Headquarters</b> Victoria
<b>12. Mailing Address for Cheque</b> Minister of Citizens' Services PO Box 9068 Stn Prov Govt Victoria, BC V8W 9E2					
<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>Destination</b>	<b>Start</b>	<b>End</b>	<b>Km</b>	<b>Cost</b>
12/07* Vic	Surrey	0630	2100		0.00
12/08	Vancouver	0630	1400		0.00
12/10	Vancouver - Vic	1830	2030		0.00
12/14 Vic	Vancouver	1600	1800		0.00
Dec 10 & 14/17-ferry					
			<b>36.</b>	<b>37.</b>	<b>38.</b>
			\$ 0.00	\$ 33.40 ✓	\$ 84.75 ✓
			<b>39.</b>	<b>40.</b>	<b>Claim Total</b>
			\$ 0.00	\$ 0.00	\$ 118.15 ✓
<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>
112	32805	34610	5701	3200000	s.22
112					
112					
112					
<b>Less Travel Advance</b>					<b>54.</b>
112					\$ 118.15 ✓
<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 Payment Authority ARCS 1050-06

\* car pooled with the Minister

## Where ideas work

## Control No.

E128036

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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> 2018/02/05			<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 Assistant duties (Dec 7, 2017 to Dec 14, 2017)						<b>Headquarters</b> Victoria																																															
<b>12. Mailing Address for Cheque</b> Minister of Citizens' Services PO Box 9068 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>																																												
<table border="1"> <thead> <tr> <th>Destination</th> <th>Start</th> <th>End</th> <th>Km</th> <th>Cost</th> <th>Claim F-D</th> <th>Cost</th> <th>Cost</th> <th>Describe</th> </tr> </thead> <tbody> <tr> <td>Surrey</td> <td>0630</td> <td>2100</td> <td></td> <td>0.00</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vancouver</td> <td>0630</td> <td>1400</td> <td></td> <td>0.00</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vancouver</td> <td>1830</td> <td>2030</td> <td></td> <td>0.00</td> <td>16.70</td> <td>0.00</td> <td></td> <td></td> </tr> <tr> <td>Vancouver</td> <td>1600</td> <td>1800</td> <td></td> <td>0.00</td> <td>16.70</td> <td>0.00</td> <td></td> <td></td> </tr> </tbody> </table>												Destination	Start	End	Km	Cost	Claim F-D	Cost	Cost	Describe	Surrey	0630	2100		0.00					Vancouver	0630	1400		0.00					Vancouver	1830	2030		0.00	16.70	0.00			Vancouver	1600	1800		0.00	16.70	0.00		
Destination	Start	End	Km	Cost	Claim F-D	Cost	Cost	Describe																																																
Surrey	0630	2100		0.00																																																				
Vancouver	0630	1400		0.00																																																				
Vancouver	1830	2030		0.00	16.70	0.00																																																		
Vancouver	1600	1800		0.00	16.70	0.00																																																		
<b>TOTALS OF COLUMNS</b>				<b>36.</b> \$ 0.00		<b>37.</b> \$ 33.40		<b>38.</b> \$ 84.75		<b>39.</b> \$ 0.00		<b>40.</b> \$ 0.00		<b>Claim Total</b> \$ 118.15																																										
<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		\$ 118.15																																												
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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> Karl Riley		<b>Date Signed</b> Feb 8/18																																														
<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> SRussell		<b>Date Signed</b> 02.27.2018																																														
<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.

E127949

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<b>Name</b> Xia, Eveline ✓				<b>Employee ID</b> 165036		<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> 2018/01/23		<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>	<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 Cost</b>
2017							
12/14	Vic-Van (HJ)	1130	2359		0.00		F-BL 30.50
12/15	Van	0600	2359		0.00		F- 51.50
12/16	Van-Bella Bella(PC)	0600	2359		0.00		F- 51.50
12/17	Bella Bella-Van(PC)	0600	2359		0.00		F- 51.50
12/18	Van	0600	2359		0.00		F- 51.50
12/19	Van	0600	2359		0.00		F- 51.50
12/20	Van	0600	2359		0.00		F-D 33.25
							Lodging Costs 133.40
							Cost 13.50
							Cost 21.00
							Cost 9.00
							Cost 15.30
							Cost 22.30
							Describe Taxi
							Describe Taxi
							Describe Taxi x2
<b>TOTALS OF COLUMNS</b>				<b>36.</b>	<b>37.</b>	<b>38.</b>	<b>39.</b>
				\$ 0.00	\$ 0.00	\$ 321.25	\$ 359.05
							\$ 81.10
							<b>Claim Total</b>
							\$ 761.40 ✓
<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>		
048	29005	64000	5701	2900000	s.22		
048	29005	64000	5702	2900000			
048							
048							
<b>Less Travel Advance</b>							
048							
				<b>AMOUNT DUE TO EMPLOYEE</b>			
				<b>54.</b>			
				\$ 761.40 ✓			
<b>45. Employee Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</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>56. Spending Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.							
<b>57. Payment Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Requisition for payment pursuant to section 32 of the Financial Administration Act.							



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127852

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<b>Name</b> van Baarsen, Amanda ✓				<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> 2017/12/22				<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 of Health Office Rm 337, 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>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														
12/14		Vic - Van (HJ)	1730	1900		0.00	QT 7.50			0.00	30.75		s.22	
12/15		Vancouver	0800	1800		0.00			F-	51.50	30.75			
12/16		Vancouver	0800	1800		0.00			F-	51.50	30.75			
12/18		Van - Vic (HJ)	0800	1930		0.00	QT 84.00		F-	51.50				
<b>TOTALS OF COLUMNS</b>						<b>36.</b> \$ 0.00	<b>37.</b> \$ 91.50 ✓		<b>38.</b> \$ 154.50 ✓	<b>39.</b> \$ 92.25 ✓	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ s.22	338.25 ✓	
<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	44000		5702 <sup>1</sup>	6600000		s.22		\$ 154.50				
026		66001	44000		5702	6600000				s.22				
026		66001	44000		6501	6600000								
026														
<b>Less Travel Advance</b>														
026														
												<b>54.</b> 338.25 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>		



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127773

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<b>Name</b> Sali, Meghan			<b>Employee ID</b> S.22			<b>Phone Number</b> (604) 363-7607					
<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> 2017/12/08		<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>		<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											
12/01	Vic to Van	1600	2359		0.00	✓ 16.70		0.00	✓ 30.75		
12/02	personal time	0700	2359		0.00			0.00			
12/03	personal time	0700	2359		0.00			0.00			
12/04	Van to Vic	2000	2359		0.00	✓ 16.70		0.00			
<b>TOTALS OF COLUMNS</b>					<b>36.</b> \$ 0.00	<b>37.</b> \$ 33.40		<b>38.</b> \$ 0.00	<b>39.</b> \$ 30.75	<b>40.</b> \$ 0.00	<b>Claim Total</b> \$ 64.15
<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		✓ \$ 64.15			
125											
125											
125											
<b>Less Travel Advance</b>											
125											
										<b>54.</b> \$ 64.15	
<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 Dec 14-17



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127826

**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> Sali, Meghan ✓				<b>Employee ID</b> s.22				<b>Phone Number</b> (604) 363-7607						
<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> 2017/12/16			<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> Ministers Meetings						<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. 0.53 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		Vic to Van(ferry)	1500	2000	35	18.55	89.50		F-BL	30.50		30.75		
12/08		Van-Kamloops-Van	0500	2359		0.00			F-B	41.00		30.75		
* 12/11		Van to Vic(ferry)	0700	1900	35	18.55	93.50		F-	51.50			91.75 s.22 Taxi & Parking (taxis, s.22	
12/12														
<b>TOTALS OF COLUMNS</b>					70 kms	36. ✓ \$ 37.10	37. 183.00 \$ 123.00		38. ✓ \$ 123.00	39. ✓ \$ 61.50	40. 91.75 \$ 22.22	<b>Claim Total</b> \$ 22		496.35
<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		571491		5111111		s.22		332.85 s.22		
125		51000		08001		5702		5111111				163.50		
125														
125														
<b>Less Travel Advance</b>														
125														
<b>AMOUNT DUE TO EMPLOYEE</b>												54. 496.35 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 Spending Authority ARCS 1240-20  
Ministry Payment Authority ARCS 1050-06

\* Dec 11/17 travelled with Minister

DJ Jan 5/18



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127811

**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> 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> 2017/12/13		<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								
<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>
11/24 Vic-Vancouver (Ferry)		0800	1700		0.00			
11/30 Vic-Vancouver (Ferry)		0800	2100		0.00			
12/04 Van-Victoria (Ferry)		0700	2100		0.00			
				<b>36.</b>	<b>37.</b>		<b>38.</b>	<b>39.</b>
				\$ 0.00	\$ 0.00		\$ 82.00	\$ 0.00
							s.22	
								<b>40.</b>
								\$ 87.48
								<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>		
125	51956	08006	5701	5111111	s.22	\$ 169.48		
125	51956	08006	5750	55MTCCA		s.22		
125								
125								
<b>Less Travel Advance</b>								
125								
								<b>54.</b>
								\$ 169.48
								=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>	





Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E128022

**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> 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							
<b>5. Date Completed</b> 2018/02/02			<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 the Minister						<b>Headquarters</b> Victoria						
<b>12. Mailing Address for Cheque</b> 027 Parliament Buildings Victoria, BC V8V 1X4															
<b>16. Travel Dates</b> 2017 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>22. Lodging Costs</b>	<b>20. &amp; 21. Miscellaneous</b>					
	<b>Destination</b> Vancouver	<b>Start</b> 0700	<b>End</b> 1500	<b>Km</b>	<b>Cost</b> 0.00		<b>Claim</b>	<b>Cost</b>		<b>Cost</b> 4.10	<b>Describe</b> Translink cost				
<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> \$ 4.10		<b>Claim Total</b> \$ 4.10	
<b>48. Client Code</b> 125 125 125 125		<b>49. Resp.</b> 51956		<b>50. Service Line</b> 08006		<b>51. STOB</b> 5704 5702		<b>52. Project</b> 5111111		<b>45. Supplier Code</b> s.22		<b>Amount</b> \$ 4.10			
<b>Less Travel Advance</b> 125															
										<b>AMOUNT DUE TO EMPLOYEE</b>		<b>54.</b> \$ 4.10			
<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 Mar 21-18



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> (604) 440-1956					
<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						
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		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>	<b>37.</b>	<b>38.</b>	<b>39.</b>	<b>40.</b>	<b>Claim Total</b>		
				\$ 33.39	\$ 327.70 s.22	\$ 221.25	\$ 0.00	\$ 0.00	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>		



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127802

**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> (778) 677-4304	
<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> 2017/12/12		<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 12/07 12/08 12/09	<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>	<b>Cost</b>
	Vic - Van (Ferry)	0500	2359	68	36.04	72.50	51.50
	Van	0600	2359		0.00		30.75
	Van - Vic (Ferry)	0700	1600	68	36.04	72.50	30.75
*Prepayment paid on AC's PCARD							
<b>TOTALS OF COLUMNS</b>				<b>36.</b> \$ 72.08	<b>37.</b> \$ 145.00	<b>38.</b> \$ 113.50	<b>39.</b> \$ 61.50
				<b>40.</b> \$ 0.00	<b>Claim Total</b> s.22		
<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> \$ 392.08 s.22
<b>Less Travel Advance</b> 060							
							<b>54.</b> \$ 392.08 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>	



Where ideas work

## Travel Voucher (Restricted Use)

Control No.

E127870

**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> (778) 677-4304	
<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> 2018/01/02		<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>	<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>Lodging Costs</b>
12/15	Vic - Van	1500	2359	69	36.57	72.50	
12/18	Van	0600	2359		0.00	s.2	30.75
12/19	Van - Vic	0600	2000	68	36.04	89.50	
<b>TOTALS OF COLUMNS</b>				<b>36.</b>	<b>37.</b>	<b>38.</b>	<b>39.</b>
				\$ 72.61	\$ 162.00	\$ 103.00	\$ 30.75
					s.22		\$ 0.00
							<b>40.</b>
							Claim Total
							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>	
060	51057	54000		5701	5100000	s.22	
060							
060							
060							
<b>Less Travel Advance</b>							
060							
				<b>54.</b>			
				\$ 368.36			
				s.22			
				<b>AMOUNT DUE TO EMPLOYEE</b>			
<b>45. Employee Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</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>56. Spending Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.							
<b>57. Payment Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Requisition for payment pursuant to section 32 of the Financial Administration Act.							



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> (778) 677-4304	
<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>	<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>Cost</b>
11/19	Van - Vic	1600	1700		0.00	✓ 21.00	
12/19	Vancouver	0800	1600		0.00	✓ 19.00	
							<b>22. Lodging Costs</b>
							<b>20. &amp; 21. Miscellaneous</b>
							<b>Cost</b>
							<b>Describe</b>
<b>TOTALS OF COLUMNS</b>				<b>36.</b>	<b>37.</b>	<b>38.</b>	<b>39.</b>
				\$ 0.00	\$ 40.00	\$ 0.00	\$ 0.00
				<b>40.</b>			<b>Claim Total</b>
				\$ 0.00			\$ 40.00
<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>
060	51057	54000	5701	5100000	s.22		\$ 40.00
060							
060							
060							
<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>				<b>Print Name</b>		<b>Date Signed</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>56. Spending Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.							
<b>57. Payment Authority Signature (See Audit Trail)</b>				<b>Print Name</b>		<b>Date Signed</b>	
- Requisition for payment pursuant to section 32 of the Financial Administration Act.							

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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



## Control No.

E127909

<b>Name</b>	<b>Employee ID</b>	<b>Phone Number</b>
Infante, James	S.22	(778) 679-4931
<b>Client Organization</b>	<b>Job Title</b>	<b>Travel Group Code</b>
Tourism, Arts and Culture	Ministerial Assistant	3

<b>Type of Travel</b> In Province	<b>14. Reason for Travel</b> Staffing Minister/Staff	<b>Headquarters</b> Minister's Office
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## 12. Mailing Address for Cheque

s. 22

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
12/06/2017	Vancouver (Ferry)	1500	1800		0.00			0.00		✓ 54.08	BC Connector
12/07	Vancouver	0900	1500		0.00		F-BD	22.75		✓ 12.50	taxi
12/08	Vancouver	0900	1400		0.00		F-BD	22.75		✓ 21.80	taxi
12/12	Vancouver	0900	1200		0.00			0.00		✓ 32.10	taxi
12/13	Maple Ridge	1400	2000	135	71.55			0.00		✓ 35.35	UPS
12/14	Maple Ridge	0800	2000	145	76.85			0.00		s.22	
12/31	Victoria (Ferry)	1600	2000		0.00			0.00			
12/31	Victoria	1600	2000		0.00			0.00			
01/07										✓ 36.70	Ferry/Ferry Connector

## TOTALS OF COLUMNS

TOTALS OF COLUMN	\$ 10.00	\$ 6.00		\$ 10.00	\$ 6.00	\$ .22
49	40	50	51	52	45	

48.	Client Code	49. Resp.	50. Service Line	51. STOB	52. Project	45. Supplier Code	Amount
	126	51384	54006	5701	5188888	S.22	\$ 351.08
	126	51384	54006	6534	5188888		\$ 35.35
	126			6506			
	126						

Less Travel Advance	
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126						
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**AMOUNT DUE TO EMPLOYEE**

54.	\$386.43
	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

## 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

## BUSINESS EXPENSE APPROVAL for Business Meetings/Protocol Events

**Attach original invoices/receipts that have been coded and approved by an expense authority. Please see page 2 for further instructions.**

BUSINESS EXPENSE APPROVAL NO.

### SECTION 1 – ORIGINATOR INFORMATION

NAME OF ORIGINATOR OF EXPENSE <b>James Infante</b>	TELEPHONE NO. <b>( 250 ) 953-0905</b>	DATE SUBMITTED <b>2018/01/12</b>	YYYY / MM / DD <b>2018/01/12</b>
MINISTRY/DIVISION/BRANCH <b>Tourism Arts and Culture</b>	LOCATION (CITY) OF EVENT <b>Vancouver</b>	START DATE OF EVENT <b>2018/01/02</b>	YYYY / MM / DD <b>2018/01/02</b>
		END DATE OF EVENT <b>2018/01/02</b>	YYYY / MM / DD <b>2018/01/02</b>

### SECTION 2 – NAME / NATURE OF EVENT

In general terms, describe the event, the number of people attending and their affiliation. For example: Annual Regional Meeting – 20 government employees, 2 service contractors.

UPS items from Vancouver to Victoria

### SECTION 3 – INDIVIDUALS INCLUDED IN MEAL CLAIMS

Complete this section only if the Business Expense Approval includes a meal. Identify the individual's name and either the ministry or company they are affiliated with. Attach a separate list if necessary.

### SECTION 4 – BUSINESS EXPENSE REQUESTED

CATEGORY	STOB	AMOUNT
1. Meeting Room Rental	6531	
2. Equipment/Furniture Rental	6531	
3. Photocopying, Faxing, Telephone, etc.	6531	
4. Food/Beverages for Meetings <input type="checkbox"/> BREAKFAST <input type="checkbox"/> LUNCH <input type="checkbox"/> DINNER <input type="checkbox"/> SNACKS <input type="checkbox"/> COFFEE/TEA/JUICE, ETC.	6531	
5. Business Meals in Restaurant <input type="checkbox"/> BREAKFAST <input type="checkbox"/> LUNCH <input type="checkbox"/> DINNER	6531	
6. Event Planners, Speakers, etc.		
7. Travel Costs for Non-BC Government Participants		
8. Other: <u>Courier</u>		35.35
<b>ESTIMATED TOTAL</b>	<b>\$</b>	<b>35.35</b>

### SECTION 5 – EXPENSE AUTHORITY PRE-APPROVAL

RESP. CENTRE <b>53184</b>	SERVICE LINE <b>54006</b>	PROJECT NO. (IF APPLICABLE) OR ADDITIONAL CODING <b>5188888</b>
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EXPENSE AUTHORITY SIGNATURE – Certified correct pursuant to sections 32 & 33 of the *Financial Administration Act* and related policies.

*X Kelly Newhook*

PRINT NAME OF EXPENSE AUTHORITY <b>Kelly Newhook</b>	DATE SIGNED YYYY / MM / DD <b>2018/02/05</b>
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### SECTION 6 – EMPLOYEE REIMBURSEMENT INFORMATION

Complete this section only if reimbursing an employee for expenses they have paid personally. Enter payee name, cheque mailing address, and reimbursement total.

QUALIFIED RECEIVER SIGNATURE – Certified goods/services received pursuant to CPPM 4.3.2

*X James Infante*

**REIMBURSEMENT TOTAL**