

Expense Disclosure Reporting Form

Name: Fred Nowicki, Board Member

For the Period: Jun-18

Travel, Seminars/Conference and Associated Expenditures

Date of expense	Destination	Purpose	Airfare	Other Transportation	Accommodation	Meals	Seminar / Conference / Registration fees	Total
1	May 28-29, 2018	Edmonton		\$568.77	\$179.63	\$36.00		\$784.40
2								\$0.00
3								\$0.00
4								\$0.00
5								\$0.00
6								\$0.00
7								\$0.00
8								\$0.00
9								\$0.00
10								\$0.00
Travel Related								\$784.40

[Notes](#)

Non-travel related Expenditures (Business meals, etc...)

Dates	Purpose	Total
1		\$0.00
2		\$0.00
3		\$0.00
4		\$0.00
5		\$0.00
6		\$0.00
7		\$0.00
8		\$0.00
9		\$0.00
10		\$0.00
Non-Travel Related		\$0.00

[Notes](#)

Total claimed for reporting period: \$784.40

Mileage & Per Diem Allowances

Employee Name	Expense Type	Submitted Date	Trip Info	Trip Start Date	Trip End Date	Expense Trans Date	Detail Description	Total Amount (Includes GST/HST)	Summary Item Reference
Fred Nowicki	Travel Meal Allowance	6/1/2018	01. 05/28/2018 at 08:00 AM to 05/29/2018 at 03:45 PM - Edmonton ~ to attend Board of Directors' dinner (as departing member).	5/28/2018	5/29/2018	5/28/2018	Meals - Lunch (May 28/29). Other meals provided.	\$36.00	1
Fred Nowicki	Mileage	6/1/2018	01. 05/28/2018 at 08:00 AM to 05/29/2018 at 03:45 PM - Edmonton ~ to attend Board of Directors' dinner (as departing member).	43248	43249	5/28/2018	Mileage (1027 km) Lethbridge to Edmonton r/t	\$523.77	1



10155 105th Street,
Edmonton, AB T5J 1E2
Tel: (780) 423 4811 Fax: (780) 423 3204

Fred Nowicki

Invoice

Invoice date 5/29/2018
 Invoice number 398658
 Our reference
 Client Number
 GST Number 10103 5467 RT0020

Date	Description	Quantity	Unit Price	Total ()
5/28/2018	Room Charge	1	160.00	160.00
5/28/2018	GST Taxes	1	8.24	8.24
5/28/2018	Tourism Levy	1	6.59	6.59
5/28/2018	Destination Market Fee	1	4.80	4.80
Total invoice				179.63
5/29/2018				-179.63
Total Paid				-179.63
Total Due				0.00

Total GST 8.24

I agree that my liability for any charges incurred by me is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges. Interest will be charged on any overdue balance.

Signature X _____

Taxi Receipts May 28/18.

Receipts Below

Co-op Taxi Line
(780)425-2525
www.co-optaxi.com

CASH RECEIPT

TERMINAL:	339
DRIVER :	4610
*TRIP #:	16332943
5/28/18	17:19:34

FARE : \$	25.00

TOTAL: \$	25.00

Thank you for choosing
Co-op Taxi

Co-op Taxi Line
(780)425-2525
www.co-optaxi.com

CASH RECEIPT

TERMINAL:	339
DRIVER :	4610
TRIP #:	16334591
5/28/18	20:15:37

FARE : \$	20.00

TOTAL: \$	20.00

Thank you for choosing
Co-op Taxi