

Control No.

E128522

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.

Client O Advanc	no, Christian Organization ed Education, S	kills a							s.2 Jo l Mi	b Title inisterial <i>i</i>	Assistant		(250 Trav 3		0179 up Coc	
5. Date (2018/04	Completed		6. F 201	iscal Ye	ar	7	7. S _l	pecial Cl	nec	que Issue	•	8. Cr	eque St	ub Info	rmatio	n
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56. Sper	nding Authority ed correct pursu stration Act and	ant to	sect	tion 32 8			inan	cial	F	Print Nan	ne		Dat	e Sign	ed	
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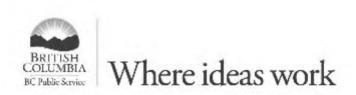
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Apr 26-18

CF18EXECDM8



Travel Voucher (Restricted Use)

Control No.

E128287

Freedom of Information and Protection of Privacy: The personal information you are providing is collected for the purposes of travel expense administration and under the authority of the Financial Administration Act. The collection, use and disclosure of personal information is in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions regarding this collection, please contact your Ministry's Director/Manager of Information and Privacy.

collection	n, please contact y	your Mini	stry's Direc	tor/Mar				у.					
Name						Emplovee II s.22	D			Phone N			
Sharma										(250) 35			
	rganization n and Family Deve	lonment			,	Job Title Ministerial A	Accietant			3	roup Cod	е	
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01/23	Abbs>Van	0900	1400		0.00		H-	25	.75				
01/29	Vancouver	1100	1830 -R	UR RT	0.00		H-	25	.75		√ 17.*	10	Taxi
02/26	Vancouver	0000	0639		0.00			0	.00		√ 13.6	60	Taxi
03/02	Vancouver	0000	1530 -M	FFTING	RT 0.00		H-	25	.75		√ 9.8	80	Taxi
03/05	Vancouver	0000	0629	C (HJ)*	0.00			0	.00		√ 13.°	70	Taxi
	*PCARD												
					36.	37.		38.		9.	40.	-	Claim Total
TOTAL S	OF COLUMNS				\$ 0.00	\$ 0.00		\$ 103		\$ 208.64	\$ 54.2	- 1	\$ 365.84
18.	49.	5	0.		51.	52.			5.	Ψ 200.01	ψ 0 1.2		Ψ 000.01
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IN 10 (EFI	I-F0012 v2.6.1)	Produ	ction *** C	opyrigh	nt © Gover	nment of Brit	ish Colum	bia	Mi	nistry Spe	nding Auth	ority	ARCS 1240-2

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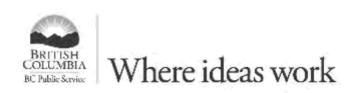
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited CDM Mar 21/18

CF18EXECDM8

Phone Number



Travel Voucher (Restricted Use)

Control No.

E128346

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.

Employee ID

	ganization	D				s. Jo	22 b Title				(250) 3 Travel (56-5767 Group Code	
5. Date Co 2018/03/				cal Year			linisterial Ass I Cheque Iss			8. C	3 heque Stu	b Information	on
Type of T In Province	ravel ce		14. R Minis	eason for strial Busin							idquarters toria		
	g Address 501 Bellevil			ia. BC V8V	/ 1X4								
16. Travel Dates	17.	laces Tra			18. Pe	rsonal icle Use	19. Other Transport	20. & 21 Mo	l. eals		22. Lodging	20. & 21. Misce	ellaneous
2018 03/09 03/12	Vancouve Vancouve	er 0	art 000 000	End 1002 0606	Km	0.00 0.00	Costs	Claim	-	t 0.00 0.00	Costs	16.20 15.00	
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FIN 10 (EFI-F0012 v2.6.1)

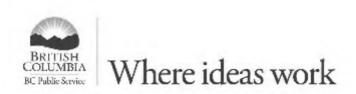
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited CDM Mar 21/18

CF19EXECDM2



Travel Voucher (Restricted Use)

Control No.

E128822

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collection	, please co	ntact yo	ur Minis	try's Direct	or/Man	ager of Info	ormation and	Privacy.				
Name Sharma,	Niki						nployee ID 22				Number 356-5767	
	ganizatior	1					b Title				Group Code	
	and Family		pment			N	linisterial Ass	sistant		3		
5. Date C 2018/05/	ompleted /25		6. Fis	cal Year		7. Specia EFT	I Cheque Iss	sue	8.	Cheque St	ub Informatio	n
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Travel		Places T	ravelle	d		rsonal	Other		eals	22.		llaneous
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03/29	Bulli-va	"'	1230	1232		0.00			0.0	9	14.70	I axi
TOTALS	OF COLU	MNS			<u> </u>	36. \$ 0.00	37. \$ 0.00		38. \$ 0.0	39. 0 \$ 0.00	40. \$ 84.50	Claim Total \$ 84.50
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,		and rolat	ou polic									
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited CDM July 6/18

CF19EXESLP20



Travel Voucher (Restricted Use)

Control No.

E129239

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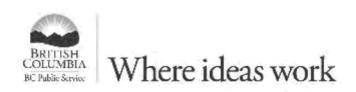
	Niki ganization and Family D	evelop	ment			s.2 Jo	nployee ID 22 b Title inisterial Ass	sistant		(25 Tra 3	50) 3 i vel (Number 56-5767 Group Code		
5. Date Co 2018/07/2	ompleted		6. Fis	cal Year		7. Special	Cheque Iss	sue		8. Cheque	e Stu	ıb Informati	ion	
Type of T In Provin	ravel	or Cho	14. Re Minis	eason for trial Busin		Eri				Headqua Victoria	rters			
	501 Belleville	Street			18. Per	rsonal cle Use	19. Other Transport	20. & 21 M	l. eals	22.	nina	20. & 21. Misc	ellaneous	
2018 03/29	Destination Vancouver		tart 1105	End 1132	Km	Cost 0.00	Costs	Claim	Cost 0.0			Cost 15.60 s.22	Describe Taxi suppleme	ental to E128
						36.	37.		38.	39.		40. _{15.60}	Claim Total	
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56. Spend - Certified	ding Authori d correct purs ration Act and	suant to	sectio	n 32 & 33		inancial	Print N	ame			Date	e Signed		
- Requisi	ent Authorit ition for paym ration Act.					e Financia	Print N	ame			Date	e Signed		

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

Audited 2018Aug15



Control No.

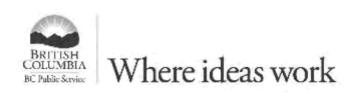
E128299

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Name Maartma	an, William rganization	your ivi	iiiisu y s Di	Em s.2 Jol	ployee l 2 Title			ivacy.	(250) 9	Number 53-4290 Group Code			
	Completed		Fiscal Ye				heque Issue)	8. Che	que Stub In	forma	tion	
Type of I	Travel nce	ı,	4. Reason Ministerial		avel				Headq Victor	uarters a			
	ng Address for 0 24, Parliament Bo			045.5	TN PRO	V GOVT	Victoria BC	BC V8W	9F2				
16. Travel Dates	17. *PCard Places 1			18. Per	rsonal	19. Other	20. & 2 ^r		22. Lodging	20. & 21. M	liscell	aneous	
2018 03/09	Destination *Vancouver (HJ)	Start 0600	End 1700	Km	Cost 0.00	Costs		33.25	Costs	Cost 48.15 s.22		cribe ional car rental	
	OF COLUMNS				36. \$ 0.00			38. \$ 33.25	-	40. 48.15 s.22		Claim Total	0
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- Requis	nent Authority Sition for payment tration Act.	pursua	ant to sect	ion 32	of the Fi		Print Nan			Date Sig		ADCS 4240	

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Control No.

E128632

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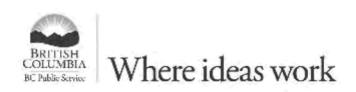
Name Maartma Client Or Educatio			Emplo s.22 Job Ti Minist	yee ID tle erial Assista	ant		1	Phone Numbe (250) 953-429 Fravel Group 3	0 Code	
5. Date C 2018/04/	ompleted 23	6. Fiscal Ye	ear	7. Specia	Cheque Is	sue		8. Cheque St	ub Informa	ation
Type of 1 In Provin	Travel	14. Reason Ministerial		ı				Headquarters Victoria	3	
	24, Parliament Build		9045, STN	PROV GO	/T Victoria,	BC, BC V	8W 9E2	2		
16. Travel Dates	17. Places Ti	ravelled	1	rsonal icle Use	19. Other Transport	20. & 21 M	eals	22.		scellaneous
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48. Client 0	OF COLUMNS 49.	01	rice Line 06000 06000	36. \$ 0.00 51. STOB 5701 5701		Project 2200000 2200000	38. \$ 22 4:	39. 2.75 \$ 0.00 5. Supplier s.22	, , , , ,	Claim Total \$ 111.75 Amount \$ 22.75 \$ 89.00
)62)62									
	vel Advance	1		1	1		1			
							T DUE	TO EMPLOYE		54. \$ 111.75
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56. Spen - Certifie	ding Authority Sig d correct pursuant t tration Act and relate	o section 32 8	Audit Trail & 33 of the) Financial	Print I	Name		Dat	e Signed	
- Requis	nent Authority Sigr ition for payment pu tration Act.				Print I	Name		Dat	e Signed	

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

> Audited 2018May02 SLP



Control No.

E128329

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.

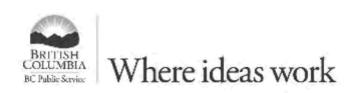
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	ganization				Job Ti	tle					el Group C			
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5. Date C	ompleted /15		6. Fis	cal Year		7. Specia	al Cheque Is	sue		8. C	heque Stu	b Informa	ation	
Type of	Travel		14. R	eason for	Trave	i				Hea	dquarters			
In Provir				trial Busir	ness					Vic	toria			
	n g Address 9044 Stn P			a, BC V8\	N 9E2									
16.	17.				18.		19.	20. & 21			22.	20. & 21		
Travel		laces Tr	avelled	l		rsonal	Other	M	eals			Mis	scell	aneous
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2018	Destination		tart	End	Km	Cost	Costs	Claim	Cost		Costs	Cost		Describe
03/01 03/02	*Vic-Van (1630 0000	1800 2359		0.00	14.70	F-BL F-BD		0.50 2.75	30.75			
03/02	*Van-Vic	-	1500	1630		0.00	14.70	F-DD		0.00				
03/03	Vall-Vic	(1111)	1300	1000		0.00			'	.00				
							~~					40		01-1 7-1-1
TOTALS	OF COLUM	ANG				36. \$ 0.00	37 . \$ 14.70		38.	3.25	39. \$ 30.75	40. \$ 0.0	n	Claim Total \$ 98.70
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited 2018Mar20



Travel Voucher (Restricted Use)

Control No.

E128415

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.

Attorney	ganization General	le Fie		Emplo s.22 Job Tit Ministe	t le erial Assis				(250) Trave 3	387-1866 I Group C	ode	41 ou
5. Date C 2018/03/	completed	2018	cal Year		7. Specia	I Cheque Is	sue		8. Cn	eque Stu	b Informa	tion
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	ng Address for C 9044 Stn Prov Go		io PC \/9\	M 0E2								
16. Travel	17.	Travelled		18.	rsonal	19. Other	20. & 21	eals		22.	20. & 21. Mis	cellaneous
Dates	*PCard				cle Use	Transport				Lodging		
2018 03/16 03/17 03/18 03/19	*Vic-Van (HA) Vancouver Vancouver *Van-Vic (HA)	Start 0730 0000 0000 1700	End 0900 2359 2359 1830	Km	0.00 0.00 0.00 0.00	2.85	F-D	0	.25 .00 .00 .25	30.75	Cost	Describe
TOTALS 8.	OF COLUMNS				36. \$ 0.00	37. \$ 2.85 52.		38. \$ 66		39. \$ 30.75	40. \$ 0.00	
Client 1 1 1	Code Re	sp. 5002	Service 100		STO E 570	3 ∣ 1	Project 1500000			Supplier C s.22	ode	Amount \$ 100.10
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1	05						AMOUN	T DUE	TO EN	— MPLOYEE		54. \$ 100.10
- Certifie disburse a result	oyee Signature ed this travel expe ements made and of travel on gover n I have not been	nse claim or allowa nment bu	is a true s nces to wh siness as	nich I ar detailed	m entitled a d above an	d	lame			Date	Signed	
56. Spen - Certifie	ding Authority Sed correct pursuar tration Act and rel	nt to section	on 32 & 33			Print I	Name			Date	Signed	
- Requis Administ	nent Authority Si ition for payment tration Act. -F0012 v2.6.1)	pursuant	to section	32 of th		Print I					Signed	ority ARCS 1240-

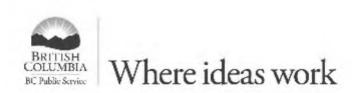
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited 2018Mar20

EN19EXEDIJ 13



Travel Voucher (Restricted Use)

Control No.

E128614

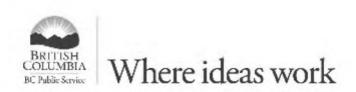
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	n, please contact	our M	linistry				nation and F	Privacy.					
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	lessica s. ✓ rganization				s.22 lob Titl	ما				387-1023 Group Cod	de		
Agricult						erial Assistan	t		3	Group Cot	. .		
	Completed	6.	. Fisca	al Year		7. Special C	-	ie		eque Stub	Inform	ation	
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	ing Address for 0 9043 Stn Prov G			N 9F2									
16.	17.	٥٧١ , ١	JO VO	V JLZ	18.	0.53	19.	20. & 2	1.	22.	20. &	21.	
Travel	Places	Trave	elled			ersonal	Other		leals				laneous
Dates					Vel	hicle Use	Transport			Lodging			
2018	Destination		tart	End	Km	Cost	Costs	Claim	Cost	Costs	Cost		Describe
03/21	Vancouver		0080	1800		0.00	P/Card	F-BD	22.75	30.75			
03/22 03/24	Van-Vic (I Vic-Bla.Crk-Tof	/ -	0080	0900 1700	486		1, cura	F-B	0.00	242.44			
03/25	Tofino	-	400	2200	400	0.00		F-	51.50	242.44			
03/26	Tofino		900	1700		0.00		F-	51.50	242.44			
03/27	Tofino-Vic	0	700	1800	324	171.72		F-	51.50				
TOTALS	OF COLUMNS			0	10 kms	36.	37. \$ 0.00		38.	39.	40.	0.00	Claim Tota \$ 1405.62
8.	49.		50.	0	IU KIIIS		2.		45.	ψ 130.01	μ ψ (1	ψ 1400.02
	t Code Re			ervice Li	ne	тов	Proj	ect		pplier Code	е	١.	Amount
	130 29	001		30000		5701	290	0000		s.22		53.	50 \$ s.22
		0001		30000		5702	290	0000				1352.	12
	130												
	130 avel Advance												
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										-		54.	A 4405.00
4F F	Januar Cimmatum	/C /	٠ ١٠١٨ .	T:1\					UE TO EM				\$ 1405.62
	loyee Signature ed this travel expe				atemer	at of	Print Nar	ne		Date Si	ignea		
	ements made and												
	of travel on gove												
	h I have not been	and w	vill not	be reimb	ursed	by any other							
party.			- 10				D. J. A. N.			D-4-0			
	nding Authority sed correct pursua						Print Na	me		Date S	igned		
	stration Act and re				oi liie i	manciai							
57. Payr	ment Authority S	ignatu	ıre (Se	e Audit	Trail)		Print Na	me		Date S	igned		
	sition for payment	pursu	ant to	section 3	32 of th	e Financial							

Administration Act. FIN 10 (EFI-F0012 v2.6.1)

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Travel Voucher (Restricted Use)

Control No.

E128408

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collection	n, please cor	ntact your	Ministry'	s Directo	r/Mana	ger of Inf	ormation ar	nd Privac	y.	,	,		
Name		2			mploy	ee ID					e Numbe		
	essica s	4			.22) 387-102		
	rganization				ob Title						el Group (Code	
Agricultu			C F:			rial Assist				3	h O4-		1
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Type of				son for T	raval					Ноо	dquarters		
In Provi				gs with M							uquarters toria	•	
	ng Address	for Chec		JS WILLI IVI	IIIISIGI					VIC	toria		
	9043 Stn Pr			V 9F2									
16.	17.	, ,			18.		19.	20. & 2	1.	12	22.	20. & 21.	
Travel		laces Tra	velled			rsonal	Other		leals				ellaneous
Dates	_					cle Use	Transport	1			Lodging		
2018	Destination	n	Start	End	Km	Cost	Costs	Claim	Cost		Costs	Cost	Describe
03/15	vic-van	(HA)	1700	1800		0.00	P/Card				30.75	12.60	cab
03/16	Vic- Van		0700	1800		0.00		F-L	41.	.00	30.75	54.40	cab
03/17	Van-PG-M	cBride(A	030 (2)	2359		0.00	P/Card	F-BD	22.	.75	123.17	173.30	car rental
03/18	McBride-P	G-Van (A	C) 0700	2359		0.00	P/Card	F-B	41.	.00		74.90	cab and gas
													28.00/46.90
48. Clien	t Code 130	Resp. 29001		Service L 30000)	36. \$ 0.00 51. STOE	52. 3	Project 2900000	,	.75 15.	39. 184.67 \$ s.22 Supplier (s.22	\$ 315.20 Code	Amount 169.50 \$ s.22
	130 130 130	29001		30000)	570	2	2900000			_		435.12 \$
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	130										_		E 4
									NT DUE	то Е	MPLOYE		54. 604.62 \$ c 22
- Certifie disburse a result	loyee Signa ed this travel ements mad of travel on th I have not	l expense e and/or a governme	claim is allowance ont busine	a true sta es to whice ess as de	h I am tailed	entitled a above an	d	Name			Date	Signed	
	nding Autho	rity Sign:	ature (S	ee Audit	Trail)		Print	Name			Dat	e Signed	
- Certifie	ed correct pu stration Act a	irsuant to	section 3	32 & 33 o		inancial					Jac	o orginou	
- Requis	nent Author sition for pay stration Act.					e Financia		Name			Dat	e Signed	

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EN19EXEDIJ 21



Where ideas work

Travel Voucher (Restricted Use)

Control No.

E128713

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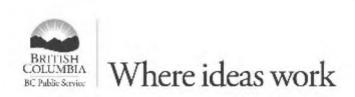
Sn		essica s ganization re				Employ s.22 Job Titl Ministe		int		- 1	(250) Trave 3	8 Number 387-1023 I Group C	ode		
	Date C	ompleted 08		6. Fis	cal Year		7. Special	Cheque Iss	sue		8. Cl	neque Stu	ıb Informat	ion	
Typ In	pe of T Provin	ravel ce		14. Re Trave	eason for el with Mir						Head	dquarters oria	N.		
PC	Mailin Box 9	ng Address for 9043 Stn Prov	Govt	gue BC V	8W 9F2										
Tra	avel	17. Plac	es Tra	avelled	1	Vehi	rsonal icle Use	19. Other Transport		eals		22. Lodging	100	cellaneous	
04	118 1/01 1/19	Destination Van to Vic Vic to Van	0	tart 0800 1800	900 1830	Km	0.00 0.00	Costs	Claim		.00 .00	Costs	12.4 8.0		
	TALC	05.001.000					36.	37.		38.		39.	40.	Claim Total	
8.	TALS	OF COLUMN:	5	50.			\$ 0.00	\$ 0.00	_		5.	\$ 0.00	\$ 20.40	\$ 20.40	4
	1:		Resp. 29001	3 1	Service 300		STOB 5701	P	roject 900000			Supplier (s.22	Code	Amount \$ 20.40	
.es	ss Trav	vel Advance					-	où.							
	1	30					1		AMOUNT	DUE	TO E	MPLOYE		54. \$ 20.40	
distant	Certified sburser result of	oyee Signatu d this travel ex ments made a of travel on goo i I have not be	nd/or a	e claim allowar ent bus	is a true s nces to wh ness as o	nich I and detailed	above and	Print N		DUE	IO EI		Signed	\$ 20.40	
56. - C	Spend	ding Authorit d correct purs ration Act and	uant to	sectio	n 32 & 33			Print N	ame			Date	e Signed		
57.		ent Authority					e Financia	Print N	lame			Date	Signed		1

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FI18FXFCDM2

Phone Number



Travel Voucher (Restricted Use)

Employee ID

Control No.

E128468

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Riley, Ka Client Or	arl rganization				s.22 Job Ti	itle					(250) 3	87-79	934	
	' Services					terial Ass	istant				3			
	Completed			scal Year		7. Spe	cial Cl	heque	Issue		8. Che	que (Stub Informa	ition
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Type of T In Provin				Reason fo isterial Bu		ei					Headq Victori		ers	
	ng Address	for Ch		iotoriai Da	3111000						Violoti	<u> </u>		
	of Citizens'			ox 9068 S	tn Prov	Govt Vid	ctoria,	BC V8	W 9E2					
6.	17.				18.		19.		20. & 21		22.		20. & 21.	
Travel	PI	aces Ti	ravelled	t		sonal		ther	M	eals			Misc	ellaneous
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03/19	Vic to Var		1800	1930		0.00	4	10.00		0.0			0.20	I III I I I I I I I I I I I I I I I I
03/20	Van	İ	0800	1130	l i	0.00	1	8.00	F-LD	22.7	5			
03/28	VAN-VIC (H.I)*					1	0.00						
	*PCAR													
	T CARC													
						36.	27 0			38.	39.		40.	Claim Total
OTALS	OF COLUM	MNS				\$ 0.00	37. [\$ 22.7		0.00	\$ 8.29	s.22 59
3.		19.	50	0.		51.		52.		45			ψ 0.20	S.22
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	loyee Signa ed this trave				stateme	ent of		Fillin	Name			10	ate Signed	
	ements mad						d as							
	of travel on													
	h I have not	been a	nd will r	not be rein	nbursed	by any	other							
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		14 01		'0 - • •				<u> </u>				+_		
	nent Autho						cial	Prin	t Name			0	ate Signed	
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	-F0012 v2 6	1)	Produ	ction *** (Convrial	ht © Gove	rnmen	t of Brit	ish Colum	hia	Min	strv	Spending Auth	nority ARCS 1240-20

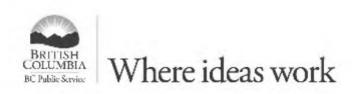
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Name

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

Audited CDM Mar 28/18



Control No.

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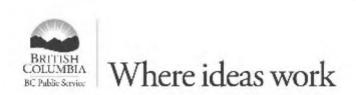
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Name				Employ	ee ID				one Numbe			
Riley, Ka				s.22					50) 387-793			
	ganization Services			Job Titl Ministe	i e rial Assist	ant		1 ra 3	vel Group (ode		
	ompleted	6.	Fiscal Year			I Cheque Is	sue		Cheque Stu	ıb Informa	tion	
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	ng Address for of Citizens' Se			n Provi	Court Viete	rio PC \/9\A	/ OE2					
16.	17.	VICES FC	DOX 9000 3	18.	30VL VICIL	19.	20. & 21		22.	20. & 21.		
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Dates				Vehi	cle Use	Transport			Lodging			
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02/22	Vic to Van (0.00	10.00 335.00		0.00	.			
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03/08	Vic to Van (f Van	0 2100 0 1600		0.00	16.70	F-BD	0.00 22.75					
03/11	Van to Vic				0.00	16.70	1 -00	0.00				
		1										
					36.	37. 60 10		38. ✓	39.	40.	Claim Total	
	OF COLUMN	3			\$ 0.00	\$s.22		\$ 22.7		\$ 0.00		82.85
48.	49.		50.		51.	52.		45.				
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i	12 12 12		346	10	570	1 3		s.22			82.85	
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Less Tra	12 12 vel Advance 12	re (See A	udit Trail)			Print N	3200000 AMOUN	_		E Signed	54. 82.85	
Less Trade 1 Less Trade 1 45. Emple - Certifie	12 12 vel Advance	re (See A	audit Trail)	statemer	l l	Print N	3200000 AMOUN	_			54. 82.85	
Less Tra 1 45. Empl - Certifie disburse a result of	vel Advance 12 oyee Signatu d this travel eximents made a of travel on go	re (See A pense cl nd/or allo vernment	audit Trail) aim is a true s wances to wh business as	statemer nich I an detailed	nt of n entitled above an	Print N	3200000 AMOUN	_			54. 82.85	
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EN18EXECDM3



Travel Voucher (Restricted Use)

Control No.

E128298

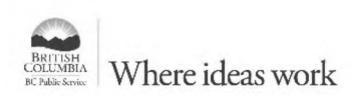
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Name Xia, Eve Client O	line rganization	,	,				Employee s.22 Job Title	e ID		s.22	e Number I Group Co	ode
	ment and Clim		_	••				al Assistan		3		
5. Date C 2018/03	completed		6. Fiscal Y 2018	'ear	7. 8	Special C	heque Issue	•	8. Ch	eque Stub	Information	on
Type of			14. Reaso	n for Trav	el				Head	quarters		
In Provir		İ	Ministeria						MO	-		
	ng Address fo											
	12 501 Bellevi	lle St Vio	ctoria, BC	V8V 1X4								
16.	17.				18.		19.	20. & 21.		22.	20. & 21.	
Travel Dates	P	laces Tr	avelled			rsonal icle Use	Other	Me	als	Ladaina	Misc	ellaneous
2018	Destination		Start	End	Km	Cost	Transport Costs	Claim	Cost	Lodging Costs	Cost	Describe
03/09	Vic/PrinceGe	eorge I) PCARD	0530	2359	· ·	0.00	COSIS	F-	51.50	Costs	√ 135.0	
						36.	37.		38.	39.	40.	Claim Total
	OF COLUMN		1			\$ 0.00	\$ 0.00		\$ 51.50	\$ 0.00	\$ 135.0	0 \$ 186.50
(49. t Code)48)48)48)48	Resp. 29005	50. Ser	vice Line 64000	5	5708 5704 5702	52. Pro j 290	ject 0000	45. S	upplier Co s.22	ode	Amount \$ 186.50
Less Tra	vel Advance											
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56. Spen	ding Authoried correct purs tration Act and	uant to	section 32			ncial	Print Nan	ne		Date	Signed	
- Requis	nent Authority sition for paymetration Act. -F0012 v2.6.1)	ent purs	uant to se	ction 32 of	the Fi		Print Nan				Signed	rity ARCS 1240-2

Ministry Payment Authority ARCS 1050-06

Audited CDM Mar 26/18

FN18FXFCDM3



Travel Voucher (Restricted Use)

Control No.

E128289

Freedom of Information and Protection of Privacy: The personal information you are providing is collected for the purposes of travel expense administration and under the authority of the Financial Administration Act. The collection, use and disclosure of personal information is in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions regarding this collection, please contact your Ministry's Director/Manager of Information and Privacy.

	please contact yo	ur Minist	ry's Direct	or/Man	nager of Info							
Name Xia, Evelir Client Org Environme		change S	trategy			Employ s.22 Job Tit Ministe		tant		s.2	one Numbe 2 vel Group	
5. Date Co 2018/03/0	mpleted		cal Year		7. Special	Cheque Iss			8. Che		ub Informa	tion
Type of Tr In Provinc	avel	14. Re	eason for		<u> </u>				Head o	uarters	;	
	Address for Ch		niy Duome	.55					IVIO			
	501 Belleville St	Victoria,	BC V8V 1	_								
I6. Travel Dates	17. Places ¹	Γravelled	i		ersonal nicle Use	19. Other Transport	20. & 21 M	l. eals	22	2. odging	20. & 21. Mis	cellaneous
	Destination Vic/van	Start 1600	End 2359	Km	Cost	Costs ✓ 16.70	Claim	Cost		Costs	Cost	Describe
03/05	Van/Vic 0600 0900				0.00	√159.00			.00		√ 34.0	00 taxi x 2
TOTALS C	OF COLUMNS				36. \$ 0.00	37. \$ 175.70		38 .	0.00	9. \$ 0.00	40. \$ 34.00	Claim Tota \$ 209.70
B.	49.	50.			51.	52.	I		5.	Ψ 0.00	ψ 04.0	σ γ φ 200.70
Client 0 04 04 04	Code Res 8 290 8 8	р.	Service 6400		STOB 5701	P	roject 900000		Sı	pplier (s.22	Code	Amount \$ 209.70
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04	8											54.
							AMOUNT	DUE .	то ем	PLOYE	E	\$ 209.70
 Certified disbursen a result of for which 	yee Signature (S this travel expen nents made and/o travel on govern I have not been a	se claim r allowar ment bus	is a true s nces to wh iness as c	ich I ar letailec	m entitled as d above and		ame			Date	Signed	
 Certified 	ing Authority Signal correct pursuant ation Act and rela	to sectio	n 32 & 33			Print N	ame			Date	e Signed	
- Requisit	ent Authority Sig ion for payment p ation Act.	ursuant t	o section :	32 of th	ne Financial	Print N					e Signed	ority ARCS 1240-

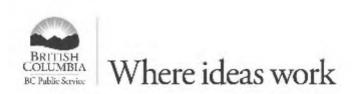
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited CDM Mar 26/18

HE19EXEDIJ2



Travel Voucher (Restricted Use)

Control No.

E128494

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collectio	n, please co	ntact your	Ministry	's Directo	or/Man	nager of Inf	formation a	nd Priva	cy.						
Name		,				yee ID					ne Numbe				
	Kassandra	√			s.22	·la					(0) 953-354				
Health	rganization	1			l ob Tit Minist	u e erial Assist	ant			3	vel Group (Joae			
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2018/0	3/28		2018								· .				
Type of				son for		I					adquarters	•			
In Prov	ince ing Addres:	s for Cha		rial Meet	ings					VI	ctoria				+
	337, Minister			01 Bellev	/ille St	Victoria, B	3C V9V 1X	1							
16.	17.				18.	0.53	19.	20. &	21.		22.	20. & 2	21.		7
Travel	P	laces Tra	velled			ersonal	_ Other		Meals		l	1	Misce	ellaneous	
Dates 2018	Dantinatia	_	C44	l End		hicle Use	Transpo		n Cos		Lodging Costs	Cost		Describe	
03/18	Vict -Nan-		Start 1547	End 2359	Km 141	Cost 74.73	Costs 72.7			25.75	171.35	Cost		Describe	
03/19	Van-Seche	elt (ferry)		2359	91				41.00		136.85				
03/19	Sechelt	(Iciiy)	0700	2359		0.00	0			0.00		178	.50	BEA Meeting	
03/20	Sech-Victo	oria (ferry)	0700	1730	173				- 1	21.00					
03/29	Vic -Court	-Vic	0730	1700	452	239.56	5	F-L	4	11.00					
													l		
						36.	√ 37.	-/	20	120.75	39. ✓	40.	_	Claim Total	-
TOTALS	S OF COLUI	MNS		8	57 kms			55		128.75 3. 22	\$ 308.20		3.50	\$ s.22	1283.2
48.			50.				52.		45		, , , , , , ,			<u> </u>	
Clier	nt Code	Resp.		vice Line	•	STOB	Pr	oject		S	upplier Co	de		Am	
	026 66 026	001 026	44000	66001		5702	66	60000			s.22		1	4.71	
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Less Tr	avel Advan	ce									_				7
	026										_		-	1000 00	4
								MOLINI	DHE T	O EM	IPLOYEE		54.	1283.21 \$ s.22	1
45 Fmr	oloyee Sign	ature (Se	- Audit 1	Trail)				Name	DUE	OEIV		Signed	1	<u>Φ</u> \$.22	+
- Certifi	ied this trave	el expense	claim is	a true st	ateme	nt of		Hame			Date	. Oigilet	•		
	ements mad						as								
	t of travel on														
	ch I have not	t been and	will not	be reimb	oursed	by any oth	ner								
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	ied correct p						' ' ' ' '	Name			Dat	e Oigile	u		
	stration Act														
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	isition for pay stration Act.	yment pur	suant to	section 3	o∠ or tr	ie Financia	⁴¹								
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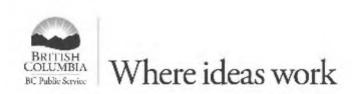
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

March 19-lunch deducted (BEA luncheon)

HF18FXFCDM4



Travel Voucher (Restricted Use)

Control No.

E128348

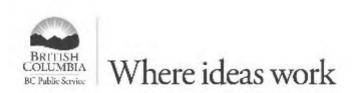
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Name van Baar Client Or Health	sen, Amanda ganization		,	Emp s.22 Job	oloyee ID	istant		(2	one Numbe 50) 953-354 avel Group	47	
5. Date C 2018/03/	ompleted		Fiscal Year		7. Special	Cheque Iss	ue	8. 0	heque Stu	ıb Informat	ion
Type of T In Provin	ravel	14 .	Reason fo						adquarters ctoria		
	of Health Office		Parliament	Building	ıs Victoria, I	BC V8V 1X4					
16. Travel Dates	17.	es Trave		18. Pe	ersonal nicle Use	19. Other Transport	20. & 21	l. eals	22. Lodging	20. & 21. Mise	cellaneous
2018 03/01	Destination Leg-Ministry	Star 113		Km	Cost 0.00	Costs √ 12.10	Claim	0.00	Costs	Cost	Describe
2 14 TOT	OF COLUMNS	<u> </u>			36. \$ 0.00	37. \$ 12.10		38. \$ 0.00	39. \$ 0.00	40. \$ 0.00	Claim Total \$ 12.10
8.	49.		50.		51.	52.		45 .	ψ 0.00	J \$ 0.00	ψ 12.10
Client 0 0 0	Code I	Resp. 66001	Service 440		STOB 6501	Pi	roject 600000		Supplier 0 s.22	Code	Amount \$ 12.10
	vel Advance										
	26							DUE TO I	 EMPLOYEE	■	54. \$ 12.10
 Certifie disburse a result of the control of the cont	oyee Signatur d this travel ex ments made an of travel on gov i I have not bee	pense cla nd/or allov ernment l	im is a true s vances to w ousiness as	hich I an detailed	n entitled as above and		ame		Date	Signed	
56. Spen - Certifie	ding Authority d correct pursu ration Act and	ant to sec	ction 32 & 33			Print N	ame		Date	Signed	
- Requis Administ	ent Authority ition for payme ration Act. F0012 v2.6.1)	nt pursua	nt to section	32 of th		Print N				Signed	ority ARCS 1240-2

Ministry Payment Authority ARCS 1050-06

Audited CDM March 27/18

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Travel Voucher (Restricted Use)

Control No.

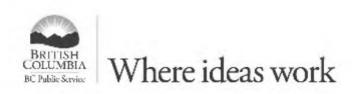
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collection	n, please contact y	our Minis	try's Direc	tor/Mar	-		Privacy.						
Name	5				Emplo	yee ID				ne Nu			
Client O	-Baugh, Anna s. ¬ rganization	✓			s 22. Job Tit	la.)4) 677	-4091 oup Code		
	Health and Addiction	ons				arial Assistar	nt		3	vei Gi	oup Code	•	
	Completed	-	scal Year			Cheque Iss		1		ue Stu	b Informa	atior	ı
Type of			eason fo	r Trave	1				Headqu	arters			
In Provir			fing Minist						vancou				
12. Maili	ng Address for C	heque											
, 16.	17.			18.	0.53	19.	20. & 21		22		20. & 21		
Travel		Travelled	ł	Pe	ersonal	Other		eals			Mis	scel	laneous
Dates		.		1	icle Use	Transport	.			dging			
2018	Destination	Start	End	Km	Cost	Costs	Claim	Cost		osts	Cost		Describe
02/19 02/19	MO-HLTH HLTH-MO	0800 0800	1800		0.00	8.20 7.10			.00				
03/01	Vic-Van (ferry)	0800	1800	70	37.10	89.50	H-		.75				
03/03	Van-VIc (ferry)	0800	1800	70	37.10	89.50	H-		.75				
03/03	Vancouver	0800	1800		0.00			0.	.00		10	.00	Parking
TOTAL S	OF COLUMNS		1/	10 kms	36.	37.		38. \$ 51	√ 39 50	\$ 0.00	40. \$ 10.0	00	Claim Total \$ 330.00
18.	49.	50		EU KIIIS	51.	52.	l		5.	• 0.00	ψ 10.	I	Ψ 000.00
	t Code Res	sp.	Service	Line	STOB		Project			pplier (Code		Amount
		M02	449	00	5701		6MHA00			s.22		314	^{1.70} \$s.22
		M02	449	900	6501		6MHA00					15	5.30
	027												
	vel Advance											+	
	027												
							AMOUNT	DUET	O EMD	OVEE		54	
15 Emn	loyee Signature (Soo Aud	it Trail\			Print Na		DUE	O EMP		Signed		\$ 330.00
	ed this travel exper			stateme	ent of	Fillitie	aiiie			Date	Signed		
	ements made and/					s							
	of travel on govern												
	h I have not been	and will n	ot be reim	bursed	by any oth	er							
party.			'0							<u> </u>	<u> </u>		
56. Spen	nding Authority S ed correct pursuan	ignature	(See Aud	iit i rail) Financial	Print N	ame			Date	Signed		
Adminis	tration Act and rela	ated polic	JII J∠ & JC Sies	or trie	Fillaticial								
, willing	and to the time to the	atou pone											
57. Payn	nent Authority Sig	gnature	(See Audi	t Trail)		Print N	ame			Date	Signed		
- Requis	sition for payment					ı					-		
Adminis	tration Act.									<u></u>			

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Control No.

E128375

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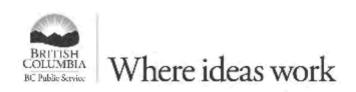
collectio	n, please co	ntact you	ır Minist	ry's Direc	tor/Ma	nager of	f Inforn	natior	and Priv	/acy.			
Name Sam A	nne-Marie						Emp	loye	e ID			Phone N (250) 95	
Client O	rganizatio						Job	Title				Travel G	roup Code
	ous Relatio Completed			tion cal Year		7. Spe			inisterial ie Issue	Assistant	8. Chequ	3 ue Stub Info	ormation
Type of				ason fo	r Trave	 el					Headqua	arters	
In Provi	nce		FN m	eeting w							Victoria		
	ing Addres : 9051 Stn F			BC V8V	V 9F2								
16.	17.	101 001	Violoria	, 20 101	18.		19.		20. & 2	1.	22.	20. & 21.	
Travel	P	laces Tra	evelled			sonal	_ Oth			eals	l	Mi	scellaneous
Dates 2018	Destination	n l	Start	End	Km	cle Use Cost	Cos		Claim	Cost	Lodging Costs	Cost	Describe
02/07	Vic/Van	(AC)	1230	2359		0.00	V 6	0.00	F-BL	30.50	174.56	e 22	
03/08	08 Chlwck/Van/Vic(AC)0600 2100					0.00	6	5.40	F-L	41.00		\$ 174.41	rntal car; gas rntal 5702
TOTALS	*PCARD					36. \$ 0.00	37 . \$ 12	25.40		38. \$ 71.50	39. \$ 174.56	40. \$ 174.41 s.22	Claim Total
48.		49.	50.			51.		52.			45.		
	t Code 120	Resp 0794		Service 520			Г ОВ 5701		Proje 0700			plier Code s.22	Amount \$ 265.06 § S.22
	120	0794		520		1	702		07000		*	5.22	\$ 280.81
	120												
	120 avel Advan	ce											
	120												
									ΔM	OLINT DILI	E TO EMPL	OVEE	54. \$ 545.87 s.22
45. Emp	loyee Sign	ature (Se	e Audi	t Trail)				Pri	nt Name		L TO LIVIT L	Date Signe	
 Certifi 	ed this trave	el expens	e claim	is a true :									
	ements made of travel or												
for which	ch I have no												
party.	nding Auth	arity Cia	natura	Coo A.	lit Trai	I)		- D-	int Name			Data Sian	a d
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Mar 27-18



Control No.

E128434

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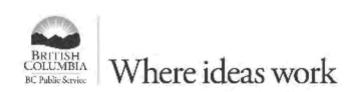
	n, piease co	ontact you	ır iviinistr	y's Directo)r/ivian		formation an				Dha	Normala au	
Name Sam. Ar	nne-Marie						mployee ID .22					ne Number 0) 953-4844	
Client O	rganizatio						ob Title					el Group Co	
	ous Relatio		econciliat	ion			Senior Minist		stant		3		
5. Date 0 2018/03	Completed 3/21		6. Fisc 2018	al Year		7. Specia	I Cheque Is	sue		8. C	heque Stub	Information	n
Type of				ason for Special Ch							dquarters toria		
	ing Addres	s for Che		p = 0.0									
	9051 Stn F			BC V8W	9E2								
16.	17.				18.		19.	20. & 21	1.		22.	20. & 21.	
Travel		Places T	ravelled			ersonal	Other	N	/leals			Misce	llaneous
Dates					1	icle Use	Transport	l			Lodging		
2018	Destinati		Start	End	Km	Cost	Costs	Claim	Cost		Costs	Cost	Describe
03/06	Vic/Van/I		1530	2359		0.00	65.00	F-BL		0.50	163.56		
03/07 03/08	Prince G Prince G		0600 0600	2359		0.00		F-D F-		3.25 1.50	163.56 163.56		
03/06	Prince G		0600	2359		0.00		F-D		3.25	163.56		
03/09	PG/Victo		0600	2100		0.00	65.00	۲-0		0.00			
00/	, 5, 1,5,5	()				0.00				0.00			
	*PCARD												
TOTALS	OF COLU	MNS				36. \$ 0.00	37. \$ 130.00		38. \$ 14	8.50	39. \$ 490.68	40. \$ 0.00	Claim Total \$ 769.18
48.		49.	50.			51.	52.			5.	+	1 1	1 +
	t Code	Resp		Service L		STOE	3 1	Project	- 1		Supplier Co		Amount
	120	0794		5200		5702		0700000			s.22		0.18 s.22
	120	= 079 4	‡ A ==	52 00	0====	== == 57 0=	1 =======	0700000		-===	===	=====	
	120												
	120										_		
	avel Advan 120	 											
								AMOUN	IT DUE	TO E	MPLOYEE	54	1. \$ 769.18
45. Emp	loyee Sigr	ature (Se	ee Audit	Trail)			Print N	lame			Date S	Signed	-
- Certifie	ed this trav	el expens	e claim is	s a true sta									
disburse	ements ma	de and/or	allowand	ces to whi	ch I ar	n entitled a							
	of travel or												
1	ch I have no	t been ar	nd will no	t be reimb	ursed	by any oth	ner						
party.													
	nding Auth						Print	Name			Date	Signed	
	ed correct p				of the I	Financial							
Adminis	stration Act	and relate	ed policie	S.									
57. Payr	ment Autho	ority Sigr	nature (S	ee Audit	Trail)		Print I	Name			Date	Signed	
	sition for pa		irsuant to	section 3	2 of th	ie Financia	al					_	
Adminis	stration Act.												

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

Audited by PL Mar 23-18



Control No.

E128492

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	n, piease co	ntact you	ır iviinist	ry's Direc	cior/iviai	nager of Into			/.				
Name	nne-Marie						nployee ID .22					hone Num l 250) 953-48	
,	rganizatio	n					b Title				٠,	ravel Grou	
	ous Relatio		econcilia	ation			enior Minist	erial Ass	istant		3		p 0000
5. Date (Completed 3/28		6. Fise	cal Year		7. Special	Cheque Is	sue		8. Che	que St	ub Informa	ition
Type of In Provi	Travel			eason fo		i				Head	quarters ria	5	
	ing Addres	s for Che	eque										
PO Box	9051 Stn F	Prov Gov	Victoria	, BC V8V	N 9E2								
16.	17.				18.		19.	20. & 2	1.	22		20. & 21.	
Travel	Р	laces Tra	avelled			ersonal	Other		leals			Mis	cellaneous
Dates						icle Use	Transport				odging		1
2018	Destination		Start	End	Km	Cost	Costs	Claim	Cost		Costs	Cost	Describe
03/22	CacheCr/		1700	2359	79	41.87		F-BL	30.5		121.80		
03/23	Kam/Meri		0600	2359	208	110.24		F-	51.5	-			
03/24	Kamloops		0600	2359		0.00			0.0				
03/25	Kam/Van		0600	2359		0.00		F-BL	30.5		217.37	50.82	
03/26	Van/Agas		0600	2359	274	145.22		F-L	41.0		217.37	50.82	prkg @ hotel
03/27	Van/Surre	ey/Vic	0600	2000		0.00	5.60	F-	51.5	0			
TOTALS	OF COLU	MNS		l		36 . \$ 297.33	37. \$ 5.60		38 . \$ 205.	.00 \$	556.54	40. \$ 101.64	Claim Total \$ 1166.11
48.		49.	50.			51.	52.		45.			1	.,
	t Code	Resp		Service	Line	STOB		roject			plier C	ode	Amount
	120	0794	IA	520	000	5702	: C	700000		-	s.22		\$ 1166.11
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	avel Advan 120	ce				1	1						
	120	<u> </u>											54.
								AMOUN	T DUE T	O EMI	PLOYE	E	\$ 1166.11
45. Emp	loyee Sign	ature (Se	ee Audi	t Trail)			Print N	lame			Date	e Signed	
 Certifi 	ed this trave	el expens	e claim	is a true	stateme	ent of							
						m entitled a							
						d above and							
	ch I have no	t been an	nd will no	ot be rein	nbursed	l by any oth	er						
party.													
	nding Auth						Print	Name			Dat	te Signed	
	ed correct p				3 of the	Financial							
Adminis	stration Act	and relate	ed polici	es.									
57. Pavi	ment Autho	ority Sign	nature (See Aud	it Trail\		Print	Name			Dat	te Signed	
						he Financia		·······			Dat	.o orgined	
	stration Act.												

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

Did not leave Vancouver on Mar 27 until late in the day after the meetings



Where ideas work

Travel Voucher (Restricted Use)

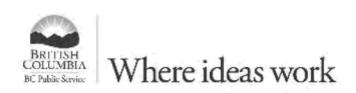
Control No.

E128488

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Client O	nne-Marie rganizatio ous Relatio		econci	liation		s.2 Jol	ployee ID 22 Title enior Minister	ial Assista	ant		(25	one Numb 50) 953-48 vel Group	44
5. Date 0 2018/03	ompleted	i	6. F	iscal Yea	r		Cheque Issu			Che		Informa	tion
Type of In Provin	Travel	ss for Ch	14. Rei	Reason fo	or Trave	l				eadq /ictor	uarters ia		
PO Box	9051 Stn	Prov Gov	Victor	ria, BC V8	W 9E2		19.	20. & 21			22.	20. & 21	
Travel Dates		Places Tr	avelle	d	Pe	ersonal nicle Use	Other Transport		leals		Lodging		cellaneous
2018 03/16 03/27	Destinat Vic/PG/I FSJ/Vic	FSJ	tart 1400 0600	End 2359 2359	Km 173 951	91.69 504.03	Costs 65.10 89.20	Claim F-BL	Cost 30.		Costs	Cost	Describe
						36.	37.		38.		39.	40.	Claim Total
48.	OF COLU	MNS 49.	15	0.		\$ 595.72	\$ 154.30 52 .		\$ 30. 45 .	50	\$ 0.00	\$ 0.00	0 \$ 780.52
	Code 20 20 20 20 20	Resp 0794		Servic 52	e Line 000	STOB 5226	Pro	oject 00000		Su	pplier Co s.22	ode	Amount \$ 780.52
Less Tra	vel Advar	nce	1			1	I	***************************************					
		1	L				Α	MOUNT	DUE TO	FME	OVEE		54. \$ 780.52
- Certifie disburse a result	of travel or	el expens de and/or n governn	e clain allowanent bu	n is a true ances to w usiness as	which I are detailed	nt of n entitled as d above and by any other	Print Nar					Signed	¥ 730.32
56. Spen - Certifie	ding Auth d correct p tration Act	oursuant t	o sect	ion 32 & 3	dit Trail 3 of the) Financial	Print Na	me			Date	Signed	
- Requis	nent Authorition for patration Act	yment pu	irsuant	to section	n 32 of th	ne Financial	Print Na					Signed	ority ADCS 1240, 20

Ministry Payment Authority ARCS 1050-06



Control No.

E128285

Freedom of Information and Protection of Privacy: The personal information you are providing is collected for the purposes of travel expense administration and under the authority of the Financial Administration Act. The collection, use and disclosure of personal information is in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions regarding this collection, please contact your Ministry's Director/Manager of Information and Privacy.

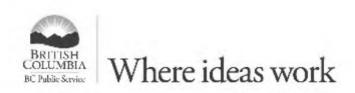
Name					Emplo	yee ID			_	hone Nu	mber		
Sali, Me					s.22_					.22			
	rganization				Job Ti					ravel Gro	up Code	•	
	ade and Technolo					erial Assistar				3			
5. Date C 2018/03	completed /08	6. Fis	scal Year		7. Specia	al Cheque Is	sue		8. Ch	eque Stu	b Inform	ation	1
Type of T			eason for	Trave	<u> </u>				Head	Iquarters			
In Provin			nd Ministe						Victo				
	ng Address for C												
Minister'	s Office Room 138	3, Parlian	nent Buildi	ngs Vic	toria, BC \	/8V 1X4							
16.	17.			18.		19.	20. & 21			22.	20. & 2	1.	
Travel	Places	Travelle	d	Pe	rsonal	Other	M	eals			М	iscell	aneous
Dates				Veh	icle Use	Transport				Lodging			
2018	Destination	Start	End	Km	Cost	Costs	Claim	Cost		Costs	Cost		Describe
03/01	Vic to Van(HA)	1700	2359		0.00			0	0.00	30.75			
03/02	Vancouver	0700	2359		0.00		F-	51	.50			İ	
03/04	Van to Vic (HA	0700	1600		0.00	207.00			0.00				
	*02/01/77 1 1	1											
	*03/01 Turbo bud	ks											
TOTALS	OF COLUMNS				36. \$ 0.00	37. \$ 207.00		38.	1.50	39. \$ 30.75	40 . \$ 0.	00	Claim Total \$ 289.25
8.		le c	`		1				1.50	\$ 30.75	\$ 0.	1	\$ 209.25
	49. Code Res	50	Service	Lina	51. STO	52.		45.	e	nnline Ca	4.	-	A
		ooo	080				roject 11111			pplier Co	ue		Amount \$ 289.25
	125	000	000	01	3/1	7 901 3	11111			s.22			φ 209.20
	125												
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	vel Advance											-	
	25	- 1			1	1							
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	loyee Signature (Print N	lame			Date	Signed		
	ed this travel exper												
	ements made and/												
	of travel on govern												
	h I have not been	and will n	ot be reim	bursed	by any oth	ner							
party.													
	ding Authority S					Print I	Name			Date	Signed		
	ed correct pursuan			3 of the	Financial								
Administ	tration Act and rela	ated polic	cies.										
	nent Authority Si					Print I	Name			Date	Signed		
	ition for payment	oursuant	to section	32 of the	ne Financia	al							
Administ	tration Act.												
J 10 (EEL	-F0012 v2 6 1\	Produc	ction *** C	onvriah	t © Govern	ment of Britis	h Columbi	2	M	inistry Sne	nding Au	thorit	ARCS 1240-

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

Audited by PL Mar 21-18



Control No.

E128332

Freedom of Information and Protection of Privacy: The personal information you are providing is collected for the purposes of travel expense administration and under the authority of the Financial Administration Act. The collection, use and disclosure of personal information is in accordance with the Freedom of Information and Protection of Privacy Act. If you have any questions regarding this collection, please contact your Ministry's Director/Manager of Information and Privacy.

Name						Emplo	yee ID Phone Number								
Sali, Me						s.22	3.22								
	ganization					Job T					Travel Gro	up Code	•		
	ade and Tech		_ =:				terial Assist			١	3				
	ompleted		6. FIS 2018	cal Year		7. Speci	al Cheque	Issue		8. C	heque Stu	b Inform	atior	1	
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In Provin				ing Minist		'		Headquarters Victoria							
	ng Address 1	for Chec		ing willing	CI .					VIC	toria				
	s Office Roor			ent Buildi	inas Via	toria BC	V8V 1X4								
16.	17.	100, 1	aman	ionic Banai	18.	toria, Bo	19.	20. & 21	1		22.	20. & 2	·1.		
Travel		ces Trav	velled	ı		rsonal	Other		Meals		 -			scellaneous	
Dates		000 114	•	•		cle Use	Transport					""		uncous	
2018	Destination	Sta	art	End	Km	Cost	Costs	Claim	Cost		Costs	Cost		Describe	
03/08	Vic- Van	15	500	2359		0.00		H-	2	5.75					
03/09	Van	07	700	2359	İ	0.00		F-	5	1.50	İ	15.00 و	22	Taxi	
03/11	Van- Vic	15	500	2359	İ	0.00		H-	2	5.75		16	3.70	Ferry 🗸	
												40			
TOTAL 0	05 001 1184					36.	37.		38.		39.	40. s.22		Claim Tota	
	OF COLUMN		le o			\$ 0.00	\$ 0.00			3.00	\$ 0.00	5.22	1	\$ 136.20	
8.	49		50			51.	52.	D14	45.	•	upplier Co				
	Code 25	Resp. 51000	.	Service 080		570		Project St				ae		Amount \$ 136.20	
	25	51000	'	000	101	370	'1	5111111			s.22			\$ 130.20	
	25														
	25														
	vel Advance										-				
	25	,	- 1			1	1		- 1						
											_		54.		
								AMOUN	T DUE	το ει	MPLOYEE		٥4.	\$ 136.20	
45. Empl	oyee Signat	ure (See	Audi	it Trail)			Print	Name				Signed		+	
- Certifie	ed this travel	expense	claim	is a true s	stateme	ent of					2410	0.900			
	ments made						as								
	of travel on g														
	n I have not b														
party.															
56. Spen	ding Author	ity Sign	ature	(See Aud	lit Trail)	Prin	t Name			Date	Signed			
	ed correct pur											-			
Administ	tration Act an	d related	d polic	ies.											
57. D		O'	4	0 41	4 T !!!			4 M				01			
	ent Authori						Print Name Date Signed								
	ition for payn tration Act.	nent purs	suant	to section	32 Of t	ne Financ	aı								
Auminis	u auon Act.						ment of Brit							ν ARCS 1240-	

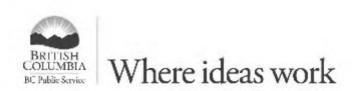
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Mar 16-18

Name



Travel Voucher (Restricted Use)

Employee ID

Control No.

E128472

Phone Number

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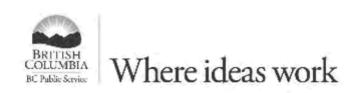
Cheever	rs, Michael			S.	22				s.2	2				
	Client Organization Job Title Travel Group Code													
Labour						ial Assistaı			3					
	Completed		6. Fisca	l Year			Cheque Iss	ue	8.	Cheque Stu	b Informatio	n		
2018/03			2018		_	EFT								
Type of				son for T	ravel					adquarters				
In Provin		- f Ch-	Meeting	js <u> </u>					VI	ctoria				
	ng Addres 9064 Stn F			DC 1/01//)E2									
16.	17.	10V GOVI	victoria,	DC VOVV	18.		19.	20. & 21		22.	. 20. & 21.			
Travel	17.	Places Ti	ravallad			rsonal	Other		eals	22.	20. & 21. Miscellaneous			
Dates		Places II	ravelled			icle Use		Transport				lianeous		
2018	Destinati	on	Start	End	Km	Cost	Costs	Claim	Cost	Lodging Costs	Cost	Describe		
03/01	Vic-Van		0800	2000	Kiii	0.00	16.70	Ciaiiii	0.0		Cost	Describe		
03/04	Van-Vic		1100	2000		0.00 72.50 F-D 33.25			-					
03/08	Vic-Van	(=)		72.50	1-5	0.0	- 1							
03/10	Van	(1 –11)	1300	1600		0.00	72.00	H-D	7.5		15.60	Taxi		
	03/11 Van-Vic (FER) 1730 210					0.00	16.70		0.0	- 1	10.00	Tuxi		
03/15	Vic-Van		0800	2100		0.00	16.70		0.0	-				
	03/16 Van 1100 15					0.00	10.70	F-BD	22.7	-	7.75	Skytrain		
	03/21 Van-Vic (FER) 100			1900		0.00	72.50	' 55	0.0	-	"""	Onytrain		
00,21		,				0.00	1 2.00		0.0	<u> </u>				
						36.	37.		38.	39.	40.	Claim Total		
	OF COLU	MNS				\$ 0.00	\$ 267.60		\$ 63.5	0.00 \$	\$ 23.35	\$ 354.45		
48.		49	50.			51.	52.		45.					
	t Code	Resp.		Service Li		STOB		oject		Supplier C	ode	Amount		
	127	51608	В	52080		5701	51	155555		s.22		\$ 354.45		
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	127 127													
	vel Advan	••												
	ivei Advan 127	ce	1			I	1		1					
\vdash	121										54	4.		
							4	TNUOMA	DUE TO	EMPLOYEE	1 -	\$ 354.45		
	loyee Sign						Print Na	me		Date	Signed			
	ed this trave													
	ements mad						-			1				
	of travel on													
	h I have no	t been and	d will not	be reimbu	rsed b	y any othe	r			1				
party.														
	nding Auth						Print Na	ame		Date	Signed			
	ed correct p				the Fi	nancial								
Adminis	tration Act	and relate	d policies	i.										
57 Dave	nent Autho	rity Ciam	atura (Ca	o Audit T	roil\		Print Name Date Signed							
	sition for pa					Financial								
	stration Act.	yment pui	Suarit to	3600011 32	or tile	i illalicial								
		1)	Droductio	n *** Con	vriah*	Covernme	ant of British	Columbia		Minietry Sno	nding Authori	ty ADCS 1240 20		
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Ministry Payment Authority ARCS 1050-06

*Missing receipt 03/01 claiming single fare comparable to 03/11 attached

Audited by PL Mar 27-18



Control No.

E128615

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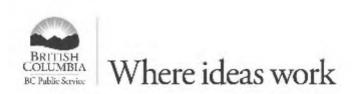
Name							ployee ID Phone Number							
	acqueline					s.22	-;,							
	rganization					Job Title	-				el Gro	up Code		
	ade and Te	echnology					rial Assistant			3				
5. Date 0 2018/04	Completed /20		6. Fisc 2018	al Year		7. Special	Cheque Iss	ue	8.	Chequ	ie Stul	b Informa	tion	ı
Type of	Travel		14. Re	ason for T	ravel				H	eadqua	ırters			
In Provi			Meetii	ngs				Victoria						
	ng Addres liament Bui			V8V 1X4										
16.	17.		,		18.		19.	20. & 21		22.		20. & 21		
Travel		Places T	ravelled		Р	ersonal	Other	M	eals			Miscellaneous		laneous
Dates					Vel	hicle Use	Transport			Loc	dging			
2018	Destinati		Start	End	Km	Cost	Costs	Claim	Cost	C	osts	Cost		Describe
03/01	Vic to Va	n (Ferry)	1628	2100		0.00	16.70	F-BL	30.5	50				
03/04	Van to V	ic (Ferry)		1730		0.00	54.08		0.0	00				
03/08	Vic to Va		1630	2100		0.00	16.70	F-BL	30.5			58.	40	Taxi
03/11	Van to V		1430	1650		0.00	54.08		0.00					
03/15	Vic to Va		1629	2100		0.00	16.70		0.0					
03/28	Van to ai	rport	0717	0900		0.00			0.0	00		37.	.00	Taxi
TOTALS	OF COLU	MNS				36. \$ 0.00	37. \$ 158.26		38. \$ 61.	39.	0.00	40. \$ 95.4	10	Claim Total \$ 314.66
48.		49.	50.			51.	52.		45.	00 ψ	0.00	ψ 90.5	i I	\$ 514.00
	t Code	49. Resp		Service L	ine	т втов		roject	43.	Supr	olier C	ode		Amount
	125	5195		08006		5701		5111111			22	ouc		\$ 314.66
	125							3111111					ı	+ • · · · · · · ·
·	125		İ						İ				İ	
·	125													
	vel Advan	ce				1	1							
	125												54	
							/	AMOUNT	DUE TO	EMPL	OYEE		"	\$ 314.66
45. Emp	loyee Sign	ature (Se	e Audit	Trail)			Print Na	ıme			Date	Signed		
	ed this trave				teme	nt of						-		
						m entitled as	·							
						above and								
	h I have no	t been an	d will no	t be reimbi	ursed	by any othe	er							
party.												<u> </u>		
	nding Auth						Print Na	ame			Date	Signed		
	ed correct partition Act				n the	гіпапсіаі	1							
Auminis	Sulation ACL	anu reiate	su policie	ю.										
57. Pavn	nent Autho	rity Sign	ature (S	ee Audit	Trail)		Print N	ame			Date	Signed		
						ne Financial				l		•		
Adminis	tration Act.													
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Ministry Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Jul 27-18



Control No.

E128437 A

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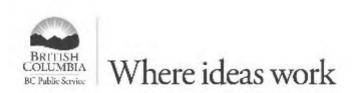
Name Gardea, I Client Org Municipal	ganization I Affairs and Housin	g			Emploved s.22 Job Title Ministeria	bb Title Travel Group Code Inisterial Assistant 4						
5. Date Co 2018/03/2		6. Fisc 2018	al Year		<mark>7. Special Ch</mark> EFT	eque Issue		8. Cheque	Stub Informa	ition		
Type of T In Province	ravel ce	14. Rea	ason for T			Headquarters Victoria						
12. Mailin	g Address for Che	que										
16. Travel Dates	17. Places T	ravelled	I		ersonal hicle Use	19. Other Transport	20. & 21. Meals	22. Lodgin		cellaneous		
2018 03/15 03/16 03/17 03/18	Vic - Van (Ferry) Van Van Van - Vic (Ferry)	0900 0800	End 2359 1500 2359 2100	Km 69	0.00 0.00	Costs √ 37.85 √ 31.40 s.22 72.50	22.75	Costs		Describe		
TOTALS	vation for Ferry on PC				36. \$ 73.14	37. 141.75 s.22	\$ 22.7		40. \$ 0.00	Claim Total		
06	Code 60 5105		Service Li 54000		51. 5 STOB 5701	Project 5100000		Supplic	er Code	A i \$ 237.64		
	vel Advance	i					ı					
	,						OUNT DUE	TO EMPLO		54. \$ 237.64 c. 22		
 Certified disburser a result of 	byee Signature (Se d this travel expense ments made and/or of travel on governm I have not been and	e claim is allowand ent busir	a true stat ces to which ness as def	h I am tailed a	entitled as above and	Print Name		D	ate Signed			
56. Spend - Certified	ding Authority Sigr d correct pursuant to ration Act and relate	section	32 & 33 of		nancial	Print Name	•		ate Signed			
- Requisi	ent Authority Signation for payment pur ration Act.				Financial	Print Name Date Signed						

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

Audited by PL Mar 22-18



Control No.

E128548

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	Daniela ganization al Affairs and Housir	ng			Employe s.22 Job Title Ministeria	Phone Number (778) 677-4304 Travel Group Code 4						
	ompleted	6. Fisca	l Year		. Special Cl	neque	e Issue		8. Ch	eque St	tub Informa	tion
Type of T In Provin	Travel	2018 14. Rea meeting	son for T gs		<u>EFT</u>				Head	quarter ria	's	
12. Mailir	ng Address for Ch											
16. Travel	17. Places	Travelled			ersonal	1 7	Other	20. & 21. Meals			20. & 21. Mise	cellaneous
Dates 2018 03/22 03/23	Destination Vic - Van (Ferry) Van	Start 2000 0830	End 2359 2359	Vehicle Use Km Cost 69 36.57 0.00			37.85 26.20	Cost 22.75	9	dging osts	Cost	Describe
03/28	Van	0830	2359		0.00	1	9.20		12.25			
TOTALS	OF COLUMNS				36. \$ 36.57	37.	5 73.25	38. \$ 35.	39	• \$ 0.00	40 . \$ 0.00	Claim Total \$ 144.82
8. Client 0 0 0	49. Code Resp 60 5109 60 60		Service L 54000	51. 52 Line STOB			Project 5100000		45.	upplier s.22		Amount \$ 144.82
	vel Advance									-		
	060						AMO	OUNT DUE	TO EM			54. \$ 144.82
 Certifie disburse a result of	oyee Signature (S d this travel expensements made and/or of travel on government I have not been ar	entitled as bove and	Prir	nt Name			Dat	te Signed				
56. Spending Authority Signature (See Audit Trail) - Certified correct pursuant to section 32 & 33 of the Financial Administration Act and related policies.							nt Name)		Da	ite Signed	
- Requis	77. 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 Spending Authority ARCS 1240-20 Ministry Payment Authority ARCS 1050-06

Audited by PL Apr 11-18

^{*}does not want to claim lodging



Control No.

E128419

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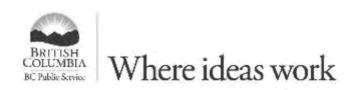
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Name						Emplo	oyee ID			Pho	ne Numb	er	
Ducker,	Jayne					s.22	_			(25	0) 387-149	99	
	ganization					Job T	itle			Trav	el Group	Code	
	evelopment and Po	vertv Re	duction			Minis	terial Assis	stant		3	•		
	ompleted		cal Year		7 Specia	I Cheque Is			8 Ch	enue Stu	b Informa	tion	
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Travel	Places T	ravelled			rsonal	Other				odging	Mis	cellaneo	ıs
Dates		Vehicle Use Transport									l		
2018	Destination _{VIC} \$		End	Km	Cost	Costs	Claim	Cost		Costs	Cost	Desc	ribe
03/19	Vancouver-VIC	0800	1530		0.00		H-B	s.2					
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					1 1							ı	
	*PCARD												
	FCARD												
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TOTALS	OF COLUMNS				\$ 0.00	\$ 0.00		36. ∃S.2		\$ 0.00	\$ 0.0		11 10ta 22
		50.				52.			_	φ 0.00	\$ 0.0	U 3	
8.	49.				51.			4	5.				
	Code Resp		Service		STOE		Project		5	upplier C	oae	Amo	
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	031				5701								
_)31												
0	31									_			
Less Tra	vel Advance												
0)31									_			
												54. \$	22.75
							AMOUNT	L DUE	TO EN	IPLOYEE		=	\$s.22
45. Empl	oyee Signature (S	ee Audi	t Trail)			Print N	lame			Date	Signed		-
	ed this travel expens			stateme	ent of						•		
	ments made and/or					as l							
a result	of travel on governr	nent bus	iness as	detaile	d above an	d							
	n I have not been a												
party.	T T TICK O TICK DOOT A	14 11111111	00 10111	ibai ooa	by any on								
	ding Authority Sig	inaturo /	(Saa Aud	lit Trail	١	Print I	Namo			Date	Signed		
	ed correct pursuant					- -	Tallie			Date	Jigned		
				o or the	rmancial								
Adminis	tration Act and relat	ed polici	es.										
F7 Do	ant Authority Clar		Coo Arrel	4 Troil		Dwinst I	Mama			Dete	Clanad		
	nent Authority Sig					Print I	vame			Date	Signed		
	ition for payment pu	ursuant t	o section	32 of t	ne Financia	ai							
Administ	tration Act.												
N 10 (EFI	-F0012 v2.6.1)	Product	tion *** C	opyriah	t © Governi	ment of Britis	h Columbia	a	Mi	nistry Spe	nding Auth	nority ARC	S 1240-

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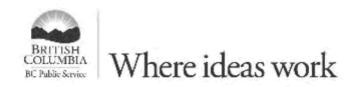
Name				E	mployee II	D		Ph	one Numb	er				
Infante,	James				.22	(778) 679-4931								
Client O	rganization			Jo	ob Title	Travel Group Code								
Tourism	, Arts and Culture			N	Ainisterial A	Assistant		3						
5. Date C	Completed	6. Fisca	l Year	7	'. Special (Cheque Issu	ıe	8. Ch	eque Stub	ue Stub Information				
2018/03		2018												
Type of			son for T						lquarters					
In Provir			rial Staffin	g				Mini	ster's Offic	е				
12. Maili s.22	na Address for Ch	eaue												
16.	17.			18.		19.	20. & 21		22.	20. & 21.				
Travel	Places	Fravelled		Pe	ersonal	Other				Misce	ellaneous			
Dates				Veh	icle Use	Transport			Lodging					
2018	Destination Start End Km Cost Costs Claim							Cost	Costs	Cost	Describe			
02/23	Victoria	0803	0812		0.00			0.00		11.50	Taxi			
02/23	Vancouver (HJ)		1030		0.00			0.00		31.00	Taxi			
	nVictoria (Ferr		2100		0.00		F-BL	30.50		54.08	Ferry			
	c-Vancouver HA	1700	1735		0.00	207.00		0.00						
03/02	vancouver	1700	2130		0.00			0.00		78.00	Taxi x2			
03/04 v a	n-Victoria (Ferry	1530	2100		0.00		F-BL	30.50		54.08	Ferry			
	*HJ PCARD													
					36.	37.		38.	39.	40.	Claim Total			
	OF COLUMNS	1			\$ 0.00	\$ 207.00		\$ 61.00	\$ 0.00	\$ 228.66	\$ 496.66			
48.	49.	50.			51.	52.		45.		.				
	Code Resp		Service Li		STOB				Supplier Co		Amount			
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	,					1	MOUNT	DUE TO EN	- ADLOVEE	54	\$ 496.66			
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	ed correct pursuant				nancial					-				
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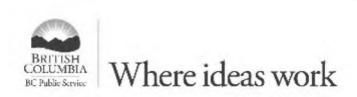
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collection	, please co	ntact yo	ur Minist	ry's Direct	or/Man	ager of Info	ormation and	Privacy.				'			
Name							nployee ID Phone Number								
Infante,						s.22 Job Title					78) 679-4 avel Grou				
	ganizatior Arts and 0				,		Assistant			3	ivei Grou	ip Code			
	ompleted	Juiture	6 Fise	cal Year			I Cheque Iss	116			eaue Sti	ue Stub Information			
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In Provin			Minis	terial Staf	fing			Minister's Office							
12. Mailir s.22	na Addres	s for Ch	eaue												
16.	17.				18.		19.	20. & 21		:	22.	20. & 21.			
Travel	1	Places 1	ravelled			rsonal	Other					Mise	cellaneous		
Dates						icle Use	Transport				Lodging	l			
2018	Destinati		Start	End	Km	Cost	Costs	Costs Claim Cos			Costs	Cost	Describe		
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00/20	1 44110041	.	0.00			"				70 1000					
		l													
TOTALS	OF COLU	MNS				36. \$ 0.00	37. \$ 0.00		38.	0.00	39. \$ 0.00	40. \$ 41.30	Claim Total \$ 41.30		
48.		49.	50.			51 .	\$ 0.00 52 .			5.	φ 0.00	φ 41.30	941.30		
	Code	۹۶. Res		Service	Line	STOB		roject	ľ		upplier (Code	Amount		
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1	26														
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	vel Advan	ce				1	1		1						
1	26												54.		
								AMOUNT	DUF	TO F	/PLOYF	-	\$ 41.30		
45. Empl	oyee Sign	ature (S	ee Audi	t Trail)			Print Na					Signed	ψ 11.00		
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disburse	ments mad	de and/o	r allowar	ces to wh	ich I ar	n entitled a	ıs								
	of travel on														
	n I have no	t been a	nd will no	ot be reim	bursed	by any oth	er								
party.	alles es A c 41c	!t C'		O A	4 T''		Dula 1 N					. 01			
	ding Auth						Print N	ame			Date	e Signed			
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Name Perry, A Client O				ny 3 Dilec	ЮТИНА	E s Je	mplovee ID .22 ob Title Ministerial As			Phone Number (250) 387-1978 Travel Group Code 3			
	ompleted		6. Fis	cal Year		7. Speci	al Cheque I	ssue		8. Ch	eque Stu	b Informat	tion
Type of In Provir	Travel	s for Che	14. R	eason for sterial	Trave	 		Headquarters Victoria					
16. Travel	17.	laces Tr				sonal	19. Other	20. & 21 M	eals	22. Lodging		20. & 21. Mis	cellaneous
2018 03/15 03/16	Destination Start End Vic - Van (AC) 1800 2200				Km	Cost 0.00 0.00	Transport Costs √ 78.80 9.30	Claim F-BL F-LD	30. 22.	50	Costs 169.88	Cost	Describe
TOTALS	OF COLUI	MNS				36. \$ 0.00	37. \$ 88.10		38 . \$ 53	.25). \$ 169.88	40. \$ 0.00	Claim Total 3 \$ 311.23
(t Code)34)34)34)34	49. Resp 5500		Service 604		51. STO 570	- 1	Project 5500102	4	15. S	upplier C s.22	ode	Amount \$ 311.23
	vel Advan	ce									_		
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Adminis 57. Payn	tration Act	rity Sign	ed polic	ies. See Audi	t Trail)			Name			Date	Signed	
	sition for pay tration Act.	yment pu	rsuant	to section	32 of th	ne Financ	ial						

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