

Where ideas work

Business Expense Approval

Control No.

Freedom of Information and Protection of Privacy Act: The personal information you are providing is collected for the purposes of business expense administration and under the authority of the Financial Administration Act, and 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.

Director/Manager of Informa	tion and Privacy.					
Name	В	ranch			Phone Number	
MacFarlane, Jo-Ann	H	lealthlines Ser	rvices BC	(250) 952-6462		
Client Organization	Di	Division				
Health Services	É	lealth Services	Commission	Administrative As	sistant	
EVENT					4	
Location (City)	Description			Start Date	End Date	
Langford	CHARD Dine & Le	arn		2012/01/12	2012/01/12	2
PARTICIPANTS						
		Number of			*	Number of
Organization		People	Organization	r		People
HealthLink BC		2	General Prac	ctitioners & MOA's		30
INDIVIDUALS INCLUDED II		. 35311 2	•			
Name	Organization		Name		Organization	
BUSINESS EXPENSE REQ	UESTED	STOB	Amount	Responsibility	Service Line Proje	ct Supplier
Meeting Room Rental	to a	6531	320.00	66289	44616	-0 Patence
2. Equipment/Furniture Ren		6531				
Photocopying, Faxing, Te	lephone, etc.	6531				
 Food/Beverages for Meet 		6531	900.00			
Breakfast L	unch 🕢 Dinner			Mail to:		
Snacks C	offee/Tea/Juice, etc.		A		*	
5. Business Meals in Restau	irant					
Breakfast	Lunch Dinner					
Event Planners, Speakers		6531				
Travel Costs for Non-BC	Sovernment Participants	6531				ì
Estimated Total			\$1220.00	Reimbursement	Total	\$
SIGNATURES Refer to Tre	easury Board directives for	approval auth		udit Trail)		
Employee			Print Na		Date Signed	
Supervisor/Designated Author	ority		Print Na	me	Date Signed	
					23.50	
Signing Authority			Print Na	ime	Date Signed	
FIN 215 (EFI-F0013 v1.3.1)	Production **	** Copyright ©	Government of	British Columbia	ARCS	ORCS 1155-02

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Declo

WESTCOAST TAP
829 McCallum Road
Victoria, B.C.
V9B 6W6
250-474-4490
PLEASE LEAVE SIGNED COPY WITH SERVER

MASTER XXXXXXXXXXXXXX s.1 M
AUTH 181752 HEALTH CHECK 173927
PRE-AUTH 3.CATERING MNGR LEIGH

SUBTOTAL \$ 300.00

MANUAL ENTRY OF CREDIT CARD NUMBER REQUIRES A SEPARATE TMORINT WITH

TOTAL

ouse/ Four Points By Sheraton Restaurant

BC V9B6W6 250-391-5063 catering@fourpointsvictoriagateway.com

HEALTH LINK - CHARD

JO-ANN MACFARLANE THURSDAY, JANUARY 12,2012

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			71,100.00			

WESTCOAST TAP
829 McCallum Road
Victoria, B.C.
V9B 6W6
250-474-4490
PLEASE LEAVE SIGNED COPY WITH SERVER

ASTER XXXXXXXXXXXXX 1 M
TH 143000 HEALTH CHECK 174648
E-AUTH 3.CATERING MNGR LEIGH

OUNT 300.00 SUBTOTAL \$ 300.00

TIP \$....

TOTAL \$.....

CUSTOMER COPY

use/ Four Points By Sheraton Restaurant

: V986W6 250-391-5063 catering@fourpointsvictoriagateway.com

HEALTH LINK - CHARD

JO-ANN MACFARLANE THURSDAY, JANUARY 12,2012

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************* louse/ Four Points By Sheraton Restaurant NTE 1/16/12 TIME 2:12:12PM BC V9B6W6 250-391-5063 catering@fourpointsvictoriagateway.com :D 45584152318=WESTCO WESTCOAST TAP **HEALTH LINK - CHARD** 829 McCallum Road JO-ANN MACFARLANE Victoria, B.C. **V9B 6W6 CHRISTINA EDGAR** THURSDAY, JANUARY 12,2013 250-474-4490 PLEASE LEAVE SIGNED COPY WITH SERVER Quantity: Charge: Total: \$300.00 DISCOUNTED 300.00 1ASTER XXXXXXXXXXXXXXXXXXXXXXX \$20.00 20.00 CHECK UTH 172011 HEALTH 179049 0.00 MNGR LEIGH RE-AUTH 3.CATERING 644.00 \$28.00 23 \$644.00 472.19 \$0.00 TAUOM. \$0.00 115.68 XA \$0.00 \$0.00 \$644.00 587.87 SUBTOTAL \$ TOTAL \$..... CUSTOMER COPY ************ \$964.00