

expense | monthly tracking report

claimant | Davis, Lisa

position | Trustee

level | Board of Trustees

reporting period | November 1 to December 31, 2019

date of report | February 14, 2020



**Calgary Board
of Education**

Description	Date (mm/dd/yyyy)	Details and/or Rationale	Amount (CDN\$)	Category	Expense Type
ASBA FGM	11/17-18/2019	Registration Fee	\$393.75	travel	conferences & workshops
ASBA FGM	11/17-18/2019	Mileage	\$300.00	travel	BUS mileage
ASBA FGM	11/17-18/2019	Parking	\$47.25	travel	BUS airfare/bus/rail
ASBA FGM	11/17-18/2019	Accommodation	\$185.25	travel	BUS accommodation
Calgary 001 Board Oversight of Culture Conference	11/20/2019	Conference Fee	\$1,050.00	travel	PD course or registration fee



Calgary Board of Education

Trustee Professional Development and Travel & 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.

Details of Trip | Please Print

Date: November 21 2019

Trustee's Name Lisa Davis, Trustee Wards 6 & 7

Purpose of Trip / Name of Conference: ASBA FGM 2019

Departure and Return Date November 17-18 2019 Destination: Edmonton

Description 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	393.75		393.75		Invoiced
Travel Costs					
Airfare					
Insurance					
Rail/Bus					
Taxi/Shuttle Bus/Car Rental at Destination					
Personal Vehicle 600 Km @ 50¢/Km (submit via PeopleSoft)	300.00		300.00		Sent to HR
Parking – at Destination	47.25		47.25		
Accommodation					
1 Nights @ \$ 185.25 (Single Rate)	185.25		185.25		
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)					
Dinner(s) (Maximum \$26.00 each)					
Other – Provide Details					
TOTAL COST OF TRIP	926.25		926.25		

AMOUNT DUE TO CLAIMANT / <CBE>

GST Breakout Area

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 Signature

Payment Authorization

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Lisa Davis

Page Number : 1 Invoice Nbr
 Guest Number : 1298846
 Folio ID : A
 Arrive Date : 17-NOV-19 12:46
 Depart Date : 18-NOV-19 10:33
 No. Of Guest : 1
 Room Number :
 Marriott Bonvoy Number :

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edm YEGWI NOV-18-2019 10:33 MDSOU781

Date	Reference	Description	Charges (CAD)	Credits (CAD)
17-NOV-19	RT1147	Room Chrg - Govt./Military	165.00	
17-NOV-19	RT1147	GST	8.50	
17-NOV-19	RT1147	DMF	4.95	
17-NOV-19	RT1147	Tour Levy	6.80	
17-NOV-19	RT1147	Parking Valet	45.00	
17-NOV-19	RT1147	GST	2.25	
18-NOV-19	MC	Mastercard-9531		-232.50
** Total			232.50	-232.50
*** Balance			0.00	

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Continued on the next page

The Westin Edmonton
 10135 100 St
 Edmonton, AB T5J 0N7
 Canada
 Tel: 780-426-3636 Fax: 780-428-1454



Lisa Davis

Page Number : 2 Invoice Nbr
 Guest Number : 1298846
 Folio ID : A
 Arrive Date : 17-NOV-19 12:46
 Depart Date : 18-NOV-19 10:33
 No. Of Guest : 1
 Room Number :
 Marriott Bonvoy Number :

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
11-17-2019	0.00	0.00	0.00	0.00	0.00	232.50	232.50	0.00
11-18-2019	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-232.50
Total	0.00	0.00	0.00	0.00	0.00	232.50	232.50	-232.50

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Calgary Board of Education

Trustee Professional Development and Travel & 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.

Details of Trip | Please Print Date: December 4 2019

Trustee's Name Lisa Davis, Trustee Wards 6 & 7

Purpose of Trip / Name of Conference: Calgary 001 Board Oversight of Culture Conference

Departure and Return Date November 20 2019 Destination: Calgary

Description 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	1050.00			1050.00	

Travel Costs

- Airfare
- Insurance
- Rail/Bus
- Taxi/Shuttle Bus/Car Rental at Destination
- Personal Vehicle Km @ 50¢/Km (submit via PeopleSoft)
- Parking – at Destination

Accommodation

Nights @ \$ _____ (Single Rate)

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)
- Dinner(s)
(Maximum \$26.00 each)

Other – Provide Details

TOTAL COST OF TRIP	1050.00	1050.00
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AMOUNT DUE TO CLAIMANT / <CBE>		1050.00
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GST Breakout Area

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Claimant's Signature

Payment Authorization

Davis, Lisa

From: Lisa Davis
Sent: November 14, 2019 1:25 PM
To: Davis, Lisa
Subject: Fwd: Order Receipt

----- Forwarded message -----

From: <orders@icd.ca>
Date: Tue, Oct 15, 2019 at 2:22 PM
Subject: Order Receipt
To: Ms Lisa M. Davis



Institute of Corporate Directors
Institut des administrateurs de sociétés

2701 - 250 Yonge Street
Toronto, ON M5B 2L7
Tel: (416) 593-7741 Fax: (416) 593-0636
Website: www.icd.ca

Dear Lisa,

Thank you for your order! Your purchase helps support our organization and we appreciate your business.

Here are the details of your order/receipt. Please retain this email for your records.

Order Number: 136055
Order Date: Oct 15, 2019 4:20 PM
Bill To: Ms Lisa M. Davis
Order Total: 1,102.50
Payment Method: Master Card *****
Name on Card: Lisa Davis

Item	Price	Qty	Total
Calgary 001 Board Oversight of Culture - Ms Lisa M. Davis <i>When:</i> Nov 20, 2019 8:30 AM - Nov 20, 2019 4:30 PM <i>Where:</i> University of Calgary Haskayne School of Business, Downtown Campus	1,050.00	1	1,050.00

906 8th Ave SW, 6th Floor, Room DTC 636
Calgary, AB T2P 1H9 Canada

Registration option: Nov 20, 2019 8:30 AM - CALBOC001 Course

Registration

Program Items:

- Nov 20, 2019 8:30 AM: CALBOC001 ICD Membership for Course Participants

Item Total	1,050.00
Shipping	0.00
Handling	0.00
GST	52.50
Item Grand Total	1,102.50
Transaction Grand Total	1,102.50

Thank you again for your support!

This is an automatically generated email, please do not reply.

GST/HST# 12179 8201

QST# 12048 55478