



Expense Disclosure Summary

Name Len Vandervaart **Position** Interim VP, Academic
Period Covered October 1 - December 31, 2012

Please attach supporting documentation ie: Expense Disclosure Sheet and applicable receipts

Dates (Travel Dates if applicable)	Destination/Location	Purpose	Airfare	Other Transportation*	Accommodation	Meals	Hospitality	Incidentals	Total
October 2, 2012	Medicine Hat, AB	Regional Stewardship	\$ -	\$ -	\$ -	\$ -	\$ 34.13	\$ -	\$ 34.13
October 3, 2012	Brooks, AB	Brooks Campus Planning Post Secondary Collaboration	\$ -	\$ 96.80	\$ -	\$ -	\$ -	\$ -	\$ 96.80
October 29, 2012	Medicine Hat, AB		\$ -	\$ -	\$ -	\$ -	\$ 27.00	\$ -	\$ 27.00
November 2, 2012	Brooks, AB	Brooks Campus Planning Post Secondary Collaboration	\$ -	\$ 97.68	\$ -	\$ -	\$ -	\$ -	\$ 97.68
November 15/16, 2012	Edmonton, AB		\$ -	\$ 528.00	\$ 192.64	\$ -	\$ -	\$ -	\$ 720.64
October 31, 2012	Medicine Hat, AB	Conservatory Fund Devel. Planning	\$ -	\$ -	\$ -	\$ -	\$ 43.99	\$ -	\$ 43.99
November 1, 2012	Medicine Hat, AB	Planning with Athabasca University	\$ -	\$ -	\$ -	\$ -	\$ 25.37	\$ -	\$ 25.37
October 10, 2012	Medicine Hat, AB	Hospitality	\$ -	\$ -	\$ -	\$ -	\$ 66.15	\$ -	\$ 66.15
			\$ -	\$ 722.48	\$ 192.64	\$ -	\$ 196.64	\$ -	\$ 1,111.76

* Other Transportation includes vehicle rentals, public transportation, taxis, parking, and mileage

This Expense Summary is _____ and indicated above.

Signature



Expense Disclosure Sheet

Name Len Vandervaart Date October 2, 2012
Position Interim VP, Academic Purpose Regional Stewardship Destination Medicine Hat, AB

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Oct. 2, 2012	Crave Pub	Hospitality	Lunch with Community partner	32.50	1.63	34.13
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
Total Receipts						34.13

CRAVE
MEDICINE HAT, AB
(403) 504-3540
GST# 107687782

I N V O I C E

server: LESLIE
guest:

table #34

: CLUBHOUSE	8.00
Fries & Gravy	1.00
: CHICK SOUVLAKI	10.50
: CHICKEN CAESAR	10.50
: POP	2.50

total	34.13
Sales	32.50
al Tax	1.63
cash	34.13

08 PM 10/2/2012

11

CRAVE WHAT YOU WANT

THANK YOU!



Expense Disclosure Sheet

Name Len Vandervaart Date October 3, 2012 Destination Brooks, AB
Position Interim VP, Academic Purpose Brooks Campus Planning

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Oct. 3, 2012	MHC Travel Claim	Other Transportation	My First Year/Grasslands School District Meeting	92.19	4.61	96.80
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
Total Receipts						96.80



MEDICINE HAT COLLEGE

TRAVEL CLAIM

(To be submitted upon return from travelling)

Name Address

Claimant: Len Vanduraant VPA

Meeting/Conference:

Name: @ Mtg @ MFY and @ Mtg @ Busslands School Dist. Superintendent

Location: Brooks Campus

(Address only necessary if claimant is not an employee or if you want cheque mailed to an address other than your residence)

DAYS INVOLVED:

Departure date: (month/day/year) Wed Oct 3
Return date: (month/day/year) 11
Total Number of Days: 1

Time: 10 AM / PM
Time: 8 AM / PM (circle one)

EXPENSES:

Meals

Table with columns: Description, Days, Rate, Total. Rows include Breakfast, Lunch, Dinner, Full Per diem, Overnight incidental, Hotel, Hospitality Allowance, Miscellaneous.

FOR OFFICE USE ONLY table with columns: Amount, GST

TRANSPORTATION:

Table with columns: Description, Rate, Total. Rows include Own Car (220 @ 0.44 = 96.80), College Car, Rental Car, Air Fare, Taxi, buses, parking, road tolls.

INVOICE TOTAL

TOTAL EXPENSE

Less - Advance

(if applicable)

NET CLAIM DUE (Repayable)

Date

Oct 10, 2012

REQUEST BY:

DEPT. CODE

32100 - 9240

DEPT. APPROVA

FINANCE:

Table with columns: FOR OFFICE USE ONLY (GL CODE, AMOUNT, GST), VENDOR NUMBER, CONTROL # (02-29401), TOTAL. Includes date stamp 2012 OCT 22 3:40.



Expense Disclosure Sheet

Name Len Vandervaart Date October 29, 2012 Destination Medicine Hat, AB
Position Interim VP, Academic Purpose Post Secondary Collaboration

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Oct. 29, 2012	Red Deer College	Hospitality	MHC share of gift for outgoing Senior Academic Officer member	27.00	-	27.00
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
Total Receipts						27.00



Expense Disclosure Sheet

Name Len Vandervaart Date November 2, 2012 Destination Brooks, AB
Position Interim VP, Academic Purpose Brooks Campus Planning

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Nov. 2, 2012	MHC Fleet Vehicle	Other Transportation	Transportation costs to Brooks Campus	93.03	4.65	97.68
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
Total Receipts						97.68



MEDICINE HAT COLLEGE

MEDICINE HAT COLLEGE FACILITY OPERATIONS

VEHICLE SIGN-OUT

Name: Lon Vanderaant G.L. Code: 1-32100-9240
UPA Travel

Department: UPA Vehicle #: 8

Destination: Brooks
(Note: For out of town travel, you can request a MHC Cell phone.)

Odometer Readings: 179314
Out ? Return 179536

Total Kilometers: 222

Remarks: Note any accident which happened. Indicate any item requiring service or repair.

222 Km's
x \$.44 rate per Km
\$ 97.68

Employee Agreement:

- 1. I possess a current, valid drivers license.
- 2. I am using this vehicle for *College Business*.
- 3. I understand that *No Personal Use is Allowed*.
- 4. I understand that all College Vehicles are *Non-Smoking*.



Signature: _____ Date: Nov 2/12



Expense Disclosure Sheet

Name Len Vandervaart **Date** November 15/16, 2012 **Desination** Edmonton, AB
Position Interim VP, Academic **Purpose** Post Secondary Collaboration

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Nov. 23, 2012	MHC Travel Claim	Other Transportation	Mileage to Edmonton - Senior Academic Officers Meeting	502.86	25.14	528.00
Nov. 16, 2012	Delta Hotels	Accommodation	Hotel room for Senior Academic Officer Meeting	183.76	8.88	192.64
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
				Total Receipts		720.64



**MEDICINE HAT
COLLEGE**

TRAVEL CLAIM

(To be submitted upon return from travelling)

Name
Address

Claimant: Len Vandermaat
Arts VPA

Meeting/Conference:
Name

SAO meeting
(If you use an acronym please also indicate long form)

Location

Edmonton

(Address only necessary if claimant is not an employee or if you want cheque mailed to an address other than your residence)

DAYS INVOLVED:

Departure date: (month/day/year) Thurs Nov 15
Return date: (month/day/year) Fri Nov 16
Total Number of Days: 2

Time: 8 AM / PM
Time: 5 AM / PM
(circle one)

EXPENSES:

Meals

Breakfast _____ @ 10.00 = _____
Lunch _____ @ 12.00 = _____
Dinner _____ @ 22.00 = _____
Full Per diem _____ @ 44.00 = _____

Overnight incidental (requires 24 hour stay) _____ @ 10.00 = _____

Hotel (Attach invoice) _____ = _____

Hospitality Allowance (In-lieu of hotel) _____ @ 20.00 = _____

Miscellaneous (Specify) _____

TRANSPORTATION:

Own Car 1200 @ 0.44 = 528.00
(kilometres)

College Car (Attach gas receipts) _____ = _____

Rental Car (Attach invoice & gas receipts) _____ = _____

Air Fare (Attach Air Line Ticket or Invoice) _____ = _____

Taxi, buses, parking, road tolls: (specify) (Less than \$10 receipt is not required)

TOTAL EXPENSE

Less - Advance _____

(if applicable)

NET CLAIM DUE (Repayable)

FOR OFFICE USE ONLY	
Amount	GST

INVOICE TOTAL

Date

Nov 23/12

REQUEST BY:

DEPT. CODE

1 32100 9240

DEPT. APPROVAL:

x / /

FINANCE:

FOR OFFICE USE ONLY	VENDOR NUMBER		CONTROL #
	GL CODE	AMOUNT	TOTAL
			02- 29402

2012 NOV 28 AM 10:14



DELTA
EDMONTON CENTRE
 SUITE HOTEL

10222 - 102 Street, Edmonton, Alberta T5J 4C5
 Tel: 780-429-3900 Fax: 780-426-0562

Northern Alberta Institute of Technology
 Mr Len Vandervaart
 Canada

Room: 0714
 Folio: 147323
 Cashier: 402
 Arrival: 11-15-12
 Departure: 11-16-12

Group: Northern Alberta Institute Of Technologi

Date	Description	Additional Information	Charges	Credits
11-15-12	Room Charge		154.00	
11-15-12	Room - GST		7.78	
11-15-12	Room - Tourism Levy		6.22	
11-15-12	Room - Destination Mkt. Fee		1.54	
11-15-12	Parking - Self Parking		23.10	
11-16-12	Visa	XXXXXXXXXXXX8983 XX/XX		192.64
Total			192.64	192.64
Balance Due			0.00	CDN

GST Summary	
Registration No:	899111215
Room	7.78
F&B	0.00
Other	1.10
Total	8.88

Guest Signature: _____

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.



Expense Disclosure Sheet

Name Len Vandervaart Date October 31, 2012
Position Interim VP, Academic Purpose Conservatory Fund Devel. Planning Destination Medicine Hat, AB

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Oct. 31, 2012	Crave Pub	Hospitality	Lunch with MHC College Advancement	42.21	1.78	43.99
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
Total Receipts						43.99

CRAVE PUB
299 COLLEGE DRIVE SE
MEDICINE HAT AB T1A3Y6
4035283926

MERCHANT ID: 87153060017 TERM ID: 002
SERVER: 1

SALE

XXXXXXXXXXXXXXXX8983

VISA ENTRY METHOD: CHIP
10/31/12 12:51:50
INV #: 000008 APPR CODE: 045226
 BATCH #: 000063
 REF #: 008

AMOUNT \$37.28
TIP \$6.71

TOTAL \$43.99

PIN VERIFIED BY CARD ISSUER
CARDHOLDER AGREES TO PAY ABOVE
TOTAL AMOUNT IN ACCORDANCE WITH
CARD ISSUER'S AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)
RETAIN THIS COPY FOR STATEMENT
VERIFICATION

CARDHOLDER COPY

APPROVED

APPLICATION LABEL: VISA CREDIT
AID: A0000000031010
TUR: 00 00 00 80 00
TSI: FB 00



Expense Disclosure Sheet

Name Len Vandervaart **Date** November 1, 2012
Position Interim VP, Academic **Purpose** Planning with Athabasca University **Destination** Medicine Hat, AB

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Nov. 1, 2012	Crave Pub	Hospitality	Lunch with Acting Director, Learning Services from Athabasca University	24.32	1.05	25.37
						-
						-
						-
						-
						-
						-
						-
						-
						-
Total Receipts						25.37

CRAVE PUB
299 COLLEGE DRIVE SE
MEDICINE HAT AB T1A3Y6
4035283926

MERCHANT ID: 87183060017 TERM ID: 002
SERVER: 1

SALE

XXXXXXXXXXXXXXXXX8983

VISA ENTRY METHOD: CHIP
11/01/12 13:14:04
INV #: 000011 APPR CODE: 021447
 BATCH #: 000064
 REF #: 011

AMOUNT \$22.06
TIP \$3.31

TOTAL \$25.37

PIN VERIFIED BY CARD ISSUER
CARDHOLDER AGREES TO PAY ABOVE
TOTAL AMOUNT IN ACCORDANCE WITH
CARD ISSUER'S AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)
RETAIN THIS COPY FOR STATEMENT
VERIFICATION

CARDHOLDER COPY

2012 NOV 28 AM10:14

APPROVED

APPLICATION LABEL: VISA CREDIT
AID: A000000031010
TUR: 00 00 00 80 00
TS1: F8 00



Expense Disclosure Sheet

Name Len Vandervaart Date October 10, 2012
Position Interim VP, Academic Purpose Hospitality Destination Medicine Hat, AB

Receipt Reconciliation: (Please attach supporting documentation ie: receipts)

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Oct. 10, 2012	Awesome Blossom	Hospitality	Gift to departing staff member	63.00	3.15	66.15
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
Total Receipts						66.15

Local: (403) 581-9911 Tollfree: (877) 834-6281



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Unit D, 303 South Ridge Drive, Medicine Hat, AB T1B4S6 Local: (403) 581-9911 Tollfree: (877) 834-6281

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 - Halloween
 - Thanksgiving (USA)
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 - Funeral Flowers
 - Standing Sprays
 - Casket Flowers
 - Sympathy Arrangements
- Seasonal
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 - Summer Flowers
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- Prom Flowers
 - Corsages
 - Boutonnieres
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- Free Newsletter
- Contact Us
- Flower Delivery
 - Funeral Home Flower Delivery
 - Hospital Flower Delivery
- Site Map
- Link To Us

1. Billing Info. 2. Confirm

Thank you!

Your order number is **1218817**. Please record this number for future reference. We suggest that you print this order confirmation page by [clicking here](#). An email confirmation will also be sent to the billing email address that you provided during checkout.

To avoid multiple charges on your credit card, do not use your browser's Reload, Back or Forward buttons while on this order confirmation screen.

Like Be the first of your friends to like this.



Product Info

Recipient Info

Pricing



HELLO SUNSHINE!
Vase of Flowers

To be delivered on: 10/15/2012

Card Message:

Just a little something to spruce up your new digs! Chelsey, Pam, Randee, Shirley

Medicine Hat, AB. T1A 3Y6

Order Number: 1218817

Hello Sunshine!: \$55.00
Delivery: \$8.00

Sub Total: \$63.00
Taxes: \$3.15
Total: \$66.15

All prices shown in Canadian dollars



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