expense | monthly tracking report

claimant | Dennis, Marilyn

position | Trustee

level | Board of Trustees

reporting period | January 1 to February 28, 2018

date of report | April-13-18



Description	Date (mm/dd/yyyy)	Details and/or Rationale	Amount (CDN\$)	Category	Expense Type
ASBA Winter Leadership	01/14-16/18	Registration Fee	\$761.25	travel	PD course or registration fee
Academy					
ASBA Winter Leadership	01/14-16/18	Mileage	\$317.00	travel	PD mileage
Academy					
ASBA Winter Leadership	01/14-16/18	Accommodation Jan 14-15 2018	\$341.30	travel	PD accommodation
ASBA Winter Leadership	01/14/18	Meal	\$20.31	travel	PD food/non alcoholic beverage
Academy					



Calgary BoardTrustee Professional Development andof EducationTravel & Subsistence Expense Report

Must be completed upon return from every business trip for reporting purposes and any out of pocket expenditures. Completed form will be submitted to Accounts Payable.

Cetails of Trip Please Print				Date: January 31 2018		
Trustee's Name Marilyn Dennis, V						
Purpose of Trip / Name of Conferen	ce: ASBA W	Vinter Leader	ship Academy	- 4	· · · · · · · · · · · · · · · · · · ·	
Departure and Return Date Januar	y 14/16 2018	8	_Destination: Edmoi	nton		
Cescription of Expenses Please attach receipts	Total Cost (Indicate currency If not Cdn)	Exchange Rate Adjusted Amount (If applicable)	Amount Paid by CBE Invoice/P-Card/ Payroll for Mileage (including GST)	Amount Paid By Claimant For Out of Pocket Expenditures (including GST)	Alias to be Charged for Claimant's Expenses	
Registration/Conference Fees	761.25		761.25		Invoiced	
Travel Costs Airfare				: : :		
Insurance						
Rail/Bus						
Taxi/Shuttle Bus/Car Rental at Destination			100			
Personal Vehicle 634 Km @ 50¢/Km (submit via PeopleSoft)	317.00		317.00	Sent to HR		
Parking - at Destination						
Accommodation						
2 Nights @ \$ 170.65 (Single Rate)	341.30		341.30			
Telecommunication Charges						
(Internet, Phone calls)						
Meals – Receipts required						
(Including tips, excluding meals covered by Conference or Others)						
Breakfast(s) (Maximum \$12.00 each)						
Lunch(es) (Maximum \$17.00 each)						
1 Dinner(s) (Maximum \$26.00 each) Other – Provide Details	20.31			20.31		
TOTAL COST OF TRIP	1439.86		1419.55			
AMOUNT DUE TO CLAIMANT / <cbe< td=""><td></td><td></td><td></td><td>20.31</td><td></td></cbe<>				20.31		

GST Breakout Area

Ć

NOTE: Copies of amounts paid through the P-Card, Invoices and Mileage Claim Forms must also be attached to this claim, in addition to items claimed for all Out of Pocket Expenses.

Personal Information is collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP). The information included in this report is collected for the purpose of expense reporting and reimbursement and may be disclosed to the public as required by the CBE's policies and practices, Alberta Government policies and legislation, or a FOIP request. I have reviewed the attachments to ensure that confidential information has been removed or redacted. I certify that the above claim is correct.

Claimant's Signetrite	Payment Authorization	· .



INVOICE

NUMBER

0000038

DATE

January 29, 2018

1200, 9925 - 109 Street Edmonton, Alberta T5K 2J8
Phone: 1.780.482.7311 Fax: 1.780.482.5659
www.asba.ab.ca Email: hrogers@asba.ab.ca Business #: 10669 4268

Grace

BILL TO:

Calgary Board of Education 1221 - 8 St SW Calgary AB T2R 0L4 Cupicata Copy

FEB 9 8 2018

Ecounts Paynois

(403) 817-7933 Ext.

Customer Number TERMS CAL02 Due on Receipt DESCRIPTION REQ. UNIT **EXTENDED** PRICE **PRICE** 2018 Winter Leadership Academy, January 15-16 725.00 4,350.00 Attendee(s): T.Hurdman, A.Adams, R.Hehr, M.Dennis, J.Hrdlicka, P.Minor

NET AMOUNT	4,350.00
FREIGHT G.S.T.	217.50
TOTAL DUE	\$4,567.50





Kilometre Travel Log

Directions: Complete this form to track kilometres travelled. To receive payment, please enter the total weekly kilometres into your timesheet ir PeopleSoft, then submit a hardcopy of the Kilometre Travel Log form to your Manager or Principal. You may wish to retain a copy for your own records.

Section 1: Yo	our Employee Information To be comp	pleted by Employee		
Employee ID	* First Name:* Marilyn	Last Name:* Dennis, Vic	e-Chair & Trustee Ward	ds 5 & 10
Section 2: Tr	ip Details: To be completed by Employ h trip on a separate row.	/ee Record the date, purpose, be	ginning and ending location	is, and
Date DD-MM-YY	Purpose for Trip	Trip Starts From T	rip Ends At	Distance in km
14-01-18	ASBA Winter Leadership Academy	Calgary E	Edmonton	317
16-01-18		Edmonton C	Calgary	317
				2
The total week	dy km must be entered into the timeshee	et in PeopleSoft. T	otal Kilometres	634
Section 3: To	be completed by Employee and Appropeincoming@westcanadian.com			Travel Log
Employee Signature:*	A	Time Approver Name:*	Trish Minor	0.
Employee Phone:*	403-817-7927	Time Approver Signature:	*	
Date DD-MM-Y		Date DD-MM-YY:*		
			(EOID) This information will be use	ad for the

Personal information is collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP). This information will be used for the management of personnel and for the delivery of various Human Resources programs at the Calgary Board of Education. It will be treated in accordance with the privacy protection provisions of FOIP. If you have any questions about the FOIP Act, please access http://www.cbe.ab.ca/legal/foip. If you have any questions about this form and/or the use of the information, please contact the Employee Contact Centre at 1-877-353-2555.

DOUBLETREE
BY HILTONWEST EDMONTON

16615 - 109 Avenue • Edmonton, AB T5P 4K8
Phone (780) 484-0821 • Fax (780) 486-1634
For reservations across the nation
www.westedmonton.doubletree.com or 1-800-222-TREE

Name & Address

DENNIS, MARILYN 1221 8TH ST SW CALGARY AB T2R0L4 CANADA Room Arrival Date Departure Date

1712/NQ 1/14/2018 6:56:00 PM 1/16/2018

AMOUNT

Adult/Child Room Rate 1/0 152.00

Rate Plan: HH # AL: Car: NTC

Confirmation Number: 91944

REFERENCE

1/16/2018

DATE

1/14/2018 1/14/2018 1/14/2018 1/14/2018 1/15/2018 1/15/2018 1/15/2018 1/15/2018 1/16/2018	1405691 1405691 1405691 1405691 1406524 1406524 1406524 1406524 1406864	GUEST ROOM AB TOURISM LEV DMF GST GUEST ROOM AB TOURISM LEV DMF GST MC *9531 **BALANCE**				\$152.00 \$6.26 \$4.56 \$7.83 \$152.00 \$6.26 \$4.56 \$7.83 (\$341.30) \$0.00
EXPENSE R	PORT SUM				_	
ROOM AND TOTAL		1/14/2018 \$170.65 \$170.65	1/15/2018 \$170.65 \$170.65	STAY TOTA \$341.30 \$341.30	NL	
Total Invoice	Amount	\$304.00	\$37.30			
ACCOUNT NO.					DATE OF CHARGE	FOLIO NO./CHECK NO.
						205940 B
CARD MEMBER NAM	ИE				AUTHORIZATION	INITIAL
ESTABLISHMENT NO GST# 74111-43		ESTABLISHMENT AGREES TO TR	IANSMIT TO CARD HOLDE	R FOR PAYMENT	PURCHASES & SERVI	CES
					TAXES	
					TIPS & MISC.	
CARD MEMBER'S SIG	GNATURE			l		
CARD MEMBER'S SIG	GNATURE				TOTAL AMOUNT	-341.30

DESCRIPTION





WALDORF ASTORIA*

CONRAD

canopy



CURIO



TAPESTRY COLLECTION













(B) Hilton Grand Vacations



EARLS RESTAURANTS

285 SARA M

Gst 2 Tb1 72/2 Chk 5710 14Jan'18 07:50PM

1 TACOS CHK SAND* w/yam fries

14.50 1.75

Subtotal GST Tax

16.25 0.81

08:22PM Total

17.06

-- PLEASE PAY YOUR SERVER --General Manager: Hovig Boyadjian hboyadjian@earls.ca Head Chef: Jesse Synnuck jsynnuck@earls.ca

PLEASE PAY YOUR SERVER GST # R 133319962

EARLS #10201 W. Edmonton 9961 170th Street Edmonton AB T5P 4S2 780-481-2222

** TRANSACTION RECORD **

Tran. #: 12176 RUC: Restaurant Table #: 72 Check #: 5710 Group #: 2 Employee #: 285 Employee Name: SARA M

UISA CREDIT Pre-Auth Purchase AID: A0000000031010

Amount

\$17.08

TOTAL CAD\$20.31

APPROVED 06020F APPROVED 06020F 00-001 06020F EA05WS02/EA05WC02 014001001014 2018/01/14 20:25:35

TUR: 8080008000 TSI: 7800

No signature required

Customer Copy

THANK YOU Come Again