

FIN 99/WEB Rev. 2008/10/08

TRAVEL AUTHORIZATION

BRITISH COLUMBIA	This form musi It may, at the discretio		r all out-of-province est be used for in-				
The Best Place on Earth					•	ESTIMATED COS	STS (IN CAN. \$)
MINISTRY/ENTITY/CORPORATE	Out-of-Proving	ce 🔼	Out-of-Canada	In-Pro	VOTE	Transportation	5,965
	•				1012	Meals	2,397
Jobs, Economic Devel	lopment and Innovation					Lodging	3,768
EMPLOYEE NAME					EMPLOYEE ID.		
Fazil Mihlar						Overtime	
POSITION				BARGAINING	G UNIT/GROUP NO.	Fees	
Deputy Minister				Group 3		Other taxi, etc	2. 1,050
BRANCH / LOCATION / REGION				ı			-
TBC							
DATE DEPARTING YYYY/MM/DD	DATE RETURNING YYYY / MM / DD	NO. OF WORK	DAYS AWAY	ESTIMATED	OVERTIME CLAIM		
2023/05/23	2023/06/03		9		HOURS		
IDENTITY OF ORGANIZATION (OF	HER THAN PROV. OF B.C.) PAYING ANY OF T	HE COSTS		·			
N/A, OR:						SUB TOTAL	13,180
DESTINATIONS						Less Costs paid by others	
Japan, South Korea, V	/ietnam					TOTAL COSTS	13,180
METHOD OF TRAVEL			1			TOTAL COSTS	
Air			Refer to	CPPM 10.3	SIGNATURES 4 Policy 1 and 10.4.4	for approval aut	horities.
			<u> </u>		EASE SIGN ONE BO		·
PURPOSE OF TRAVEL Give details of event to be atte	ended, project name / number, program i	nvolved,	DIRECTOR APPRO	VED	NOT APPROV	ED [DATE SIGNED
benefits to Ministry, etc.	nio Deninal # 5143074 Can					Y	YYY/MM/DD
program and rationale.	sia. Project # 5143074. See a	attacheu					
,			ASSISTANT DEPUT	MINISTER			
			APPRO	VED	NOT APPROV		ATE SIGNED
	The Control of the Co						
			DEPUTY MINISTER APPRO				175 310 175
			АРРИО	AEO.	NOT APPROV		OATE SIGNED YYY/MM/DD
			-				
			MIŅISTER		•		·-···
EMPLOYEE'S SIGNATURE		SIGNED / MM / DD	My Costs	VED NOT APPROV			ATE SIGNED YYY / MM / DD
	1						

Originator completes and forwards a copy to immediate supervisor for approval(s). If travel is approved, the supervisor retains a copy and returns the original to the originator. The originator attaches the original and a copy to their travel voucher.

Instructions for the Travel Authorization Form (FIN 099)

Every employee requesting approval for out-of-province and out-of-Canada travel will complete form TB/FIN 99 in full.

Purpose of Travel - include a clear statement of the reason for the proposed travel.

Estimated Costs (in Can. \$) – provide an approximate calculation of the total costs to be incurred.

Approval Authorities – required by CPPM 10.3.4 policy 1 (per TB Directive 4/04):

- · approvals for staff are made by their respective director;
- approvals for directors and executive directors are made by the assistant deputy minister
 of the program area;
- approvals for assistant deputy ministers are made by the executive financial officer for the ministry;
- for approval requirements for ministers, parliamentary secretaries, deputy ministers and ministers' office staff, refer to CPPM 10.4.4.

Where approval is obtained, the immediate program area retains copy 3 (pink) and copies 1 (white) and 2 (canary) are returned to the originator.

Request for Expense Reimbursement

The employee requesting reimbursement for out-of-province or out-of-Canada travel will attach copies 1 and 2 of the approved TB/FIN 99 to their travel claim.



TRAVEL AUTHORIZATION

BRITISH COLUMBIA	This form must be It may, at the discretion or	used for all out-of-prof f ministries, be used fo				
The Best Place on Earth	Out-of-Province	X Out-of-Canad	_	ovince	ESTIMATED COS	ts (in can. \$) 11,596
MINISTRY/ENTITY/CORPORATE NAME				VOTE	Transportation	2,397
Ministry of Jobs, Economic	Development and Innovati	on			Meals	3,768
EMPLOYEE NAME	<u> </u>			EMPLOYEE ID.	Lodging	3,700
Brenda Bailey				ļ	Overtima	
POSITION			BARGAWIN	IG UNIT/GROUP NO.	Fees	, , , , , , , , , , , , , , , , , , , ,
Minister			Group 4	5 .	Other taxi, etc	1,050
·	<u>,</u>		Gloup		<u></u>	<u> </u>
BRANCH / LOCATION / REGION						· · · · · · · · · · · · · · · · · · ·
TBC					<u> </u>	
DATE DEPARTING YYYY / MM / DD	DATE RETURNING NO. YYYY/MM/0D	OF WORKDAYS AWAY	ESTIMATED	O OVERTIME CLAIM		
2023/05/23	2023/06/03	9		HOURS		
IDENTITY OF ORGANIZATION (OTHER T	HAN PROV. OF B.C.) PAYING ANY OF THE	ÇOSTS				
N/A, OR:					SUB TOTAL	18,811
DESTINATIONS				·· -	Less Costs paid by others	
Japan, South Korea, Vietn	nam				TOTAL COSTS	18,811
METHOD OF TRAVEL		<u> </u>		SIGNATURES	<u></u>	
Air		Ref		3.4 Policy 1 and 10.4.	4 for approval aut	horities.
PURPOSE OF TRAVEL		DIRECTOR		LEASE SIGN ONE BC	X ONLY	<u></u>
Give details of event to be attended benefits to Ministry, etc.	l, project name / number, program invo	lved, Al	PROVED	NOT AFFRO		DATE SIGNED YYY/MM/DD
Minister's mission to Asia. program and rationale.	Project # 5143074. See att	acned				
program and reconding		ASSISTANT DE	PUTY MINISTER			
		Al	PROVED	NOT APPRO		DATE SKINED YYY/MM/DD
					1	
		DEPUTY MINIS	TEO			
			PROVED	NOT APPRO		DATE SIGNED
		MINISTER	<u>.</u>			·····
EMPLOYEE'S SIGNATURE	DATE SIG	NEO AI	PROVED	NOT APPRO		DATE SIGNED
purpain	2023/	04/24				* 1-1 / MAN / DD
Or FIN 99/WEB Rev. 2008/10/08 rei	riginator completes and forwards a co turns the original to the originator. The	py to immediate supervi e originator attaches the	sor for approval(original and a co	s), If travel is approved opy to their travel vouch	, the supervisor reta er.	ains a copy and

APPROVED	NOT APPROVED	DATE SIGNED YYYY/MM/DD
		2023/04/23



TRAVEL AUTHORIZATION

			ESTIMATED CO	STS (IN CAN. S)
Out-or-Canada	(n-Pro	vince	Transportation	11,596
			Meals	2,397
			Lodging	3,768
		EMPLOYEE ID.		
	BARGAINING	UNIT/GROUP NO.		c. 1,050
	Group 4		Otner Laxi, O.	
YAWA ZYA	ESTIMATED	OVERTIME CLAIM		
9		HCURS	***	
			- ·	
			SUB TOTAL	18,811
			Less Costs paid by others	
			1	18,811
<u> </u>		SIGNATURES		
Refer to	CPPM 10.3	.4 Policy 1 and 10.4	.4 for approval at	ıthorities.
2,050705	PL	EASE SIGN ONE BO	X ONLY	
	VED	NOT APPRO		DATE SIGNED YYYY / MM / DD
				T F F T T WIN / DO
		E .		
ASSISTANT DEPUT	Y MINISTER			
APPRO	VED	NOT APPRO		DATE SIGNED
DEPUTY MINISTER			'	
APPRO	VED	NOT APPRO		DATE SIGNED YYYY / MM / DD
			1	
MINISTER		107 4000	WED.	DATE SIGNED
APPRO	OSEO	NOTAPPHIL		YYYY/MM/DD
			1	
i i				
	DAYS AWAY 9 Refer to DIRECTOR APPRO ASSISTANT DEPUT APPRO DEPUTY MINISTER APPRO	BARGAINING Group 4 Days away ESTIMATED 9 Refer to CPPM 10.3 PL DIRECTOR APPROVED DEPUTY MINISTER APPROVED	BARGAINING UNIT / GROUP NO. Group 4 DAYS AWAY SIGNATURES Refer to CPPM 10.3.4 Policy 1 and 10.4 PLEASE SIGN ONE BO DIRECTOR APPROVED ASSISTANT DEPUTY MINISTER APPROVED DEPUTY MINISTER APPROVED NOT APPRO DEPUTY MINISTER APPROVED NOT APPRO MINISTER	Subsection in-province travel requests. Out-of-Canada In-Province VOTE VOTE BARGAINING UNIT / GROUP NO. Group 4 DAYS AWAY SUB TOTAL Less Costs paid by others TOTAL COSTS Refer to CPPM 10.3.4 Policy 1 and 10.4.4 for approval at PLEASE SIGN ONE BOX ONLY DIRECTOR APPROVED ASSISTANT DEPUTY MINISTER APPROVED DEPUTY MINISTER APPROVED NOT APPROVED MINISTER APPROVED NOT APPROVED MINISTER APPROVED NOT APPROVED MINISTER APPROVED NOT APPROVED

	Reset Form	
PREMIER		
APPROVED	NOT APPROVED	DATE SIGNED YYYY/MM/DD
		2023/04/24
	•	



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BRITISH	This form m It may, at the discre		r all out-of-province				
COLUMBIA The Best Place on Earth						ESTIMATED CO	STS (IN CAN. \$)
	☐ Out-of-Prov	vince X	Out-of-Canada	∐ In-Pro		Transportation	5,965
MINISTRY / ENTITY / CORPORATE NA					VOTE	Meals	2,204
Jobs, Economic Develop	ment and Innovation					Ladeina	3,768
EMPLOYEE NAME					EMPLOYEE ID.	Lodging	
Will Hoyle					s.22	Overtime	
POSITION				BARGAINING	UNIT / GROUP NO.	Fees	
Executive Director, Inter	e	Group 2		_{Other} taxi, et	c. 1,050		
BRANCH / LOCATION / REGION						1	
International Trade and	Investment Operations						
DATE DEPARTING YYYY / MM / DD	DATE RETURNING YYYY / MM / DD	NO. OF WORK	DAYS AWAY	ESTIMATED (OVERTIME CLAIM		
2023/05/23	2023/06/03		9		HOURS		
IDENTITY OF ORGANIZATION (OTHE	R THAN PROV. OF B.C.) PAYING ANY C	OF THE COSTS					
N/A, OR:						SUB TOTAL	12,987
DESTINATIONS						Less Costs paid by others	
Vietnam, Japan, South F	Korea					TOTAL COSTS	12,987
METHOD OF TRAVEL					SIGNATURES		
Air			Refer to		.4 Policy 1 and 10.4.4 EASE SIGN ONE BO		thorities.
PURPOSE OF TRAVEL			DIRECTOR				
Give details of event to be attend benefits to Ministry, etc.	led, project name / number, progra	ım involved,	APPRO	VED	NOT APPROV		DATE SIGNED YYYY / MM / DD
Minister's mission to Vie attached program for rat	•	ea. See	see eApp	rovals			
			ASSISTANT DEPUTY	MINISTER			
			APPRO	VED	NOT APPROV		DATE SIGNED YYYY / MM / DD
			see eApp	orovals			
			DEPUTY MINISTER				
			APPRO	29 è	NOT APPROV		DATE SIGNED YYYY / MM / DD
			MINISTER				
EMPLOYEE'S SIGNATURE		ATE SIGNED 'YY / MM / DD	APPRO	VED	NOT APPROV		DATE SIGNED YYYY / MM / DD

Originator completes and forwards a copy to immediate supervisor for approval(s). If travel is approved, the supervisor retains a copy and returns the original to the originator. The originator attaches the original and a copy to their travel voucher.

Instructions for the *Travel Authorization* Form (FIN 099)

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Purpose of Travel – include a clear statement of the reason for the proposed travel.

Estimated Costs (in Can. \$) – provide an approximate calculation of the total costs to be incurred.

Approval Authorities – required by CPPM 10.3.4 policy 1 (per TB Directive 4/04):

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BRITISH	This form m It may, at the discre		all out-of-province				
COLUMBIA The Best Place on Earth			•		•	ESTIMATED COS	
	Out-of-Prov	rince 🔼	Out-of-Canada	In-Pro		Transportation	4,674
MINISTRY / ENTITY / CORPORATE NA					VOTE	Meals	2,204
Jobs, Economic Develop	oment and Innovation					Lodging	3,768
EMPLOYEE NAME					EMPLOYEE ID.		
Will Hoyle					s.22	Overtime	
POSITION				BARGAINING	UNIT / GROUP NO.	Fees	
Executive Director, Inter	national Trade and Inves	tment Office	•	Group 2		Other taxi, etc	1,050
BRANCH / LOCATION / REGION							_
International Trade and	Investment Operations						
DATE DEPARTING YYYY / MM / DD	DATE RETURNING YYYY / MM / DD	NO. OF WORKE	DAYS AWAY	ESTIMATED (OVERTIME CLAIM		
2023/04/11	2023/04/22		9		HOURS		
IDENTITY OF ORGANIZATION (OTHE	 R THAN PROV. OF B.C.) PAYING ANY C	F THE COSTS					_
N/A, OR:						SUB TOTAL	11,696
DESTINATIONS						Less Costs paid by others	
Vietnam, Japan, South k	Korea					TOTAL COSTS	11,696
METHOD OF TRAVEL					SIGNATURES	•	
Air			Refer to		4 Policy 1 and 10.4.4 EASE SIGN ONE BO		horities.
PURPOSE OF TRAVEL			DIRECTOR				
Give details of event to be attend benefits to Ministry, etc.	led, project name / number, progra	m involved,	APPRO	/ED	NOT APPROV		DATE SIGNED YYY / MM / DD
Advance for the Premier 5143074.	's mission to Asia. Projec	ct#	See eApp	rovals			
			ASSISTANT DEPUTY	MINISTER		I	
			APPRO	VED	NOT APPROV		DATE SIGNED YYY / MM / DD
			See eApp	rovals			
			DEPUTY MINISTER				
			APPRO	29 je	NOT APPROV		DATE SIGNED YYY / MM / DD
			MINISTER				
EMPLOYEE'S SIGNATURE		ATE SIGNED YY / MM / DD	APPROV	/ED	NOT APPROV		DATE SIGNED YYY / MM / DD
			1				

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