

	C <u>olumbi</u> a	P	AYIVIENI	KE	QUES I					
	form to requisition PM Chapter D for a						1. MINISTRY AND	GROUP NO.		
2. CLIENT	3. MINISTRY AND ORI		01101		4. TITLE OF ACCOUNT	- ENTER ONLY IF NO	T A NUMBERED VO	TE DOCUME	NT CONT	ROL NO.
034	MOTI - TRANS	IT BRANCH						30nd	v20	bct
5. DATE REC	. ISSUED	6. DATE INVOICE RE	CEIVED OR RVICES RECEIVED 7.	FISCAL	8. SPE	CIAL ISSUE INSTRUCT LEAVE BLANK.	IONS – ENTER D (R	ETURN CHEQUE TO	MINISTRY)
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20	20/11/12	2020/1	1/30	21						
9. ORDER IN	COUNCIL NO., SPECIAL	L TIMING REQUIREME	ENTS, COMMENTS (C	PTIONAL)	10. CODE – CHEQUE ST	UB PRINTOUT - MAXIN	1UM 10 SINGLE-SPAC	ED LINES, 38 CHARA	CTER LINE	ES
Payment	needs to be rec	eived by BC Tr	ansit by Nov 3	30	00					
BC TRA 520 GOI PO BOX	RGE ROAD EAS (9861 STN PRO	40 CHARACTERS PER			NOVEMBER 21 CONTRIBUTIO					
12A. PAYEE S.17	SUPPLIER CODE	12B. LOC. CODE	11B. POSTAL CO V8W9							
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04 CEPTIEIE	D CODDECT SIGNATUR						ELEPHONE NO.			
	ED CORRECT SIGNATUR	APPROVE					778) 698	5/21		
	inna Laird	loo EVD	at 3:37 pm, Nov 1		IIRE	(110 1090	-5451		
	MENT AGENT STAMP OR CHEQUE NO. AND CHEQU	UE DATE CERTIFIEI IS IN ACCOTHER AL AND, WHE PERFORM	O THAT THE AMOUNT TO ORDANCE WITH APPRO JTHORITY FOR PAYMENT IRE APPLICABLE, THAT I IED, THE GOODS SUPPLI D AND/OR OTHER COND	BE PAID IS CO PRIATE STAT T AND/OR CO THE WORK HA IED, THE SER	DRRECT, PRINT NAM FUTE OR NTRACT: AS BEEN A DATAS MA		SIGNA	TURE A.Mm	٠.	
								*Please enter act	ual dollar	amount.
FIN 188 Rev.	2013/01/24	ORIG	INAL: MINISTRY FINA	ANCIAL SER	VICES BRANCH	COPY: ORIG	INATING OFFICE	Clea	r Form	



	form to requisition			_				1. MINIST	RY AND GE	ROUP NO.		
See CPF CLIENT	PM Chapter D for a			S.		4. TITLE OF ACCOUNT	- ENTER ONLY	IF NOT A NUMBE	RED VOTE	DOCUME	NT CONT	BOL NO
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9. ORDER IN	COUNCIL NO., SPECIA	L TIMING RE	QUIREMENT	S, COMMENTS	S (OPTIONAL)	10. CODE - CHEQUE ST	UB PRINTOUT -	MAXIMUM 10 SING	LE-SPACE	D LINES, 38 CHARAC	CTER LINE	ES
Payment	needs to be rec	eived by	BC Tran	sit by De	c 31	DECEMBER 2	020 OPER	ATING GRA	NT PA	YMENT		
11A. PAYEE	NAME AND ADDRESS -		5 SINGLE-SPA STERS PER LIN			CONTRIBUTIO						
	RGE ROAD EAS (9861 STN PRO		Т									
				11B. POSTAL								
12A. PAYEE	SUPPLIER CODE	12B. COD	LOC.									
13. CLIENT	14. RESP CENTRE	15. SERV	ICE LINE	16. STOB	17. PRC	JECT	18. DISTRIBUT	TION SUPPLIER C	ODE	19. AMOUNT OF INCLUDING TA	CHEQUE AXES	20. GST. HST AMOUNT
034	55030	64	550	8051		5503007				9,574,677		AMIOUNT
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21 CERTIFIE	ED CORRECT SIGNATUR	RF.		Α.	DDDOVE	D.		TELEPHONE	NO.		1	
ZI. OLIVIII IL	ED CONNECT SIGNATOR		a Laird	B		at 3:58 pm, Dec 16,	2020) 974-5	5269		
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				APPLICABLE, TH THE GOODS SUR ND/OR OTHER CO		AS BEEN Andrea Me	ercer			ROVED rea Mercer at 2:2	27 pm, De	ec 18, 2
									,	*Please enter actu	ual dollar	amount
FINADO Por	. 2013/01/24		ORIGINA	L: MINISTRY F	FINANCIAL SER	VICES BRANCH	COPY	ORIGINATING OF	FICE	Clea	r Form	



	COLUMBIA form to requisition		ayment.			QUEST		1. MINISTE	RY AND GROU	P NO.		
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2. CLIENT	3. MINISTRY AND ORI					4. TITLE OF ACCOUNT	NI - ENTER ONLY IF	NOT A NUMBE	HED VOTE	31jar		
5. DATE REQ	. ISSUED	6. DATE IN		EIVED <i>OR</i> CES RECEIVED	7. FISCAL YEAR	8. SF	PECIAL ISSUE INSTRU	ICTIONS - ENT	ER D (RETURN	V CHEQUE TO I	MINISTRY)
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	needs to be rec					10. CODE – CHEQUE	STUB PRINTOUT – <i>MA</i>	XIMUM 10 SINGI	LE-SPACED LIN	ES, 38 CHARAC	TER LINE	ES .
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1A. PAYEE N	NAME AND ADDRESS -	MAXIMUM 5 40 CHARACT				CONTRIBUTI	ON AGREEM	INT CAT	0040101			
	RGE ROAD EAS 9861 STN PRO		-									
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034	55030	645	550	8051		5503007				9,574,677		AMIOO
13A.				16A.	17A.		ENTER MULTI DIS	TRIBUTION CO	ODING FOI 'CR 194	R CREDIT ITEMS R' AT RIGHT OR I A.	S SHOW BRACKET I I I	20A.
21. CERTIFIE	D CORRECT SIGNATUR	l RE			ADI	PROVED		TELEPHONE	NO.			
		Corinna			ВуС	CALAIRD at 2:40 pm	n, Jan 15, 2021	(778) 698-543	31		
	MENT AGENT STAMP OR CHEQUE NO. AND CHEQ		CERTIFIED T	HAT THE AMOUNT	TO BE PAID IS CO	ORRECT. PRINT NA	ME		SIGNATURE			
			OTHER AUTH AND, WHERE PERFORMED	RDANCE WITH APP HORITY FOR PAYMI E APPLICABLE, THA D, THE GOODS SUP AND/OR OTHER CO	ENT AND/OR CO AT THE WORK H PLIED, THE SER	NTRACT: AS BEEN Androa M	lercer		APPRO By Andrea	VED a Mercer at 12:	45 pm, F	eb 01,
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	2013/01/24		ORIGIN	AL : MINISTRY F	INANCIAL SER	VICES BRANCH	COPY: OF	RIGINATING OF	FICE	Clear	Form	

Page 3 of 13 TRA-2021-15361



	COLUMBIA			~ 1 IVI L I V		GOLOI					
	form to requisition PM Chapter D for a			ins.				1. MINISTRY AND	GROUP NO.		
2. CLIENT	3. MINISTRY AND OR			110.		4. TITLE OF ACCOUNT	- ENTER ONLY IF	NOT A NUMBERED V	DOCUME	NT CONT	ROL NO.
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	COUNCIL NO., SPECIA				(OPTIONAL)	10. CODE – CHEQUE S	TUB PRINTOUT – MA	XIMUM 10 SINGLE-SPA	CED LINES, 38 CHARA	CTER LIN	ES
Payment	needs to be rec	eived by	BC Tra	ansit by Feb	oruary 28	00					
•		,		,		FEBRUARY 20	N21 ODERAT	ING GRANT P	AVMENT		
444 DAVEE	MANE AND ADDRESS	**********	01110150	D4.05D / W50		CONTRIBUTION					
11A. PAYEE	NAME AND ADDRESS -	MAXIMUM 5 40 CHARACT									
BC TRA	NSIT										
	Pinkerton - Pre		nd CEC)							
	RGE ROAD EAS (9861 STN PRO		-								
VICTOR		JV 00V1									
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034	55030	645	550	8051		5503007			9,574,677		AMOUNT
							ENTER MULTI DIS	STRIBUTION CODING	FOR CREDIT ITEM		
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21. CERTIFIE	 ED CORRECT <u>SIGNATUR</u>] RE			DEVI	EWED		TELEPHONE NO.		<u>i</u>	
		Corinna			By CA	LAIRD at 2:57 pm,	Feb 12, 2021	(778) 698	3-5431		
	MENT AGENT STAMP OR CHEQUE NO. AND CHEQ			NSE AUTHOR THAT THE AMOUNT			IE	SIGN	ATURE		
			IS IN ACCO	RDANCE WITH APP THORITY FOR PAYM	PROPRIATE STATE ST	TUTE OR NTRACT:			PROVED		
			PERFORME	RE APPLICABLE, TH. D, THE GOODS SUP AND/OR OTHER CO	PPLIED, THE SER	vice Andrea Me	ercer		Andrea Mercer at 3:27	pm, Feb	12, 2021
		ļ							*Please enter act	ual dollar	amount
			ORIGI	NAL: MINISTRY F	INANCIAL SER	VICES BRANCH	COPY: O	RIGINATING OFFICE	Clea	r Form	
FIN 188 Rev.	2013/01/24)		

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FIN 188 Rev. 2013/01/24

PAYMENT REQUEST

	COLUMBIA				–							
	form to requisition a PM Chapter D for a			s.				1. MINISTR	Y AND GRO	OUP NO.		
2. CLIENT	3. MINISTRY AND ORIG					4. TITLE OF ACCOUNT	- ENTER ONLY IF	NOT A NUMBER	ED VOTE	DOCUMEN	IT CONT	ROL NO.
034	MOTI - TRANS	IT BRAI	NCH							31ma	ar21	bct
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20	21/05/26		2021/05/		22							
9. ORDER IN	COUNCIL NO., SPECIAL	TIMING RE	QUIREMENT	S, COMMENTS	(OPTIONAL)	10. CODE - CHEQUE ST	TUB PRINTOUT – MA.	XIMUM 10 SINGL	E-SPACED I	LINES, 38 CHARAC	TER LINE	S
						00 MADCH 2024	ODEDATING	CDANTD	A \/N 4 F N	NT.		
11A. PAYEE	NAME AND ADDRESS -					MARCH 2021 (CONTRIBUTION						
DO TDA	NOIT	40 CHAHAC	TERS PER LI	NE								
520 GOI	n Pinkerton - Pre RGE ROAD EAS (9861 STN PRO	ST.										
				11B. POSTAL	CODE							
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12A. PAYEE	SUPPLIER CODE	12B. CODI										
s.17				T								
13. CLIENT	14. RESP CENTRE	15. SERVI	CE LINE	16. STOB	17. PRC	JECT	18. DISTRIBUTION	N SUPPLIER CO	DE .	19. AMOUNT OF C INCLUDING TA	XES	20. GST/ HST AMOUNT
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034	55030	64	550	3161		5503007				7,557,588	00	
21. CERTIFIE	 ED CORRECT <u>SIGNATUR</u>	<u>l</u> E	REVIEW	ED			<u>I</u>	TELEPHONE N		i		<u> </u>
				Park at 9:25 am,				(250)	208-2	163		
22. GOVERNMENT AGENT STAMP OR MANUAL CHEQUE NO. AND CHEQUE DATE 23. EXPENSE AUTHORITY SIGNAT CERTIFIED THAT THE AMOUNT TO BE PAID IS C IS IN ACCORDANCE WITH APPROPRIATE STA OTHER AUTHORITY FOR PAYMENT AND/OR CO AND, WHERE APPLICABLE, THAT THE WORK H PERFORMED. THE GOODS SUPPLIED, THE SER RENDERED AND/OR OTHER CONDITIONS MET.				DRRECT, PRINT NAM FUTE OR NTRACT: AS BEEN LOGI DO			SIGNATUF APPRO By Jodi I		May 27,	2021		
									*F	Please enter actu	al dollar	amount.

ORIGINAL: MINISTRY FINANCIAL SERVICES BRANCH

COPY: ORIGINATING OFFICE



Use this	form to requisition	a single pay	ment.		4020 .		1. MINIST	RY AND GRO	UP NO.		
See CPF	PM Chapter D for a	dditional ins	structions.								
2. CLIENT 034	3. MINISTRY AND ORIGINAL AND				4. TITLE OF ACCOUN	T – ENTER ONLY IF I	NOT A NUMBE	RED VOTE	DOCUMEN	IT CONTI	ROL NO.
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20	21/04/20		21/04/30	22							
9. ORDER IN	COUNCIL NO., SPECIAL	TIMING REQU	JIREMENTS, COMMENT	S (OPTIONAL)	10. CODE – CHEQUE S	TUB PRINTOUT – MA.	XIMUM 10 SING	LE-SPACED L	INES, 38 CHARAC	TER LINE	ES
Payment	needs to be rece	eived by B	C Transit by Ap	ril 30	00						
					APRIL 2021 O		RANT PA	YMENT			
11A. PAYEE	NAME AND ADDRESS -	40 CHARACTE			CONTRIBUTION		ENT				
520 GOI	n Pinkerton - Pre RGE ROAD EAS (9861 STN PRO	ST.	I CEO								
			11B. POSTAI	CODE V9T5							
12A. PAYEE	SUPPLIER CODE	12B. LOC CODE	C.								
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21. CERTIFIE	ED CORRECT <u>SIGNATUR</u>	REVIE	WED				TELEPHONE				
			ey Park at 2:27 pm, Apr 20				(250) 208-21	63		
	22. GOVERNMENT AGENT STAMP OR MANUAL CHEQUE NO. AND CHEQUE DATE CERTIFIED THAT THE AMOUNT TO BE PAID IS IN ACCORDANCE WITH APPROPRIATE SO OTHER AUTHORITY FOR PAYMENT AND/OR AND, WHERE APPLICABLE, THAT THE WORD PERFORMED, THE GOODS EXPLIED, THE SENDERED AND/OR OTHER CONDITIONS ME					ne ong		SIGNATURE APPROVE By Jodi Dong		, 2021	
FIN 188 Rev.	2013/01/24		ORIGINAL: MINISTRY	FINANCIAL SER	VICES BRANCH	COPY: OF	RIGINATING OF		lease enter actu	al dollar Form	



FIN 188 Rev. 2013/01/24

• Use this	form to requisition	a cinala n	ayment					1. MINISTF	RY AND GF	ROUP NO.		
	PM Chapter D for a			ıs.								
2. CLIENT	3. MINISTRY AND ORI					4. TITLE OF ACCOUN	IT – ENTER ONLY IF I	NOT A NUMBEI	RED VOTE	DOCUME	NT CONT	ROL NO.
034	MOTI - TRANS	IT BRAN	NCH									
5. DATE REC	Q. ISSUED		VOICE RECI		7. FISCAL YEAR		PECIAL ISSUE INSTRU	CTIONS - ENT	ER D (RET	URN CHEQUE TO	MINISTRY)
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	I COUNCIL NO., SPECIA				(OPTIONAL)	10. CODE – CHEQUE	STUB PRINTOUT - MA.	XIMUM 10 SINGL	.E-SPACED	LINES, 38 CHARAC	CTER LINE	ES
Payment	needs to be rec	eived by	BC Tra	nsit on Ma	y 31	00						
						MAY 2021 OF	PERATING GR	ANT PAY	MENT			
11A. PAYEE	NAME AND ADDRESS -					(ADVANCEM						
DC TDA	NOT	40 CHARAC	TERS PER L	INE		CONTRIBUTI	ON AGREEM	=N I				
BC TRA	เพอบ า Pinkerton - Pre	sident a	nd CEO									
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VICTOR	IIA BC											
				11B. POSTAL								
				V8W	/9T5							
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	MENT AGENT STAMP OR CHEQUE NO. AND CHEQI			ISE AUTHOR HAT THE AMOUNT			ME		SIGNATU	RE		
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			PERFORMED	THE GOODS SUI AND/OR OTHER CO	PPLIED, THE SER	AS BEEN Jodi D	ong		By Jod	li Dong at 7:31 pm,	May 27, 20	021
									*	Please enter actu	ıal dollar	amount.
										Ol-	. Form	
			ORIGIN	AL: MINISTRY F	INANCIAL SER	VICES BRANCH	COPY: OF	RIGINATING OFF	ICE	Clear	r Form	



	form to requisition					QUEU.		1. MINISTRY AND	GROUP NO.		
	PM Chapter D for a			S.		4 TITLE OF ACC	OUNT – ENTER ONLY IF	NOT A NUMBERED VO	TE BOOLING		201 110
2. CLIENT 034	3. MINISTRY AND ORI					4. TITLE OF ACC	OUNT - ENTER ONLY IF	NOT A NUMBERED VC	DOCUM	IENT CONT	ROL NO.
5. DATE REC	D. ISSUED	(WHICHE)		ES RECEIVED (R)		8.	SPECIAL ISSUE INSTRU OR LEAVE BLANK.	JCTIONS – ENTER D (F	RETURN CHEQUE TO	O MINISTRY,)
20	021/07/12		021/06/3		22						
9. ORDER IN	COUNCIL NO., SPECIAL	L TIMING REQ	UIREMENTS	S, COMMENTS	S (OPTIONAL)		QUE STUB PRINTOUT - MA	XIMUM 10 SINGLE-SPAC	CED LINES, 38 CHAR	ACTER LINE	ES
Payment possible	needs to be rec	eived by E	3C Tran	sit as soc	on as	00 June 2021	OPERATING GF	RANT PAYMEN	IT		
11A. PAYEE	NAME AND ADDRESS -	MAXIMUM 5 S 40 CHARACTE				(ADVANCI	EMENT) JTION AGREEM	ENT			
520 GO	n Pinkerton - Pre RGE ROAD EAS (9861 STN PRC	sident an				CONTRIB	JIION AGREEM	EINT			
				11B. POSTAL	. CODE /9T5						
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034	55030	645	50	8051	. .	5503007			10,450,50	0 00	
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21. CERTIFIE	ED CORRECT SIGNATUR	RE	REVIE By Jane		3 am, Jul 12, 20	021	'	TELEPHONE NO. (778) 698	3-3280		
	MENT AGENT STAMP OR CHEQUE NO. AND CHEQU	UE DATE	23. EXPENS CERTIFIED THAN S IN ACCORD OTHER AUTHO AND, WHERE A PERFORMED,	SE AUTHOR AT THE AMOUNT ANCE WITH APP BRITY FOR PAYM APPLICABLE, TH THE GOODS SUI	ITY SIGNATION OF THE WORK HAD NOT THE WORK HAD POLICED, THE SERVEN DISTRICT ON THE SERVEN DESTRICT ON THE SERVEN ON THE SERVEN DESTRICT OF THE SERVEN DESTRICT O	DRRECT, PRINITUTE OR NTRACT:	т _{NAME} e Mukasa	SIGNA			
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FIN 188 Rev. 2013/01/24

	COLUMBIA		' '			GOLOI						
	form to requisition a			ns.				1. MINIST	RY AND G	ROUP NO.		
2. CLIENT	3. MINISTRY AND ORIG			101		4. TITLE OF ACCOUNT	T – ENTER ONLY IF	NOT A NUMBE	RED VOTE	DOCUME	NT CONT	ROL NO.
034	MOTI - TRANS	IT BRAN	NCH									
5. DATE REQ	. ISSUED	DATE G	VOICE REC DODS/SERV	ICES RECEIVED	7. FISCAL YEAR		ECIAL ISSUE INSTRU LEAVE BLANK.	JCTIONS - EN	TER D (RE	TURN CHEQUE TO	MINISTRY)
			YYYY / MM /	/ DD	22							
	21/07/21		2021/07									
	COUNCIL NO., SPECIAL					10. CODE – CHEQUE S'	TUB PRINTOUT – MA	XIMUM 10 SING	SLE-SPACEI	D LINES, 38 CHARAG	CTER LINE	ES
Payment	needs to be rece	erved by	вста	nsit on July	/ 31			4 N.T. D.4 N.				
11A. PAYEE N	IAME AND ADDRESS -	MAXIMUM 5	5 SINGLE-SP	PACED LINES,		July 2021 OPE (ADVANCEME	ENT)		MENI			
		40 CHARAC	TERS PER L	INE		CONTRIBUTION	ON AGREEM	ENT				
520 GOF	Pinkerton - Pre RGE ROAD EAS 9861 STN PRO	ST.										
				11B. POSTAL	CODE							
				V8W								
12A PAYEE S	SUPPLIER CODE	12B.	LOC.									
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			REVIE\ By Janes	NED y Park at 2:06 pm	Jul 21, 2021			(778) 698-3	3280		
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	form to requisition a						1. MINIST	'RY AND GR	OUP NO.		
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9. ORDER IN	COUNCIL NO., SPECIAL	TIMING REQUIR	REMENTS, COMMENTS (OF	PTIONAL)	10. CODE – CHEQUE S	TUB PRINTOUT - MAXII	MUM 10 SING	GLE-SPACED	LINES, 38 CHARAC	CTER LINE	S
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		HEN	- LIES HIS/ON OTHER CONDIT	. J. TO INC. I				*	Please enter acti	ual dollar	amount.
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	form to requisition				4010 .		1. MINISTE	RY AND GR	OUP NO.		
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11A. PAYEE	NAME AND ADDRESS -	MAXIMUM 5 SINGLE-SI 40 CHARACTERS PER I			October 2021 (- (ADVANCEME CONTRIBUTION)	NT)		ATIVIE	N I		
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Use this	form to requisition	a single payment.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		4020 .		1. MINISTRY A	ND GROUP N	NO.	
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Payment 30	needs to be rece	eived by BC Tra	NOVEMBER 2021 OPERATING GRANT PAYMENT							
11A. PAYEE NAME AND ADDRESS — MAXIMUM 5 SINGLE-SPACED LINES, 40 CHARACTERS PER LINE					(ADVANCEMENT) CONTRIBUTION AGREEMENT					
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