



## Expense Disclosure Summary

**Name** Denise Henning, PhD      **Position** President and CEO  
**Period Covered** 1 January to 31 March 2015

Please attach supporting documentation i.e.: Expense Disclosure Sheet and applicable receipts

Dates (Travel Dates if applicable)	Destination/Location	Purpose	Airfare	Other Transportation*	Accommodation	Meals	Hospitality	Incidentals	Total
1 January to 31 March 2015	Myrtle Beach, NC	1st Annual Appreciative Education Conference	\$ -	\$ -	\$ 452.45	\$ 248.58	\$ -	\$ -	\$ 701.03
January 14, 2015	Brooks, AB	Regular Brooks Visit	\$ -	\$ 96.80	\$ -	\$ -	\$ -	\$ -	\$ 96.80
January 28, 2015	Edmonton, AB	Council of Presidents	\$ 298.33	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 298.33
February 5, 2015	Brooks, AB	Brooks Campus Awards	\$ -	\$ 96.80	\$ -	\$ -	\$ -	\$ -	\$ 96.80
February 24, 2015	Brooks, AB	Regular Brooks Visit	\$ -	\$ 96.80	\$ -	\$ -	\$ -	\$ -	\$ 96.80
March 3-4, 2015	Calgary, AB	Business Case and Concept Design -	\$ -	\$ 264.00	\$ 162.41	\$ 25.20	\$ -	\$ 10.00	\$ 461.61
March 6-7, 2015	Calgary, AB	CASDC (Campus Alberta Strategic Directions Committee) Board	\$ 155.53	\$ 84.41	\$ 240.26	\$ 71.06	\$ -	\$ -	\$ 551.26
March 8, 2015	Quebec City, QC	Entrepreneurship Symposium	\$ -	\$ -	\$ 258.16	\$ 176.67	\$ -	\$ 30.00	\$ 464.83
March 24, 2015	Olds, AB	KPI Monitoring Meeting - Olds College	\$ -	\$ 259.60	\$ 172.89	\$ 21.14	\$ -	\$ 10.00	\$ 463.63
March 26, 2015	Edmonton, AB	Provincial Budget Meeting	\$ -	\$ 235.40	\$ 336.12	\$ 120.54	\$ -	\$ 20.00	\$ 712.06
March 17, 2015	Brooks, AB	Board of Governors' Meeting	\$ -	\$ 95.04	\$ -	\$ -	\$ -	\$ -	\$ 95.04
			\$ 453.86	\$ 1,228.85	\$ 1,622.29	\$ 663.19	\$ -	\$ 70.00	\$ 4,038.19

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

*This Expense Summary is true and complete to the best of my knowledge for the period indicated above.*

Signature

Denise Herring



# Expense Disclosure Sheet

Name Denise Henning      Date 1 January to 31 March 2015      Destination Myrtle Beach, NC  
Position President and CEO      Purpose 1st Annual Appreciative Education Conference

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date (m/d/year)	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total (CDN)
12/31/2015	Delta Calgary Airport	Accommodation	Hotel			212.19
1/10/2015	Delta Calgary Airport	Accommodation	Hotel			240.26
12/31/2014-11/1/2015	Food Receipts (CDN)	Meals	Meal reimbursement			138.23
12/31/2014-11/1/2015	Food Receipts (USD - 94.91)	Meals	Meal reimbursement			110.35
1/4/2015-1/7/2015	Sharon Hotels and Resorts - Myrtle Beach, NC (USD - 320.40)	Accommodation	Hotel			372.53
1/4/2015-1/7/2015	National Rental Car (USD - 460.80)	Other Transportation	Rental vehicle			535.77
12/31/2014-1/10/2015	Mileage	Other Transportation	Return mileage Medicine Hat to Calgary			259.60
12/31/2015 and 1/10/2015	Travel Claim (CDN)	Incidentals	Overnight incidental			20.00
1/4/2015-1/7/2015	Travel Claim (USD - 30)	Incidentals	Overnight incidental			34.88
12/31/2015-1/11/2015	Delta (USD - 879.97)	Airfare	Return airfare Medicine Hat, AB to Charlotte, NC			1,014.89
						-
						-
						-
				<b>Total Receipts</b>		<b>2,938.70</b>



MEDICINE HAT COLLEGE

TRAVEL CLAIM

(To be submitted upon return from travelling)

Claimant:

Name Denise Henning
Address

Meeting/Conference:

Name 1st Annual AI Education Conference

Location Myrtle Beach, SC

(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: 12/31/14 Time: 10:00 AM/PM
Return date: 1/1/15 Time: 4:00 AM/PM
Total Number of Days:

EXPENSES:

Meals

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

Overnight incidental (requires 24 hour stay) 2 @ 10.00 = 20.00

Hotel (Attach Invoice) 452.45

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

Miscellaneous (Specify) Hotel - Myrtle Beach 320.40 USD

Food Receipts - CAN 138.23

Food Receipts - USD 94.91 USD

Overnight Incidental - USD 30.00 USD

TRANSPORTATION:

Own Car 590 @ 0.44 = 259.60 (kilometres)

College Car (Attach gas receipts)

Rental Car (Attach invoice & gas receipts) 460.80 USD

Air Fare (Attach Air Line Ticket or invoice)

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

Table with columns: FOR OFFICE USE ONLY, Amount, GST. Contains handwritten totals and checkmarks.

TOTAL EXPENSE

Less - Advance Chq. March 6/15

(if applicable)

NET CLAIM DUE (Repayable)

INVOICE TOTAL

exchange 1.1627

Date

REQUEST BY: (Signature)

DEPT. CODE

DEPT. APPROVAL: (Signature)

(Signature - if Necessary)

FINANCE

Table with columns: FOR OFFICE USE ONLY, VENDOR NUMBER, CONTROL #, GL CODE, AMOUNT, GST, TOTAL.



# DELTA

## CALGARY AIRPORT

2001 Airport Road N.E., Calgary, Alberta, T2E 6Z8  
 Tel: 403-291-2600 Fax: 403-250-6121

Dr Denise Henning

Room: 428  
 Folio: 488779  
 Cashier: 57  
 Arrival: 12-31-14  
 Departure: 01-01-15

Canada

Date	Description	Additional Information	Charges	Credits
12-31-14	Room Charge		189.00	
12-31-14	Room Destination Marketing Fee		5.67	
12-31-14	Room Tourism Levy		7.79	
12-31-14	Room GST		9.73	
01-01-15	Visa	XXXXXXXXXXXXX XX/XX		212.19 ✓
<b>Total</b>			<b>212.19</b>	<b>212.19</b>
<b>Balance Due</b>			<b>0.00</b>	<b>0.00</b> CDN

GST Summary	
Reg No:807209770 RT0001	
Room	9.73
F&B	0.00
Other	0.00
<b>Total</b>	<b>9.73</b>

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.



**DELTA**  
**CALGARY AIRPORT**  
 2001 Airport Road N.E., Calgary, Alberta, T2E 6Z8  
 Tel: 403-291-2600 Fax: 403-250-6121



Dr Denise Henning

Room: 555  
 Folio: 491281  
 Cashier: 427  
 Arrival: 01-10-15  
 Departure: 01-11-15

Canada

Date	Description	Additional Information	Charges	Credits
01-10-15	In Room Dining - Dinner	CHECK# 0048337	29.15 (-4)	
01-10-15	Room Charge		214.00	
01-10-15	Room Destination Marketing Fee		6.42	
01-10-15	Room Tourism Levy		8.82	
01-10-15	Room GST		11.02	
01-11-15	In Room Dining - Breakfast	CHECK# 0048354	36.50 (-4)	
01-11-15	Visa	XXXXXXXXXXXX XX/XX		305.91
<b>Total</b>			<b>305.91</b>	<b>305.91</b>
<b>Balance Due</b>			<b>0.00</b>	<b>CDN</b>

GST Summary	
Reg No:807209770 RT0001	
Room	11.02
F&B	2.65
Other	0.00
<b>Total</b>	<b>13.67</b>

Handwritten calculation:  
 305.91  
 - 29.15  
 - 36.50  
 -----  
 240.26

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.



Check Detail

^^ [DELTA]  
 In Room Dining  
 (403) 291-2600

315 Sandy 3

-----  
 555 /1           CHK 8337 GST 1  
                   JAN10'15 7:42PM  
 -----

1 Delivery	4.00
1 All Day Breakfas	19.00
FOOD	19.00
DELIVERY	4.00
GST	1.15
Payment .....	29.15
Charge Tips	5.00
555/Henning	
ROOM CHARGE	29.15

----315 CLOSED JAN10 8:10PM----

*delivery deducted*



Check Detail

^^ [DELTA]  
 In Room Dining  
 (403) 291-2600  
 313 Roselino 3  
 -----  
 555 /1           CHK 8354   GST 1  
                   JAN11'15  6:59AM  
 -----  
 1 Delivery           4.00  
 1 Egg White Omelet   16.00  
 1 Side Onion+Mush    2.00  
 1 Bacon Strips       4.00  
 FOOD                26.00  
 DELIVERY            4.00  
 GST                  1.50  
 Payment .....      36.50  
 Charge Tips          5.00  
 555/Henning  
 ROOM CHARGE         36.50  
 -----313 CLOSED JAN11 7:19AM-----

*Delivery deducted*



Sheraton Convention Center Hotel  
 2101 N. Oak Street  
 Myrtle Beach, SC 29577  
 843-918-5000  
 http://www.sheratonmyrtlebeach.com



Dr Henning, Denise      Page Number      1      Invoice Nbr      103896  
    Guest Number      595365      Arrive Date      01-04-2015 09:43  
    Folio ID      A      Depart Date      01-07-2015

No. Of Guest      1  
 Room Number      1008  
 Club Account      SPG - A42764143366  
 Time      01-07-2015 09:15

Invoice

Date	Reference	Description	Charges	Credits
01-04-2015	RT1008	Room Revenue	\$106.80	
01-05-2015	RT1008	Room Revenue	\$106.80	
01-06-2015	RT1008	Room Revenue	\$106.80	
01-07-2015	VI	Visa		\$-320.40
		** Total	\$320.40	\$-320.40
		** Balance	\$0.00	

EXPENSE SUMMARY REPORT

Currency: USD

Date	Room & Tax	Food & Bev	Bus Center	Telephone	Other	Total	Payment
01-04-2015	\$94.08	\$0.00	\$0.00	\$0.00	\$12.72	\$106.80	\$0.00
01-05-2015	\$94.08	\$0.00	\$0.00	\$0.00	\$12.72	\$106.80	\$0.00
01-06-2015	\$94.08	\$0.00	\$0.00	\$0.00	\$12.72	\$106.80	\$0.00
01-07-2015	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$-320.40
Total	\$282.24	\$0.00	\$0.00	\$0.00	\$38.16	\$320.40	\$-320.40

As a Starwood Preferred Guest you have earned at least 504  
 Starpoints for this visit A42764143366

Thank you for choosing Starwood Hotels We look forward to  
 welcoming you back soon! Tell us about your stay. [www.sheraton.com/reviews](http://www.sheraton.com/reviews)

Tell us about your stay. [www.sheraton.com/reviews](http://www.sheraton.com/reviews)

Get 3 free weeks of personal training, because fitness and travel  
 go hand in hand. To keep you fit while traveling or at home, Sheraton has  
 partnered with world-renowned training and nutrition experts Core  
 Performance(TM). Get started at [www.sheraton.com/fitness](http://www.sheraton.com/fitness)

Continued on the next page

Sheraton Convention Center Hotel  
2101 N. Oak Street  
Myrtle Beach, SC 29577  
843-918-5000  
<http://www.sheratonmyrtlebeach.com>



Dr Henning, Denise	Page Number	2	Invoice Nbr	103896
	Guest Number	595365	Arrive Date	01-04-2015 09:43
	Folio ID	A	Depart Date	01-07-2015
	No. Of Guest	1		
	Room Number	1008		
	Club Account	SPG - A42764143366		
	Time	01-07-2015 09:15		
		Invoice		

At Sheraton, Life is Better When Shared....



**Renter Information**

**Renter Name**

DENISE HENNING

**Renter Address**

299 COLLEGE DR SE  
MEDICINE HAT, AB T1A 3Y6  
CA

**Vehicle Information**

**EDGE LTD**

License #: CLB6441  
State/Province: NC

**Vehicle Class Driven**  
FULLSIZE CROSSOVER AUTO W/ AIR

**Vehicle Class Charged**  
STANDARD SIZE SPORT/UTILITY

**Odometer Mileage/Kilometers**  
Starting: 12420.0 Ending: 12886.0  
Total: 466.0

Thank you for renting with  
National Car Rental.

We appreciate your business.

Please do not reply directly to this email. If  
you have a question or comment regarding  
your rental agreement please send it to  
customerservice@nationalcar.com

**Trip Information**

**Pickup**

Thu, Jan 1 2015 03:54 PM

CHARLOTTE  
DOUGLAS ARPT (CLT)

DOUGLAS INTL ARPT  
4108 RENTAL ROAD  
CHARLOTTE, NC 28219  
US

**Return**

Sat, Jan 10 2015 06:53 AM

FAYETTEVILLE REG  
ARPT (FAY)

FAYETTEVILLE ARPT  
2885 CORPORATE ROAD  
FAYETTEVILLE, NC 28306  
US

**Rental Charges**

<b>Rental Rate</b>	1 week at \$408.00 / week	\$408.00
	2 day at \$68.00 / day	\$136.00
<b>Add-Ons</b>	Fuel Service Option (\$42.62 / rental)	\$42.62
<b>Mileage</b>	Excess Distance Charge (466 Distance @ \$0.40)	\$186.40
<b>Taxes and Fees</b>	Concession Fee Recovery 11.11 Pct (11.11%)	\$81.51
	Contract Facility Charge 4.00/day	\$36.00
	Vehicle License Fee .36/day	\$3.24
	Hiway Use Tax (8.00%)	\$71.50
	County Gross Receipt Tax (1.50%)	\$13.41
	U Drive It Tax (5.00%)	\$44.69
	City Gross Receipt Tax (1.50%)	\$13.41
<b>Total</b>		<b>\$1036.78</b>
	(Subject to audit)	
	Amount charged on Jan 10 2015 to Visa (3518)	(\$1036.78)
<b>Amount Due</b>		(\$0.00)

1036.78 / 9 days = 115.20 x 4 days

\$ 460.80  
Conference days.

MANCHU WOK #2748  
2000 AIRPORT RD NE BOX 106  
CALGARY, AB T2E6H5  
4032910069

Merchant ID: 87522900018  
Term ID: 001

Ref #: 036

**Sale**

XXXXXXXXXX

VISA

Entry Method: Chip

12/31/14

17:20:28

Inv #: 000036

Appr Code: 013456

pprvd

Batch#: 000025

Total:

\$ 18.84

By entering a verified PIN, cardholder  
agrees to pay issuer such total in  
accordance with issuer's agreement with  
cardholder (Merchant agreement if credit  
voucher).

Retain this copy for statement  
verification.

Transaction Label: VISA

000000000031010

TVR: 00 00 00 00 00

ISI: F8 00

Customer Copy

MANCHU WOK  
CALGARY INTERNATIONAL  
AIRPORT FOOD COURT

12/31/2014 6:32PM \*\*\*  
000000#0709

2 ITEM	TI \$8.99
SEAFOOD RANGOON	TI \$1.99
SPECIAL #1	TI \$1.99
SPECIAL #1	TI \$1.99
BOTTLE WATER	TI \$2.99
BOTTLE WATER	TI \$2.99
BOTTLE WATER	TI V-2.99
REG FNTN DRINK	TI \$1.99
MDSE ST	\$17.99
GST	\$0.99

CREDIT C \$18.84

THANKYOU!

000000000031010

CDN

18.84



In Room Dining  
(403) 291-2600

5 Sandy

55/1           CHK 8337   GST 1  
JAN10'15   7:42PM

1 Delivery	4.00
1 All Day Breakfas	19.00
FOOD	19.00
DELIVERY	4.00-
GST	1.15
Total Due ..	\$24.15

GRATUITY \_\_\_\_\_

TOTAL \_\_\_\_\_

ROOM \_\_\_\_\_

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Please Pay Your Server  
GST #846543619



In Room Dining  
(403) 291-2600

313 Roselino 1

555/1           CHK 8354   GST 1  
JAN11'15   6:59AM

1 Delivery	4.00
1 Egg White Omelet	16.00
1 Side Onion+Mush	2.00
1 Bacon Strips	4.00
FOOD	26.00
DELIVERY	4.00-
GST	1.50
Total Due ..	\$31.50

GRATUITY \_\_\_\_\_

TOTAL \_\_\_\_\_

ROOM \_\_\_\_\_

PRINT NAME HENNING

SIGNATURE \_\_\_\_\_

Please Pay Your Server  
GST #846543619

55.65 - 8.00 (delivery) = 47.65

CON

HMSHOST  
TIM HORTONS B  
CALGARY INTERNATIONAL AIRPORT

297452 Harpreet

-----  
CHK 8449 GST 2  
JAN01'15 5:07AM  
-----

TO GO

1 XL COF DBL DBL X	2.00
1 BTL WTR TIMS	1.67
ECO DEPT	0.12
1 GRK YGRT VAN BRY	2.99

SUBTOTAL	6.78
TAX	0.34

AMOUNT PAID	7.12
-------------	------

XXXXXXXXXX:

VISA	7.12
------	------

--297452 Closed JAN01 05:08AM--

THANK YOU FOR YOUR BUSINESS!

TELL US ABOUT YOUR EXPERIENCE

JOHN VAN BESOUW  
JOHN.VANBESOUW@HMSHOST.COM

GST # 137512901

Your order number is: 8449

CON

HMSHOST  
MONTANAS  
CALGARY INTERNATIONAL AIRPORT

297106 Youyi

53/2

6139

DEC31'14 12:17PM

DINE IN

1 SODA BAR M 3.44  
FIRST RND SFTBEV  
DIET COKE  
1 BURG BISON CHS 17.80  
HOUSE SALAD  
RANCH  
DRESS UN SIDE

SUBTOTAL 21.24  
TAX 1.06  
AMOUNT DUE \$22.30

THANK YOU FOR YOUR BUSINESS!

TELL US ABOUT YOUR EXPERIENCE

JOHN VAN BESOUW  
JOHN.VANBESOUW@HMSHOST.COM

GST # 137512901

HMSHOST  
MONTANAS  
CALGARY INTERNATIONAL AIRPORT

CHECK: 6139  
TABLE: 53/2  
SERVER: 297106 Youyi  
DATE: DEC31'14 1:16PM  
CARD TYPE: VISA  
ACCT #: XXXXXXXXXXXX  
AUTH CODE: 090657  
DENISE HENNING

TOTAL: 22.30

TIP: 4.00

TOTAL: 26.30

X  
I AGREE TO PAY THE ABOVE AMOUNT  
IN ACCORDANCE WITH THE CARD  
ISSUER'S AGREEMENT.

CDN

22.30

# VIDALIA'S

\*\*\*\*\*  
 Sheraton Myrtle Beach Convention Center  
 2101 Oak St  
 Myrtle Beach SC 29577  
 Tel. 843-918-5000

01/05/15 12:37 PM  
 CHECK: 442551  
 Table 4 Cust 2  
 Waiter Nicole

\*\*\*\*\*

2 HOUSE SALAD @ 8.95 / each 17.90  
 ENTREE  
 2 CHEF'S SOUP @ 5.95 / each 11.90  
 BOWL  
 1 SWEET TEA @ 2.50 / each 2.50  
 1 TAZO TEA @ 2.75 / each 2.75

*1 Denise*  
*1 Denise*  
*1 Denise*

Taxable: 35.05

Sub-total: 35.05  
 Gratuity: 0.00  
 Taxes: 3.69 <sup>105</sup>

Total Due: 38.74

Tip \_\_\_\_\_

Total \_\_\_\_\_

Room # \_\_\_\_\_

Name(Print) \_\_\_\_\_

Signature \_\_\_\_\_

0.00

\*\*\*\*\*  
 \* Customer Copy \*  
 \*\*\*\*\*

Sheraton Myrtle Beach Convention Center  
 2101 Oak St  
 Myrtle Beach, SC 29577  
 843-918-5000

Date: 01/05/15  
 Time: 12:42 PM  
 Server: 57. Nicole  
 Order: 447895  
 Description: Table 4

Card Type: Visa  
 Card No: XXXXXXXXX  
 Expires: XX/XX  
 Appr Code: 051273

Purchases: \$ 38.74

Tip: \$ 5.00

Total: \$ 43.74

Signature: X \_\_\_\_\_  
 HENNING/DENISE

I agree to pay the above total amount according to the card issuer agreement.

USD  
 8.95  
 5.95  
 2.75  
 -----  
 17.90  
 tax (.105)



BUY ONE GET ONE FREE QUARTER POUNDER  
W/CHEESE OR EGG MUFFIN

Go to [www.mcdvoice.com](http://www.mcdvoice.com) within 7 days  
and tell us about your visit.

Validation Code: \_\_\_\_\_

Expires 30 days after receipt date.

Valid at participating US McDonald's.

25 TABOR CROSSING

TABOR CITY

NC

28463

!!! THANK YOU !!!

TEL# 9103773231 Store# 35021

Ch 13 Jan.04'15 (Sun) 08:48

KVS Order 73

QTY	ITEM	TOTAL
1	Fruit & Yogh Parfait	1.00
1	L Unsweet Iced Tea	1.00
	ADD 3 Solenda	
1	L Coffee	1.00
	ADD 5 Cream	
	ADD 6 Solenda	
	Subtotal	3.00
	Tax	0.20
	Take-Out Total	3.20
	Cash Tendered	4.00
	Change	0.80

McDonald's Restaurant

USD

3.20

0146

Server: JOHN B Rec: 69  
01/06/15 19:40, Swiped T: 53 Term: 2

FIESTA DEL BURRO LOCO  
960 JASON BOULEVARD  
MYRTLE BEACH, SC 29577  
(843)626-1756  
MERCHANT #:

CARD TYPE ACCOUNT NUMBER  
/ISA XXXXXXXXXXXX  
Name: DENISE HENNING  
JO TRANSACTION APPROVED  
AUTHORIZATION #: 007773  
Reference: 0106010000146  
TRANS TYPE: Credit Card SALE

CHECK: 24.64

SUGGESTED GRATUITY:  
18% 4.44  
20% 4.93

GRATUITY: : \_\_\_\_\_

TOTAL: : \_\_\_\_\_

X \_\_\_\_\_

\*\*\*Duplicate Copy\*\*\*

CARDHOLDER WILL PAY CARD ISSUER ABOVE  
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT  
TOP COPY ->SERVER

Fiesta del Burro Loco  
(843) 626-1756

0146 Table 53 #Party 0  
JOHN B SvrCk: 9 6:26p 01/06/15  
Separate checks: 2-of-6

2 DECASA MARG 9.90  
1 COMBO 3 11.95

Sub Total: 21.85  
Tax: 2.79  
Sub Total: 24.64

01/06 7:36p TOTAL : 24.64

SUGGESTED GRATUITY:  
18% 4.44  
20% 4.93

~~4.44~~  
29.08

Free Croissants at California Dreaming  
Purchase 2 entrees | show this receipt

USD.

11.95 x 12.5% tax = 1.49

11.95  
1.49 tax

13.44.



All Star Grill

Hartsfield-Jackson Airport  
Concourse D

1007 Trinesha

Tbl 301/1      Chk 4600      Gst 1  
Jan10'15 08:37AM  
\*\*\* Reprint \*\*\*

**Dine In**

1 CHZ OMEL                      10.99  
1 SIDE BACON                    2.99  
1 Coffee                            2.50

Subtotal                            16.48  
Tax                                    1.15  
County Fee                          0.33  
08:37AM Total                      17.96

Tell us about your experience.  
Email: Luke@Goldbergbagel.com,  
Thanks and have a great flight.



All Star Grill

Hartsfield-Jackson Airport  
Concourse D

Date: Jan10'15 08:52AM  
Card Type: Visa  
Acct #: XXXXXXXXX  
Card Entry: SWIPED  
Trans Type: PURCHASE  
Trans Key: BIB03333182098  
Auth Code: 070501  
Check: 4600  
Table: 301/1  
Server: 1007 Trinesha

Subtotal: 17.96

Tip: 3.00

Total: 20.98

Keep for your records  
\*CUSTOMER COPY\*

USD

20.98

HMSHOST  
F LA TAPENADE  
MSP INTERNATIONAL AIRPORT

97103 Tsedale

-----  
CHK 5982 GST 1  
JAN01'15 10:35AM  
-----

TO GO

1 WRAP TURK AVO 10.00  
1 WTR ARTC SOL M 2.90

SUBTOTAL 12.90  
TAX 0.94  
AMOUNT PAID 13.84  
XXXXXXXXXXXX)  
VISA 13.84

--97103 Closed JAN01 10:35AM--

THANK YOU FOR YOUR BUSINESS!

TELL US ABOUT YOUR EXPERIENCE

BUTCH HOWARD  
612-355-4605  
BUTCH.HOWARD@HMSSHOT.COM

Your order number is: 5982

FRESHENS  
DNC Travel Hospitality Services  
Terminal D  
POS 1-1

Tbl:0

Ref:113314

Chk:113314

Atlanta

1/10/2015 10:13 am

-----  
Btl Nestle Water 2.59  
Rg Ygrt Cup 4.49  
-----

SubTotal 7.08  
State Tax 0.50  
Co. Fee 0.08

Total 7.66

Cash 20.00

-----  
Amount Paid 20.00  
Change 12.34

Questions / Comments  
We're waiting to hear from you  
Email us at:  
DNCATLFeedback@dncinc.com

\*\*\*\*\*

DNC is looking to add more great  
talent to the Atlanta Team.  
Interested?  
Please submit your resume to  
www.dncatljobs.com.

USD.

13.84  
7.66

21.50

# CROISSANTS

BISTRO & BAKERY  
Morning · Noon · Night

\*\*\*\*\*

Croissants Bistro & Bakery  
3751 Robert Grissom Pkwy  
Myrtle Beach SC, 29577  
Phone: 843-448-2253

01/04/15 1:10 PM ORDER: 146445  
Table: 6:3 Cust: 2  
Server: 131 L. Michelle

\*\*\*\*\*

Lg Coffee	
Thompson Farm Omelette	
ADD BACON	
Crab Cake Sandwich	12.00
	-----
Sub-total:	32.00
Sales Tax:	3.35
	-----
<b>Total Due:</b>	<b>35.35</b>

*Handwritten:* Total 25.00  
Dues 15.00  
Meal 10.00

Thank you for joining our family  
at Croissants Bistro & Bakery.

Please bring back this receipt for a

FREE BOMBER SHRIMP  
with the purchase of two dinner entr

after 5pm Mon-Sat

One per table.  
May not be combined with  
any other offer.

\*\*\*\*\*  
\* Customer Copy \*  
\*\*\*\*\*

Croissants Bistro & Bakery  
3751 Robert Grissom Pkwy  
Myrtle Beach, SC, 29577  
843-448-2253

Date: 01/04/15  
Time: 1:15 PM  
Server: 131. L. Michelle  
Order: 146445  
Description: Table 6:3

Card Type: Visa/MC  
Card No: XXXXXXXXXXXX  
Expires: XX/XX  
Appr Code: 061272

Purchases: \$ 35.35

Tip: \$ 5.00

Total: \$ 40.35  
HENNING/DENISE

I agree to pay the above total amount  
according to the card issuer agreement.

USD.

*Handwritten:*  
15.00 - meal  
2.50 - coffee  
-----  
1.83 tax (MS)  
-----  
19.33

HMSHOST  
FIONN MACCOOL'S  
TORONTO PEARSON INT'L AIRPORT

309016 Lisa

-----  
106/1                      GST 1  
                            3914  
                            JAN10'15 2:11PM  
-----

DINE IN

\*\*\*\* SEAT 1 \*\*\*\*  
1 BURG GUINNESS            15.50  
  SWT POTATO FRIES        3.00  
1 SODA BAR M                3.30  
  FIRST RND SFTBEV  
21.80 HST 5% 217101       1.09  
21.80 HST 8% 217101       1.74  
AMOUNT DUE                \$24.63  
\*\*\*\*\*                    \*\*\*\*\*

SUBTOTAL                    21.80  
21.80 HST 5% 217101       1.09  
21.80 HST 8% 217101       1.74  
AMOUNT DUE                \$24.63

THANK YOU, QUESTIONS & COMMENTS  
MERCI. QUESTIONS ET COMMENTAIRES

SHARON RICE,  
SR DIRECTOR OF OPERATIONS  
#416-776-2345  
HMSHOSTYYZ@HMSHOST.COM

HST # 137512901

3323 FIONN MACCOOL'S  
2-3415 DIXIE RD #427  
MISSISSAUGA, ON L4Y4J6  
4167769768

MERCHANT ID: 16813260387    TERM ID: 004  
SERVER: 9016

**SALE**

XXXXXXXXXXXX

VISA                            ENTRY METHOD: CHIP  
01/10/15                        14:33:16  
INV #: 000042                   APPR CODE: 094834  
                                  BATCH #: 000079  
                                  REF #: 042

AMOUNT                        \$24.63  
TIP                              \$3.69  
=====

TOTAL                          \$28.32

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  
AID: A000000031010  
TVR: 00 00 00 80 00  
TSI: FB 00

USD.

28.32.

Clinton Lawrence

To USA



**From:** Delta Air Lines <DeltaAirLines@e.delta.com>  
**Sent:** Tuesday, November 25, 2014 12:54 PM  
**To:** Clinton Lawrence  
**Subject:** DENISE H CALGARY 01JAN15

Flight Receipt and Itinerary

[Comment/Complaint ?](#)

x
x
x
x
x
x

x
x

## YOUR ITINERARY AND RECEIPT

x

**Please review before your trip:**

Check in for your flight up to 24 hours prior to departure at [delta.com](http://delta.com) or with the Fly Delta app - also check flights, change seats, reserve car and hotels, and much more.

Make changes to eligible electronic tickets through My Trips at [delta.com](http://delta.com).

If you need to contact Delta for assistance please call 1-800-221-1212 or visit [delta.com/help](http://delta.com/help).

**Thanks for choosing Delta.**

Flight Confirmation #: **GGD3F2** | Ticket #: **00621895751411**

### Your Flight Information

**Thu 01JAN**

✓ LV <b>6:30am</b>	CALGARY	AR <b>10:20am</b>	MPLS-ST PAUL	<b>DELTA 4077*</b> ECONOMY (U) Snacks For Sale
✓ LV <b>11:50am</b>	MPLS-ST PAUL	AR <b>3:15pm</b>	CHARLOTTE	<b>DELTA 700</b> ECONOMY (U) Snacks For Sale

\*Flight 4077 Operated by ENDEAVOR AIR DBA DELTA CONNECTION

1

### Offset your Carbon Emissions

We have partnered with The Nature Conservancy to allow you to offset your carbon emissions for this trip. Go to [delta.com/CO2](http://delta.com/CO2) to calculate your CO2 emissions and learn more about offsetting.

### Your Flight Details [Manage Trip >](#)

Passenger Details	Flights	Seats
<b>DENISE HENNING</b> >Add SkyMiles # >Join SkyMiles	DELTA 4077 DELTA 700	<a href="#">Select Seat</a> <a href="#">Select Seat</a>

\*\*\*Visit [delta.com](http://delta.com) or use the Fly Delta app to view, select or change your seat  
If you purchased an Economy Comfort seat or a Trip Extra, please visit My Trips to access a receipt of your purchase.

### Receipt Information

#### Billing Details

<b>Passenger:</b> <b>DENISE HENNING</b>	<b>Payment Method:</b> VI*****	<b>Ticket Number:</b> <b>00621895751411</b>
<b>FARE:</b>	<b>257.50 CAD</b>	
<b>Taxes/Carrier-imposed Fees:</b>	<b>103.08</b>	
<b>Ticket Amount:</b>	<b>331.08 USD</b>	

NONREFUNDABLE/CHANGE FEE MAY APPLY

This ticket is non-refundable unless issued at a fully refundable fare. Some fares may not allow changes. If allowed, any change to your itinerary may require payment of a change fee and increased fare. Failure to appear for any flight without notice to Delta will result in cancellation of your remaining reservation.

Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply and are displayed in the sections below.

#### Details - Taxes/Carrier-imposed Fees

<b>Total:</b>	<b>103.08</b>
<b>Itemized:</b>	5.50 YC 7.00 XY 5.00 XA 8.00 ZP 5.60 AY 4.50 XF 10.70 CA 26.50 SQ 13.20 XG 17.08 US



**Fare Details**

**YYC DL X/MSP DL CLT Q7.50 250.00UA07A0NQ CAD257.50END ZP YYCMSP XF MSP4.5**

**Ticketing Details**

<b>Passenger:</b>	<b>Ticket #:</b>	<b>Place of Issue:</b>	<b>Issue Date:</b>	<b>Expiration Date:</b>
DENISE HENNING	00621895751411	VJERES	25NOV14	25NOV15

**Baggage Fees**



Thank you for being a valued customer. The fees below are based on your original ticket purchase information. If you qualify for free or discounted checked baggage, this will be taken into account when you check in.

<b>Airline Rule Applied</b>	<b>Origin</b>	<b>Destination</b>	<b>Baggage</b>			<b>Tax</b>	<b>Total</b>
<b>Thu 01 Jan 2015</b>							
<b>DELTA</b>	<b>YYC</b>	<b>MSP</b>	<b>FREE 1</b>	<b>\$25<sup>CAD</sup></b>	<b>\$35<sup>CAD</sup></b>	<b>\$0.00</b>	<b>\$60.00</b>
			CARRY ON	FIRST	SECOND		
<b>DELTA</b>	<b>MSP</b>	<b>CLT</b>	<b>FREE 1</b>	<b>FREE</b>	<b>FREE</b>	<b>\$0.00</b>	<b>\$0.00</b>
			CARRY ON	FIRST	SECOND		
Visit <a href="http://delta.com">delta.com</a> for details on baggage embargos that may apply to your itinerary.							<b>\$60.00</b>

1: On Delta-operated flights, you may carry on one bag and a small personal item free of charge. Carry-on allowances may differ and fees may apply for flights operated by carriers other than Delta. Contact the operating carrier for detailed carry-on limitations and charges.

BusinessElite/First/Business Class weight allowance reverts to 50 lbs for all checked bags beyond the regular free allowance. Travelers to/from Key West, Florida are limited to one checked bag.

At the time of check in with Delta for Delta-marketed and Delta-operated flight(s) (including Delta connection), SkyMiles Medallion® members, SkyTeam Elite & Elite Plus and active US Military personnel are eligible for fee waivers and other benefits. For more details, visit [delta.com/baggage](http://delta.com/baggage).





At the time of check in with Delta for Delta-marketed and Delta-operated flight(s) (including Delta connection), Basic Cardmembers with a Gold, Platinum, or Reserve Delta SkyMiles Credit Card from American Express are eligible for the first bag fee waiver. Waiver is only for normal bag fee, if any, for the first checked bag that is not overweight or oversize under Delta's applicable rules as set forth in Delta's contract of carriage. See [delta.com/firstbagfree](http://delta.com/firstbagfree) for more details.

A standard checked bag with Delta may be up to 50 lbs and 62 linear inches (per piece). Additional fees apply for oversize, overweight, and/or additional pieces of checked baggage. Please review Delta's baggage guidelines for details. Weight and size restrictions may vary when checking baggage on carriers other than Delta. Contact the operating carrier for detailed checked baggage allowances. You must be checked in at the gate by the applicable check-in deadlines or your reservation may be cancelled. Please review Delta's check-in requirement guidelines for details. Check-in requirements vary by airline, so if your ticket includes travel on other airlines, please check with the operating carrier on your ticket.

Do you have comments about our service? Please email us to share them.

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Delta 1-800-221-1212 | Air France 1-800-237-2747 | Alitalia 1-800-223-5730 | KLM 1-800-618-0104

			
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- Claim restrictions including time periods within which you must file a claim or bring action against us.
- Our right to change terms of the contract.
- Check-in requirements and other rules established when we may refuse carriage.
- Our rights and limits of our liability for delay of failure to perform service, including schedule change, substitution of alternative air carriers or aircraft, and rerouting.
- Our policy on overbooking flights, and your rights if we deny you boarding due to an oversold flight.

These terms are incorporated by reference into our contract with you. You may view these conditions of carriage on delta.com, or by requesting a copy from Delta.

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Clinton Lawrence

Return to Canada ✓

**From:** Delta Air Lines <DeltaAirlines@e.delta.com>  
**Sent:** Wednesday, December 17, 2014 5:35 PM  
**To:** Clinton Lawrence  
**Subject:** DENISE H FAYETTEVILLE 10JAN15



Hello, DENISE

Your Trip Confirmation #: GCLLRN

[MANAGE MY TRIP >](#)

**Sat, 10JAN**

**DEPART**

**ARRIVE**

✓ DELTA 1449  
ECONOMY (H)

FAYETTEVILLE  
7:00am

ATLANTA  
8:40am

✓ DELTA 5402\*  
ECONOMY (H)

ATLANTA  
10:52am

TORONTO  
1:00pm

✓ DELTA 7119\*  
ECONOMY (H)

TORONTO  
3:35pm

CALGARY  
5:56pm

\*Flight 5402 Operated by EXPRESSJET DBA DELTA CONNECTION  
\*Flight 7119 Operated by WESTJET As WS Flt 665

**Passenger Info**

**NAME**  
DENISE HENNING

**FLIGHT**  
DELTA 1449  
DELTA 5402  
DELTA 7119

**SEAT**  
[Select Seat](#)  
[Select Seat](#)  
[Select Seat](#)

Visit delta.com or use the Fly Delta app to view, select or change your seat.  
If you purchased an Economy Comfort seat or a Trip Extra, please visit My Trips to access a receipt of your purchase.

**Flight Receipt**

Ticket #: 00623760750012

Place of Issue: LAXWEB

Issue Date: 17DEC14

Expiration Date: 17DEC15

**METHOD OF PAYMENT**

VI\*\*\*\*\* **\$548.89 USD**

**CHARGES**

**Air Transportation Charges**

Base Fare **\$486.50 USD**

**Taxes, Fees and Charges**

United States - September 11th Security Fee(Passenger Civil Aviation Security Service Fee) (AY) **\$5.60 USD**

Canada - Airport Improvement Fee (AIF) (SQ) **\$3.40 USD**

Canada - Harmonized Sales Tax (RC) **\$.40 USD**

United States - Passenger Facility Charge (XF) **\$4.50 USD**

United States - Flight Segment Tax (ZP) **\$12.00 USD**

United States - Transportation Tax (US) **\$36.49 USD**

**TICKET AMOUNT \$548.89 USD**

**NONREFUNDABLE/CHANGE FEE MAY APPLY**

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Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply.

**Checked Bag Allowance**

The fees below are based on your original ticket purchase. **If you qualify for free or discounted checked baggage**, this will be taken into account when you check in.

Sat 10 Jan 2015	DELTA: FAY ATL	
CARRY ON	FIRST	SECOND
FREE	\$25 <sup>USD</sup>	\$35 <sup>USD</sup>

Sat 10 Jan 2015 DELTA: ATL YYZ

CARRY ON

FIRST

SECOND

FREE

FREE

FREE

Sat 10 Jan 2015

DELTA: YYZ YYC

CARRY ON

FIRST

SECOND

FREE

FREE

FREE

Visit [delta.com](http://delta.com) for details on baggage embargos that may apply to your itinerary.

**Transportation of Hazardous Materials**

Federal law forbids the carriage of hazardous materials aboard aircraft in your luggage or on your person. A violation can result in civil penalties. Examples include: Paints, aerosols, lighter fluid, fireworks, torch lighters, tear gases and compressed gas cartridges.

There are special exceptions for small quantities (up to 70 ounces total). For further information visit [delta.com](http://delta.com) Restricted Items Section.



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**CHECK OUT DELTA.COM FOR YOUR NEXT FLIGHT. ®**

Or to check in, set up flight notifications and learn more about the SkyMiles program.



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Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply.

### **Checked Bag Allowance**

\*On Delta operated flights, you may carry on one bag and a small personal item at no charge.

BusinessElite/First/Business Class weight allowance reverts to 50 lbs for all checked bags beyond regular free allowance.

At the time of check in with Delta, SkyMiles Medallion members, SkyTeam Elite & Elite Plus and active US Military personnel are eligible for fee waivers and other benefits. For more details, visit [delta.com/baggage](http://delta.com/baggage). Basic Cardmembers with a Gold, Platinum, or Reserve Delta SkyMiles Credit Card from American Express are eligible for the first bag fee waiver. More details on the program can be found at [delta.com/firstbagfree](http://delta.com/firstbagfree).

A standard checked bag with Delta may be up to 50 lbs and 62 linear inches (per piece). Additional fees apply for oversize, overweight, and/or additional pieces of checked baggage. Please review Delta's baggage guidelines for details. Weight and size restrictions may vary when checking baggage on carriers other than Delta. Contact with the operating carrier for detailed checked baggage allowances. You must be checked in at the gate by the applicable check-in deadlines or your reservation may be cancelled. Please review Delta's check-in requirement guidelines for details. Check-in requirements vary by airline, so if your ticket includes travel on other airlines, please check with the operating carrier on your ticket.

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- Claim restrictions including time periods within which you must file a claim or bring action against us.
- Our right to change terms of the contract.
- Check-in requirements and other rules established when we may refuse carriage.
- Our rights and limits of our liability for delay or failure to perform service including schedule change, substitution of alternative air carriers or aircraft, and rerouting.
- Our policy on overbooking flights, and your rights if we deny you boarding due to an oversold flight.

These terms are incorporated by reference into our contract with you. You may view these conditions of carriage on [delta.com](http://delta.com), or by requesting a copy from Delta.

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## Expense Disclosure Sheet

Name      Denise Henning, PhD      Date      January 14, 2015      Destination      Brooks, AB  
Position      President and CEO      Purpose      Regular Brooks Visit

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
1/14/2015	Travel Claim	Other Transportation	Return mileage from Medicine Hat to Brooks, AB			96.80
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>96.80</b>



# MEDICINE HAT COLLEGE TRAVEL CLAIM



**CLAIMANT**

Name: Denise Hening  
Address:

**MEETING/CONFERENCE**

Name: Regular Brooks Visit  
Location: Brooks, AB

**DAYS INVOLVED | 0.25 |**

Departure date: Jan 14 2015 9:00AM  
Return date: Jan 14 2015 3:00PM

**EXPENSES**

Meals	Days Rate Total
Breakfast	0 @ \$10.00 = \$0.00
Lunch	0 @ \$12.00 = \$0.00
Dinner	0 @ \$22.00 = \$0.00
Full Per diem	0 @ \$44.00 = \$0.00
Overnight incidental	0 @ \$10.00 = \$0.00
Hospitality Allowance	0 @ \$20.00 = \$0.00
Conference Cost	\$0.00
Hotel (attach invoice)	\$0.00
Miscellaneous	\$0.00
	\$0.00

**FOR OFFICE USE ONLY**

Amount	GST

**TRANSPORTATION**

Own Car	220 KM @ 0.44/KM	\$96.80
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$0.00


CND \$96.80  
USD \$0.00 \*\$1.00/CND

**INVOICE TOTAL**

**TOTAL EXPENSE \$96.80**  
Less - Advance (if applicable) -\$0.00  
**NET CLAIM DUE (Repayable) 96.80**

**FOR OFFICE USE ONLY**

**VENDOR NUMBER**

**CONTROL  
03 - 7642**

GL CODE	AMOUNT	GST	TOTAL

**Written Signatures**

Request By *Clarence for D. Hening*  
Department Signatures (if Necessary Signature) *J. Hening*

Department Code 12000-9240.  
Finance: \_\_\_\_\_

**Electronic Signatures**

Active Directory CLawrence@mhc.ab.ca



## Expense Disclosure Sheet

Name Denise Henning, PhD      Date January 28, 2015      Destination Edmonton, AB  
Position President and CEO      Purpose Council of Presidents

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
1/28/2015	Air Canada	Airfare	Return flight from Medicine Hat, AB to Edmonton, AB.			298.33
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>298.33</b>

# Itinerary / Receipt

Your booking is confirmed. Thank you for choosing Air Canada.  
**Please bring your itinerary-receipt to the airport.**

**Main Contact Information**

**Booking reference: PD3AN5**

**Name:** Dr Denise Henning  
**E-mail:** CLAWRENCE@MHC.AB.CA  
**Form of payment:** CCVXXXXXXXXXXXXX  
 CC VXXXXXXXXXXXXX

**Customer Care**  
**Air Canada Reservations**  
 1-888-247-2262

**Air Canada Flight Information**  
 1-888-422-7533

International Reservations

Alert me of flight changes  
Flight notification

**Flight Itinerary**

Flight	From	To	Aircraft	Cabin (Booking class)	Status
AC7230	Medicine Hat (YXH)	Calgary (YYC)	BEH	Economy (W)	Confirmed
<i>Operated by:</i>	Wed 28-Jan 2015	Wed 28-Jan 2015			
<i>Air Canada Express- Air Georgian</i>	05:20	06:23			
Seat number(s) requested:	2B				
AC8132	Calgary (YYC)	Edmonton International (YEG)	DH3	Economy (W)	Confirmed
<i>Operated by:</i>	Wed 28-Jan 2015	Wed 28-Jan 2015			
<i>Air Canada Express- Jazz</i>	07:30	08:30			
Seat number(s) requested:	6D				

Flight	From	To	Aircraft	Cabin (Booking class)	Status
AC8151	Edmonton International (YEG)	Calgary (YYC)	DH4	Economy (V)	Confirmed
<i>Operated by:</i>	Wed 28-Jan 2015	Wed 28-Jan 2015			
<i>Air Canada Express- Jazz</i>	16:00	16:53			
Seat number(s) requested:	7C				
AC7235	Calgary (YYC)	Medicine Hat (YXH)	BEH	Economy (V)	Confirmed
<i>Operated by:</i>	Wed 28-Jan 2015	Thu 29-Jan 2015			
<i>Air Canada Express- Air Georgian</i>	23:55	00:50			
Seat number(s) requested:	2B				

## Passenger Information

		<b>Passenger 1</b>	
Name:	<b>Dr Denise Henning</b>	Ticket number:	<b>014 2143 790136</b>
Frequent Flyer Pgm:	Air Canada Aeroplan	Program number:	

## Purchase Summary

**Passenger: 1 Ticket number 014 2143 790136**

<b>Date of issue</b>	19-Jan 2015
<b>Fare Amount in Canadian dollars:</b> <i>(including navigational &amp; other charges)</i>	398.00
<b>Taxes, Fees &amp; Charges</b>	
Canada Security Charge (CA)	7.13
Canada Goods and Services Tax (GST/HST #10009-2287) (XG)	11.70
Canada Airport Improvement Fee (SQ)	30.00
<b>Total Fare in Canadian dollars:</b>	245.83A
<b>Options</b>	
Change fee in Canadian dollars	50.00
Canada Goods and Services Tax (GST/HST #10009-2287) (XG)	2.50

Ticket particularities:  
AC ONLY/NON-REF/CHGE FEE

\*Fare calculation:



## Expense Disclosure Sheet

Name Denise Henning, PhD      Date February 5, 2015      Destination Brooks, AB  
Position President and CEO      Purpose Brooks Campus Awards

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
2/5/2015	Travel Claim	Other Transportation	Return mileage from Medicine Hat to Brooks, AB.			96.80
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>96.80</b>

**MEDICINE HAT COLLEGE TRAVEL CLAIM**

**CLAIMANT**

Name: Denise Henning

Address:

**MEETING/CONFERENCE**

Name: Brooks Campus Awards

Location: Brooks, AB



**DAYS INVOLVED [ 0.21 ]**

Departure date Feb 5 2015 8:00AM

Return date Feb 5 2015 1:00PM

**EXPENSES**

	Days	Rate	Total
Meals			
Breakfast	0	@ \$10.00	= \$0.00
Lunch	0	@ \$12.00	= \$0.00
Dinner	0	@ \$22.00	= \$0.00
Full Per diem	0	@ \$44.00	= \$0.00
Overnight incidental	0	@ \$10.00	= \$0.00
Hospitality Allowance	0	@ \$20.00	= \$0.00
Conference Cost			\$0.00
Hotel (attach invoice)			\$0.00
Miscellaneous			\$0.00
			\$0.00
			\$0.00

**FOR OFFICE USE ONLY**

Amount                      GST


**TRANSPORTATION**

Own Car	220 KM @ 0.44/KM	\$96.80
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$0.00


CND \$96.80

USD \$0.00 \*\$1.00/CND

**TOTAL EXPENSE \$96.80** ✓

Less - Advance (if applicable) -\$0.00

**NET CLAIM DUE (Repayable) 96.80**

**INVOICE TOTAL**

**FOR OFFICE USE ONLY**

**VENDOR NUMBER**

**CONTROL**

GL CODE

AMOUNT

GST

03 - 7381

TOTAL





**Written Signatures**

Request By

*Denise Henning*

Department Code

12000-9240

Department Signatures  
(If Necessary Signature)

*J. H. [Signature]*

Finance:

\_\_\_\_\_

**Electronic Signatures**

Active Directory

CLawrence@mhc.ab.ca



## Expense Disclosure Sheet

Name Denise Henning, PhD      Date February 24, 2015      Destination Brooks, AB  
Position President and CEO      Purpose Regular Brooks Visit

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
2/24/2015	Travel Claim	Other Transportation	Return mileage from Medicine Hat to Brooks, AB.			96.80
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>96.80</b>

# MEDICINE HAT COLLEGE TRAVEL CLAIM



**CLAIMANT**  
Name: Denise Henning  
Address:

**MEETING/CONFERENCE**  
Name: Brooks Campus Visit/Town Hall  
Location: Brooks, AB

**DAYS INVOLVED [ 0.29 ]**

Departure date Feb 24 2015 8:00AM  
Return date Feb 24 2015 3:00PM

**EXPENSES**

Meals	Days	Rate	Total
Breakfast	0	@ \$10.00	= \$0.00
Lunch	0	@ \$12.00	= \$0.00
Dinner	0	@ \$22.00	= \$0.00
Full Per diem	0	@ \$44.00	= \$0.00
Overnight incidental	0	@ \$10.00	= \$0.00
Hospitality Allowance	0	@ \$20.00	= \$0.00
Conference Cost			\$0.00
Hotel (attach invoice)			\$0.00
Miscellaneous			\$0.00
			\$0.00
			\$0.00

**FOR OFFICE USE ONLY**

Amount GST

Amount	GST

**TRANSPORTATION**

Own Car	220 KM @ 0.44/KM	\$96.80
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$0.00

CND \$96.80  
USD \$0.00 \*\$1.00/CND

**INVOICE TOTAL**

**TOTAL EXPENSE \$96.80**  
**Less - Advance (if applicable) -\$0.00**  
**NET CLAIM DUE (Repayable) 96.80 ✓**

**FOR OFFICE USE ONLY**

**VENDOR NUMBER**

**CONTROL**  
**03 - 7451**

GL CODE	AMOUNT	GST	TOTAL

**Written Signatures**

Request By Denise Henning Department Code \_\_\_\_\_  
Department Signatures (If Necessary Signature) Denise Henning Finance: \_\_\_\_\_

**Electronic Signatures**

Active Directory CLawrence@mhc.ab.ca





# Expense Disclosure Sheet

**Name** Denise Henning, PhD

**Date**

March 3-4, 2015

Sport and Wellness Business  
Case and Concept Design -  
Stantec

**Position** President and CEO

**Purpose**

**Destination** Calgary, AB

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
3/3/2015	Travel Claim	Other Transportation	Return mileage from Medicine Hat to Calgary, AB.			264.00
3/3/2015	Best Western Premier Inn and Suites	Accommodation	Hotel			162.41
3/3/2015	Travel Claim	Incidentals	Overnight incidental			10.00
3/3/2015	Travel Claim	Meals	Meal allowance			25.20
3/3/2015	Travel Claim	Other Transportation	taxi			14.00
						-
						-
						-
						-
						-
					<b>Total Receipts</b>	<b>475.61</b>



# Best Western PREMIER Freeport Inn & Suites

GST #13178 8788 RT0007

86 Freeport Blvd NE

Calgary, AB T3J 5J9

Telephone: (403)264-9650 Fax: (403)264-9651

Mar 04, 2015

2:08 am

Each Best Western® branded hotel is independently owned and operated.

DENISE HENNING  
299 COLLEGE DRIVE SE  
MEDICINE HAT, AB T1A 3Y6

Folio #: 111572  
Room Number: 211  
Rate: \$149.00  
Pay Method:

Arrival Date: Tuesday, March 03, 2015

Departure Date: Wednesday, March 04, 2015

Member #:

Information: RESERVATION MULTIPLE SEGMENT

Date	Department	Reference	Voucher	Room	Debit	Credit
3/3/2015	ROOM CHARGE	Auto Posted		211	\$149.00	
3/3/2015	ROOM GST	Auto Posted		211	\$7.45	
3/3/2015	ROOM TAX	Auto Posted		211	\$5.96	

Balance:

I agree that my liability for all charges 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 amount of these charges. Interest will be charged on any overdue balance.

I am aware that all personal information collected about me, with the exception of my credit card number, will be stored in the computer for the purpose of proficiency with my next reservation.

Signature \_\_\_\_\_

# Tim Hortons

Always Fresh.  
Always There. Since 1964

1 Extra Large Cafe Mocha	\$2.76	
1 Strawberry Greek Yogurt	\$2.99	
Subtotal:	\$5.75	
GST:	\$0.29 PST:	\$0.00
GrandTotal:	\$6.04	
Visa:	\$6.04	
Change Due:	\$0.00	
Take Out	# 331	100 Cashier

Thanks for stopping by!  
Tell us how we did at  
[www.telltimhortons.com](http://www.telltimhortons.com) 1-888-601-1616  
Wed Mar 4, 2015 17:18:41  
Receipt #: 6564533  
GST #818007643

\*\*\*\*\*  
Card Entry:CHIP Sequence:000036  
Trans Type:Purchase \$6.04  
Term #: 203  
Application Label: VISA  
AID #: A0000000031010  
BIN #: 0000008000  
FOL #: F800  
Auth #:051788 APPROVED

By entering a verified PIN, cardholder agrees  
to pay issuer such total in accordance with issuers  
Agreement with CardHolder.

Guest Copy

REPRINT RECEIPT

## PALLISER SQUARE

### Payment Receipt

Location name: POF 3 West

Time: 3/4/15 10:47 AM  
Payment date: 3/4/15 12:00 PM

Card no.: 5110933880240000

Amount: CAD 14.00

Reduction: CAD 0.00  
Paid with: CAD 20.00

Auth: [Signature] @  
C [Signature] d [Signature]



**OLIVE GARDEN 4345**  
 333 36th Street NE  
 Calgary, AB T2A7R4

Check # :20052

**Table 204**

Jan P  
 20:31:25 03/03/2015 Gst 1

Guest No.2

1 Water  
 1 Soup & Salad 13.49  
 1 Fagioli  
 1 Garden Salad

**TD # 9895 36680 6307**

\*\*\*\*\*  
 \* We value your opinion. Please \*  
 \* tell us about your dining \*  
 \* experience by completing an \*  
 \* online survey within 7 days of \*  
 \* your visit. You could win a \*  
 \* \$1,000 Grand Prize or 1 of 100 \*  
 \* \$50 prizes. Winners are drawn \*  
 \* monthly!! \*  
 \* \*  
 \* To complete the survey and enter \*  
 \* the contest, go to \*  
 \* www.OliveGardenSurvey.com and \*  
 \* enter the ID on this receipt. \*  
 \* NO PURCHASE NECESSARY. Void where \*  
 \* prohibited. See Official Rules at \*  
 \* www.OliveGardenSurvey.com. \*  
 \* \*  
 \* Valoramos su opinión. Complete la \*  
 \* encuesta sobre su experiencia \*  
 \* gastronómica en \*  
 \* www.OliveGardenSurvey.com. \*  
 \* \*  
 \*\*\*\*\*  
 (OFFER EXPIRES Mar 10, 2015)

Subtotal 13.49  
 GST 0.67

20:31:25 03/03/2015

Please pay this amount  
**Total 14.16**

Add A Gift Card \$\_\_\_\_\_

**Dine In**

THANKS FOR VISITING US TODAY!

Chris Watson  
 GENERAL MANAGER  
 (403) 248-1020

GST Number - 899457675RT-----

**OLIVE GARDEN 4345**  
 333 36th Street NE  
 Calgary, AB T2A7R4

Check # : 20052

**Table 204**

Jan P  
 20:35:58 03/03/2015  
 Transaction #: 810094933

Card Number \*\*\*\*\*  
 Auth C 067  
 Visa

Amount 14.16

Tip 5.00  
 Total 19.16

✓

## Expense Disclosure Sheet

<b><u>Name</u></b>	Denise Henning, PhD	<b><u>Date</u></b>	March 6-7, 2015
<b><u>Position</u></b>	President and CEO	<b><u>Purpose</u></b>	CASDC (Campus Alberta Strategic Directions Committee) Board Chairs and Presidents
		<b><u>Destination</u></b>	Calgary, AB

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
3/6/2015	Travel Claim	Airfare	Flight from Medicine Hat to Calgary, AB			155.53
3/6/2015	Delta Calgary Airport	Accommodation	Hotel			240.26
3/6/2015	Travel Claim	Other Transportation	Taxis			84.41
3/6/2015	Travel Claim	Meals	Meal allowance			71.06
3/6/2015	Travel Claim	Incidentals	Overnight incidental			10.00
						-
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>561.26</b>

# MEDICINE HAT COLLEGE TRAVEL CLAIM



**CLAIMANT**  
Name: Denise Henning

**MEETING/CONFERENCE**  
Name: CASDC (Campus Alberta Strategic Directions Committee) Board Chairs and Presidents  
Location: Calgary, AB

Address:

**DAYS INVOLVED [ 1.04 ]**

Departure date Mar 6 2015 5:00AM  
Return date Mar 7 2015 6:00AM

**EXPENSES**

**FOR OFFICE USE ONLY**

Meals	Days	Rate	Total
Breakfast	0 @	\$10.00	= \$0.00
Lunch	0 @	\$12.00	= \$0.00
Dinner	0 @	\$22.00	= \$0.00
Full Per diem	0 @	\$44.00	= \$0.00
Overnight incidental	1 @	\$10.00	= \$10.00 ✓
Hospitality Allowance	0 @	\$20.00	= \$0.00
Conference Cost			\$0.00
Hotel (attach invoice)			\$240.26 ✓
Miscellaneous	Food Receipts (in accordance with policy)		\$71.06 ✓
			\$0.00
			\$0.00

Amount	GST

**TRANSPORTATION**

Own Car	0 KM @ 0.44/KM	\$0.00
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$84.41 ✓

CND \$405.73  
USD \$0.00 \*\$1.00/CND

**TOTAL EXPENSE \$405.73**  
Less - Advance (if applicable) -\$0.00  
**NET CLAIM DUE (Repayable) 405.73**

**INVOICE TOTAL**

**FOR OFFICE USE ONLY**

**VENDOR NUMBER**

**CONTROL**  
**03 - 7494**

GL CODE	AMOUNT	GST	TOTAL

**Written Signatures**

Request By

Department Code

12000-9240-

Department Signatures  
(If Necessary Signature)

Finance:

\_\_\_\_\_

**Electronic Signatures**

Active Directory CLawrence@mhc.ab.ca

CHECKER/YELLOW CAB  
316 MERIDIAN ROAD SE  
CALGARY, AB T2A 1X2

316 MERIDIAN ROAD SE  
CALGARY, AB T2A 1X2

Merchant ID: 43276500  
Driver ID: 6348  
Record Num.: 0002

TERMINAL ID: 314-635 319  
MERCHANT ID: 43276 341  
VEHICLE ID: 8 52  
DRIVER ID: 3 22  
GST ACCOUNT #: 8616 73 47  
TRIP NUMBER: 2145  
PASSENGERS:

**Sale**

05/06/2015  
START: 13:32  
DISTANCE: 189.00  
END: 13:42  
RATE: 1

Application Label: VISA

XXXXXXXXXXXXXXXXXX

Card: 800000000000000031010

VISA Entry Method: Chip

FARE AMOUNT: \$ 36.20

TAX AMOUNT: \$ 1.43  
TIP AMOUNT: \$ 5.43

Amount: \$ 36.20  
Tip: \$ 5.43

**TOTAL : \$ 42.78**

**Total: CAD\$ 41.63**

CGA SALE :

APPROVAL NUMBER : 068125

\*\*\*PASSENGER COPY\*\*\*

05/03/06 07:36:18

Resp Code: 00

CVV: 0000000000  
IST: F800

Inv#: 000262 Appr Code: 085643

Apprvd: Online Batch#: 000159

TRN Ref #: 305065525781344

THANK YOU  
1-800-299-9999  
WWW.THECHECKRGROUP.COM



Taxi from airport to  
McDougal Centre

Taxi from McDougall Centre  
to Airport hotel.

84.41 ✓





# DELTA

## CALGARY AIRPORT

2001 Airport Road N.E., Calgary, Alberta, T2E 6Z8  
 Tel: 403-291-2600 Fax: 403-250-6121

CAUBO CDN ASSOC UNIVERSITY  
 Dr Denise Hennina

Canada

Room: 635  
 Folio: 503655  
 Cashier: 140  
 Arrival: 03-06-15  
 Departure: 03-07-15

Date	Description	Additional Information	Charges	Credits
03-06-15	Room Charge		214.00	
03-06-15	Room Destination Marketing Fee		6.42	
03-06-15	Room Tourism Levy		8.82	
03-06-15	Room GST		11.02	
03-07-15	Visa	XXXXXXXXXXXX3518 XX/XX		240.26
<b>Total</b>			<b>240.26</b>	<b>240.26</b> ✓
<b>Balance Due</b>			<b>0.00</b>	<b>0.00</b> CDN

GST Summary	
Reg No:807209770 RT0001	
Room	11.02
F&B	0.00
Other	0.00
<b>Total</b>	<b>11.02</b>

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.

SALE RECEIPT  
 Store #15049 tko 03/06/15 15:58:07  
 Subway Sandwiches & Salads  
 Calgary International Airport  
 Calgary  
 Phone: 403-291-2398  
 Trans# 248 Clerk 1 Dwr 1 TRDT 0306  
 Receipt # 0000654617 Reg-ID REG-MAIN  

ITEM	QTY	PRICE	MEMO	PLU
Subway Sandwich	1	T \$ 1.50		265
Parfait	1	T \$ 2.30		257
Rounding	1	\$ 0.00		55

SUBTOTAL \$ 3.80  
 GST \$ 0.19  
 TAKE-OUT \*\*TOTAL \$ 3.99  
 CredCardAMT TEND \$ 3.99  
 CHANGE DUE \$ 0.00

How'd you like your sandwich?  
 Take out or dine in? [www.subway.com](http://www.subway.com)

SUBWAY SANDWICHES  
 109-2000 AIRPORT RD.  
 N.E.  
 CALGARY AB

CARD \*\*\*\*\*  
 CARD TYPE VISA  
 DATE 2015/03/06  
 TIME 4494 16:04:03  
 RECEIPT NUMBER  
 0741378-001-317-149-0

PURCHASE  
 TOTAL

**\$3.99**

000000031010  
 4755A8B515DE46  
 0008000-E800  
 A16262BF0D0E6  
 0000008000-F800

**APPROVED**

AUTH# 021560 01-C27  
 THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS

3.99

JAPANESE  
**GORO+GUN**  
 NOODLEBAR

Goro+Gun  
 #245 225 7th Ave SW  
 Calgary AB, T2P 2W3  
 403-237-5596  
 GST# 82485 3840 RT0001

5007 AM BAR C

tbl 23/1	Chk 7859	Gst 1
	DENISE	
	Mar06'15 12:32PM	
-----		
1 Cold Tea		7.00
1 Spicy Tuna		12.00
1 Yam Tempura		8.00
Subtotal		27.00
	27.00 GST	1.35
Amount Due		<b>28.35</b>

Thanks for Dining With Us!

\*\*PLEASE PAY SERVER\*\*

GORO & GUN  
 245 225 SW 7th Avenue  
 Calgary, AB  
 T2P 2W3  
 403-237-5596

\*\* TRANSACTION RECORD \*\*

Tran. #: 23177  
 RUC: Main Floor  
 Table #: 23  
 Check #: 7859  
 Group #: 1  
 Employee #: 5007  
 Employee Name: AM BAR

VISA Pre-Aut  
 xxxxxxxxxxxx  
 MID: A0000000031010

Amount	\$28.35
Tip	\$4.26
-----	
TOTAL CAD	\$32.61

APPROVED 004436  
 00-001 004436  
 GOROWS03/GOROWC03  
 040001001006  
 2015/03/06 12:53:48

TUR: 0000008000  
 TSI: F800

Customer Copy

32.61

Edo Japan  
 #Calgary Airport  
 Calgary, Alberta  
 GST#821893211  
 Your Guest # Is 239  
 Take Out  
 Trans#: 518239 Serv: Supervisor  
 03/05/2015 04:10:16 PM #Cust:1

Quan	Description	Cost
1	Teriyaki Chicken	\$8.00
1	No Rice All Veg	\$0.00
Net Total:		\$8.00
GST		\$0.40
TIP:		\$0.00
<b>TOTAL:</b>		<b>\$8.49</b>
CHANGE -		\$0.00

Visa

EDO JAPAN - YYC  
 42, 2000 AIRPORT RD NE  
 CALGARY AB

CARD \*\*\*\*\*  
 CARD TYPE VISA  
 DATE 2015/03/06  
 TIME 1331 16:00:56  
 RECEIPT NUMBER  
 C84050413-001-326-097-0

PURCHASE  
 TOTAL  
**\$8.49**

VISA  
 A0000000031010  
 FB30B2A608A4AC4C  
 0000008000-E800  
 F77343EBF7AD1287  
 0000008000-F800

**APPROVED**  
 AUTH# 017346 01-027  
 THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
 COPY FOR YOUR RECORDS

8.49,



DELTA BOW VALLEY BISTRO  
GST #R826085417

DELTA BOW VALLEY  
209 4TH AVENUE S E  
CALGARY AB T2G 0C6  
4032661980

ISS JULIE

ISS /1 CHK 4973 GST 1  
MAR06'15 7:47AM

1 HEART SMART 17.00  
1 COFFEE 4.50  
SUBTOTAL ..... 21.50  
GST 1.08  
TOTAL DUE .. \$22.58

CASH TENDERS \_\_\_\_\_

TOTAL \_\_\_\_\_

ROOM # \_\_\_\_\_

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Share Your Experience  
www.dinedelta.com

**SALE**

SALE #: 000113  
A4297982 REF#: 000001  
#: 210 SEQ: 210001001  
15 08:27  
CVC: 1

CODE: 017839

AMOUNT \$22.58  
TAX \$3.39  
TOTAL \$25.97

00 - APPROVED - 001

VISA  
AID: A0000000031010  
TVR: 00 00 00 80 00  
TSI: F8 00

Share Your Experience  
www.dinedelta.com

# Itinerary / Receipt

Your booking is confirmed. Thank you for choosing Air Canada.  
**Please bring your Itinerary-receipt to the airport.**

## Main Contact Information

**Booking reference: LCKNBA**

**Name:** Dr Denise Henning  
**E-mail** CLAWRENCE@MHC.AB.CA  
**Form of payment:** CC VIXXXXXXXXXXX

**Customer Care**  
**Air Canada Reservations**  
 1-888-247-2262  
**Air Canada Flight Information**  
 1-888-422-7533

International Reservations

Alert me of flight changes  
Flight notification

## Flight Itinerary

Flight	From	To	Aircraft	Cabin (Booking class)	Status
AC7230	Medicine Hat (YXH)	Calgary (YYC)	BEH	Economy (L)	Confirmed
<i>Operated by:</i>	Fri 06-Mar 2015	Fri 06-Mar 2015			
<i>Air Canada Express- Air Georgian</i>	05:20	06:23			

## Passenger Information

**Passenger 1**  
**Name:** Dr Denise Henning **Ticket number:** 014 2145 285173

## Purchase Summary

**Passenger: 1 Ticket number 014 2145 285173**

<b>Date of Issue</b>	24-Feb 2015
<b>Fare Amount in Canadian dollars:</b> <i>(including navigational &amp; other charges)</i>	141.00
<b>Taxes, Fees &amp; Charges</b>	
Canada Security Charge (CA)	7.12
Canada Goods and Services Tax (GST/HST #10009-2287) (XG)	7.41

**Total Fare in Canadian dollars:**

155.53

Ticket particularities:  
AC ONLY/NON-REF/CHGE FEE

\*Fare calculation:

06MAR15YXH AC YYC Q12.00R129.00CAD141.00 END ROE1.00

Canadian tax registration numbers:

XG Canada Goods and Service Tax (GST) #10009-2287

RC Canada Harmonized Sales Tax (HST) #10009-2287

XQ Quebec Sales Tax (QST) #1000-043-172

## Fare Rules Summary

- Voluntary changes to your itinerary may require the payment of additional fees and fare upgrades.
- If you are travelling on a non-refundable ticket, Air Canada will be unable to make exceptions in the event of an unexpected trip cancellation or medical emergency. We recommend the purchase of travel insurance.
- Tickets are non transferable and name changes are not permitted.
- Advance seat assignments are not guaranteed and may be changed without notice. If your pre-assigned seat is unavailable, we will try to accommodate you in a comparable seat in the same class of service and will refund any applicable refundable fees.

Please read important information and notices regarding Air Canada's [general conditions of carriage](#).

## Baggage Information

Please see below for details on the bags you plan on checking at the baggage counter.

<b>Baggage Information for: Dr Denise Henning</b>	
Air Canada Baggage Rules Apply For Flights: AC7230	1st bag: \$25.00 CAD + taxes* per direction 2nd bag: \$25.00 CAD + taxes* per direction
Max. weight per bag: 23 KG (50 lb)	Max. linear dimensions: 158 CM (62 in)

\* For travel within Canada or between Canada and the United States, a Canadian tax of \$3.00 CAD may apply to 1st and 2nd bags fees. For travel between Canada or the United States and Mexico, the Dominican Republic and Barbados, an applicable local sales tax of \$4.00 CAD may apply to the 2nd bag fee. For all other itineraries to/from Mexico, the Dominican Republic and Barbados as well as itineraries to/from South America, an applicable local sales tax of \$21.00 CAD may apply to the 2nd bag fee. All above tax amounts are based on the maximum applicable tax amounts per itinerary type. Actual amounts may vary and will be charged in the currency used in your departure airport. Tax amounts are subject to change without notice by local government.

Customers may be reassessed checked baggage fees when itineraries include an enroute stopover in excess of 24 hours.

## Baggage Policy

### Baggage Allowance for Altitude and Star Alliance Members

Baggage check-in must occur with Air Canada, Air Canada Express (flights operated by Jazz, Sky Regional, Air Georgian, Exploits Valley Air) or Air Canada rouge. Air Canada Altitude status level must be valid at time of check-in to qualify for waiver of charges related to baggage.

<b>Frequent Flyer Status</b>	<b>Economy Class</b>	<b>Premium Economy</b>	<b>Business Class</b>
------------------------------	----------------------	------------------------	-----------------------





# MEDICINE HAT COLLEGE TRAVEL CLAIM

**CLAIMANT**

Name: Denise Henning  
Address:

**MEETING/CONFERENCE**

Name: CICan Preconference Entrepreneurship Symposium  
Location: Quebec City, QC



**DAYS INVOLVED [ 0.33 ]**

Departure date Mar 10 2015 8:00AM  
Return date Mar 10 2015 4:00PM

**EXPENSES**

Meals	Days	Rate	Total
Breakfast	0	@ \$10.00	= \$0.00
Lunch	0	@ \$12.00	= \$0.00
Dinner	0	@ \$22.00	= \$0.00
Full Per diem	0	@ \$44.00	= \$0.00
Overnight incidental	3	@ \$10.00	= \$30.00 ✓
Hospitality Allowance	0	@ \$20.00	= \$0.00
Conference Cost			\$0.00
Hotel (attach invoice)			\$0.00
Miscellaneous		Food Receipts (in accordance with policy)	\$176.67 ✓
			\$0.00
			\$0.00

**FOR OFFICE USE ONLY**

Amount	GST

**TRANSPORTATION**

Own Car	0 KM @ 0.44/KM	\$0.00
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$78.25 ✓

CND \$284.92  
USD \$0.00 \*\$1.00/CND

**TOTAL EXPENSE \$284.92**  
Less - Advance (if applicable) -\$0.00  
**NET CLAIM DUE (Repayable) 284.92**

**INVOICE TOTAL**

**FOR OFFICE USE ONLY**

GL CODE

**VENDOR NUMBER**

AMOUNT

GST

**CONTROL**

03 - 7495	TOTAL

**Written Signatures**

Request By Denise Henning Department Code 12000-9240  
 Department Signatures (if Necessary Signature) [Signature] Finance: \_\_\_\_\_

**Electronic Signatures**

Active Directory CLawrence@mhc.ab.ca

TAXIS COOP QUEBEC  
496 2E AVE  
QUEBEC QC  
TAXI # 101

TERMINAL ID.: 008925000019213753471  
MERCHANT #: 0019213753

VISA CSH: 101  
\*\*\*\*\* EXP: \*\*/\*\*\*\* CHIP

EMU SALE  
BATCH: 000157 INU: 001132  
Mar 09, 2015 04:52  
TRANSACTION TIME: 04:51

0000000031010  
00 00 00 00  
00  
49FD2CCC2CCFE  
AUTH: 0756

DEBIT AMT \$34.00  
TIP \$5.00

AT 075618

HEINING

BY ENTERING A VERIFIED PIN, CARDHOLDER  
AGREES TO PAY ISSUER SUCH TOTAL IN  
ACCORDANCE WITH ISSUER'S AGREEMENT WITH  
CARDHOLDER

TAXIS COOP 525-5191  
NOTRE FORCE  
C'EST NOTRE NOMBRE  
PS506277

CUSTOMER COPY

TAXIS STE-FOY SILLERY ASS COOP  
2631 BOUL DU VERSANT NORD  
QUEBEC QC G1V 1A3  
418-653-7777

Card Id: 36301914  
Card No: 0000560  
SA PURCHASE  
CREDIT  
Label: VISA  
0000000031010  
0000000000  
F000  
#: XXXXXXXXXXXX

APPROVED 000  
THANK YOU

TOTAL AMOUNT \$39.00

Signature required

Seq. #: 1000619 D  
Auth. #: 011423  
TC: 299230500430001E  
TS: 20150307151703  
Date: 2015/03/07 Time: 15:16:57

\*\*\*CUSTOMER COPY\*\*\*

taxi to hotel from  
airport.

taxi from from hotel  
to airport

78.25

CHILI'S TEXAS GRILL  
2000 Airport Road NE  
(403) 250-2072

Server: Lam 6082                      03/09/2015  
Table 51/1                              12:55 PM  
Guests: 1                                40096  
Menu: Server

We invite you to complete our  
GUEST EXPERIENCE SURVEY  
YOU COULD WIN \$1000  
A WINNER EVERY WEEK  
Visit [www.go-chilis.com](http://www.go-chilis.com)  
YOUR SURVEY CODE: 4011

Please enter within the next 72 Hrs. No  
purchase necessary. Must be 18 or older.  
Valid where prohibited. See website for  
complete rules and sweepstakes details.

iced TEA                                2.99  
Green ENCHILADA SOUP BWL        5.99  
Complete Subtotal                    8.98

Subtotal                                8.98  
Tax                                        0.45  
Total                                      9.43

Balance Due                    \$ 9.43

Thank You!  
We Welcome Your Comments  
Visit [chilis.ca](http://chilis.ca)  
GEM Survey Code 4011  
GST. #821972338RT0001

CHILI'S  
2000 AIRPORT RD NE  
CALGARY, AB

Term ID: 05186815

### Purchase

XXXXXXXXXX

VISA

Entry Method

Clerk ID: 6082

Amount: \$                    9.43  
Tip: \$                        1.41  

---

Total: \$                      10.84

2015/03/09

13:01

Seq #:                    0010250380

Appr Code:                045240

Resp Code: 01/027

VISA  
A0000000031010  
4A F7 41 F8 4E 06 7E 55  
00 00 00 00 00  
F8 00  
4F 8E FE 73 C9 32 40 89

APPROVED

Thank You

10.84

HMSHOST  
TIM HORTONS C  
CALGARY INTERNATIONAL AIRPORT

297307 Anita

-----  
CHK 9022 GST 1  
MAR09'15 1:08PM  
-----

TO GO

1 GRK YGRT VAN BRY 2.99  
1 LG HOT CHOC L 1.81

SUBTOTAL 4.80

TAX 0.24

AMOUNT PAID 5.04

XXXXXXXXXXXX3518

VISA 5.04

-297307 Closed MAR09 01:08PM-

THANK YOU FOR YOUR BUSINESS!

TELL US ABOUT YOUR EXPERIENCE

JOHN VAN BESOUW  
JOHN.VANBESOUW@HMSSHOT.COM

GST # 137512901

5.04

**HOTEL PUR**  
395, RUE DE LA COURONNE  
QUEBEC, QC, 418-647-2458

SAM 7 MARS 2015  
**ADDITION #243514-1**  
TABLE #201

1 AIGLEFIN TEMPURA	\$7.00	
1 VERDURETTE	\$6.00	
1 HARICOTS VERTS	\$6.00	
1 VERRE JE-SYRAH	\$14.00	- 14
1 GYOZA	\$8.00	
SOUS-TOTAL :	\$41.00	
T.P.S.	\$2.05	
T.V.Q.	\$4.09	
<b>TOTAL</b>	<b>\$47.14</b>	

POURBOIRE/TIPS: \_\_\_\_\_  
(non compris/not included)  
TOTAL: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE  
NO.CHAMBRE/ROOM: \_\_\_\_\_  
Heure: 18:06 1 CLIENT

TPS: 853652089 RT0001  
TVQ: 1202642795 TQ0001

VOUS AVEZ ETE SERVI  
PAR : Equipe BAR

=====  
TPS: 2.05 \$ TVQ: 4.09 \$  
**Total : 47.14 \$**  
FACTURE ORIGINALE



2015-03-07 17:56:11 MEV:12263601-10179266  
HOTEL PUR  
395, RUE DE LA COURONNE QUEBEC  
J = ← Δ ✕ C ≠ ∩ ≠ ∇ ≠ ∂

==TRANSACTION RECORD==  
-RELEVÉ DE TRANSACTION-

POS29005447 RETLR19060309  
HOTEL PUR  
395 RUE DE LA COURONNE  
QUEBEC , QC

CARD/CARTE: VISA

NO. \*\*\*\* \*  
AID: A0000000031010  
APPL: VISA  
CLERK/EHPL: 088  
SEQ.: 007 BATCH/LOT: 091  
REFERENCE NB.: 001941  
015/03/07 18:09:15 CA1

ACHAT/ACHAT	\$47.1
IP/POURBOIRE	\$7.6
<b>TOTAL</b>	<b>\$54.7</b>

HOR./AUTOR.: 074861

00 APPROVED - THANK YOU

Keep this copy for  
your records.

COPY : CARDHOLDER

40.21

# AIR CANADA

AirCanada Café / Café AirCanada

Flight / Vol: ACO160 YYC-YUL  
Departure / Depart: 2015-03-07  
Order no / Commande: YYC 372477/3/10  
Name: DENISE HENNING  
Date: 2015-03-07  
Time / Heure: 16:02:33  
Tran type / Type trans.: Sale / Vente

Card no / No de carte: \*\*\*\*\*  
Name / Nom: DENISE HENNING  
Total amount / Montant Total: CAD 4.20

CUSTOMER COPY / COPIE DU CLIENT

# AIR CANADA

1 Cheese & Cracke / Fromage & C  
aq 4  
-----  
Total Before T / Avant taxes CAD 4  
GST / TPS @ 5% 0.20  
-----  
Grand Total / Total CAD 4.20

Payments / Paiements:  
Credit card / Carte de crédit  
-----  
Total payments / Total paiement  
CAD 4.20

Air Canada  
GST/HST reg # 100092287 RT0001  
QST reg # 1000043172 TQ1991

Air Canada  
TPS/TVH reg # 100092287 RT0001  
TVQ reg # 1000043172 TQ1991

# AIR CANADA

AirCanada Café / Café AirCanada

Flight / Vol: ACO160 YYC-YUL  
Departure / Depart: 2015-03-07  
Order no / Commande: YYC 372477/3/1  
Name: DENISE HENNING  
Date: 2015-03-07  
Time / Heure: 13:59:01  
Tran type / Type trans.: Sale / Vente

Card no / No de carte: \*\*\*\*\*  
Name / Nom: DENISE HENNING  
Total amount / Montant Total: CAD 3.15

CUSTOMER COPY / COPIE DU CLIENT

# AIR CANADA

1 Yogurt / Yogourt grec 3  
-----  
Total Before T / Avant taxes CAD 3  
GST / TPS @ 5% 0.15  
-----  
Grand Total / Total CAD 3.15

Payments / Paiements:  
Credit card / Carte de crédit  
-----  
Total payments / Total paiement  
CAD 3.15

Air Canada  
GST/HST reg # 100092287 RT0001  
QST reg # 1000043172 TQ1991

Air Canada  
TPS/TVH reg # 100092287 RT0001  
TVQ reg # 1000043172 TQ1991

7.35.

**MONCHATEAU  
500 RUE PRINCIPALE  
QUEBEC, 418-861-8600**

LUN 9 MARS 2015  
**ADDITION #1224725-1**

1 OEUF2 ROT12 VIAN.RIS	\$8.06
1 EAU CRISTALINE	\$2.98
SOUS-TOTAL	: \$11.04
T.P.S.	\$0.55
T.V.Q.	\$1.10
<b>TOTAL</b>	<b>\$12.69</b>

\*\*\*\*\*

MERCI !!!

BON VOYAGE...

\*\*\*\*\*

Heure: 05:33 1 CLIENT

IPS: R100/19368

IVQ: 10 0151-2508100015NB

VOUS AVEZ ETE SERVI

PAR : ANNE-MARIE

VISA FFT : \$15.69  
POURBOIRE : \$3.00

-----  
IPS: 0,55 \$ IVQ: 1,10 \$

**Total : 12,69 \$**

PAIEMENT RECU



2015-03 09 05:33:58 MEV:12058701-10446275  
SERVICES ALIMENTAIRES

MONCHATEAU RESTO-BAR ALTITUDE

500, RUE PRINCIPALE QUEBEC

≠ ≠ 0 1 2 3 4 5 6 7 8 9 \* U Q J C

**RESTO PUB  
PUB EDWARD**  
824 BOUL CHAREST-EST 523-3674

DIM 8 MARS 2015  
**ADDITION #690569-1**  
TABLE #19  
CLIENT # 2

1 / 3 (12) Ailes Poule	\$4.32
1 / 3 Batonnets Oka	\$2.99
1 / 3 Calmars frits	\$3.50
2 Gr.Edward	\$11.74
1 Filet Mignon	\$27.95
SOUS-TOTAL :	\$50.50
T.P.S.	\$2.53
T.V.Q.	\$5.04
<b>TOTAL</b>	<b>\$58.07</b>

-11.74

PUB EDWARD/MO RESTO BAR  
824 BOUL CHAREST E  
QUEBEC, QC G1K8H8  
4185233674

**SALE**

Server #: 000045  
Table #: 0019  
Check #: 0000690569  
MIC: 5812498  
TID: 001 REF#: 00000021  
Batch #: 281  
03/08/15 18:19:55  
APPR CODE: 086937  
VISA

Exemple de Pourboire: 15.00% \$7.50

\*\*\*\*\*  
PLUS DE 265 SORTES DE BIÈRES  
WWW.PUBEDWARD.CA  
\*\*\*\*\*  
Heure: 18:17 1 CLIENT  
3 ADDITIONS

TPS: 145129078 RT0001  
TVQ: 1204784465 TQ0001

VOUS AVEZ ETE SERVI  
PAR : Caroline

<b>AMOUNT</b>	<b>\$58.07</b>
<b>TIP</b>	<b>\$8.71</b>
<b>TOTAL</b>	<b>\$66.78</b>

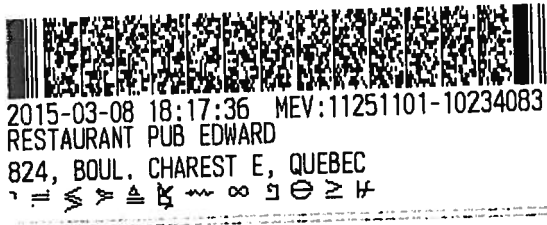
APPROVED

VISA  
AID: A0000000031010  
TVR: 00 00 00 80 00  
TST: F8 00

THANK YOU  
PLEASE COME AGAIN

CUSTOMER COPY

=====  
TPS: 2.53 \$ TVQ: 5.04 \$  
**Total : 58.07 \$**  
FACTURE ORIGINALE



55.04.



L'ESCALE  
AÉROPORT DE MONTRÉAL

310424 Liza

-----  
**3167** TPS 1  
MAR07'15 12:22PM  
-----

\*\*À EMPRTE\*\*

1 EAU MONTCLAIR L 3.69  
1 PARFAIT 5.99  
XXXXXXXXXXXX  
VISA 11.13

SOUS-TOTAL 9.68  
9.68 T.P.S. 217010 0.48  
9.68 T.V.Q. 217101 0.97  
MONTANT PAYÉ **11.13**  
---310424 Fermé MAR07 12:22PM---

MERCI POUR VOTRE VISITE!  
\*\*\*SERVICE NON COMPRIS\*\*\*  
\*\*\*TIP NOT INCLUDED\*\*\*

DITES-NOUS CE QUE VOUS PENSEZ!  
TELL US WHAT YOU THINK!

COMMENTAIRESMONTREAL@HMSSHOT.COM

TPS# 137512901 TVQ# 1019856077

=====  
TPS: 0.48 \$ TVQ: 0.97 \$  
**Total : 11.13 \$**  
PAIEMENT REÇU



2015-03-07 12:29:18 MEV:12639801-10429974  
ESCALE  
975-275, BOUL. ROMEO-VACHON DORVAL  
M A 1 + 3 E T D # 2 7 R  
=====

11.13



VIVEZ LA VILLE

TRYP Quebec Hotel PUR  
395 rue de la Couronne  
Quebec, QC Canada G1K 7X4  
Tel: (418) 647-2611 Fax: (418) 640-0666

**FACTURE INFORMATIV**

Date d' Arrivée : 07-03-15  
Date de Départ : 09-03-15  
Nom de l'entreprise:  
**DENISE HENNING**

No. Facture/Invoice : /  
Code de groupe : 070307864CO  
Chambre/Room : 1114  
Page No. : 1 of 1  
Wyndham Rewards :  
Conf. No. : 2522662  
No de caisse : 1  
Numéro A/R :

Date	Description	Charges	Palements
07-03-15	Hébergement	109.00	
07-03-15	Taxe hébergement	3.27	
07-03-15	TPS / GST	5.61	
07-03-15	TVQ / PST	11.20	
08-03-15	Hébergement	109.00	
08-03-15	Taxe hébergement	3.27	
08-03-15	TPS / GST	5.61	
08-03-15	TVQ / PST	11.20	
09-03-15	Visa XXXXXXXXXXXXX5045 XX/XX		258.16
<b>Taxe hébergement</b>		<b>6.54</b>	
<b>TPS 853 652 089RT</b>		<b>11.22</b>	
<b>TVQ 120 264 2795TQ000</b>		<b>22.40</b>	
		<b>Total</b>	<b>258.16</b>
		<b>Montant dû</b>	<b>0.00</b>

**Signature du client / Guest Signature:** \_\_\_\_\_



## Expense Disclosure Sheet

**Name** Denise Henning, PhD      **Date** March 24, 2015

**Position** President and CEO      **Purpose** KPI Monitoring Meeting - Olds College      **Destination** Olds, AB

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
3/24/2015	Travel Claim	Other Transportation	Return mileage Medicine Hat to Olds, AB.			259.60
3/24/2015		Accommodation	Hotel			172.89
3/24/2015	Travel Claim	Incidentals	Overnight incidental			10.00
3/24/2015	Travel Claim	Meals	Meal allowance			21.14
3/24/2015	Travel Claim	Meals	Meal allowance			44.00
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>507.63</b>

# MEDICINE HAT COLLEGE TRAVEL CLAIM

## CLAIMANT

Name: Denise Henning  
 Address:

## MEETING/CONFERENCE

Name: KPI Monitoring Meeting - Olds College  
 Location: Olds, AB



## DAYS INVOLVED [ 1.33 ]

Departure date: Mar 23 2015 10:00AM  
 Return date: Mar 24 2015 6:00PM

## EXPENSES

### Meals

	Days	Rate	Total
Breakfast	0 @	\$10.00	= \$0.00
Lunch	0 @	\$12.00	= \$0.00
Dinner	0 @	\$22.00	= \$0.00
Full Per diem	1 @	\$44.00	= \$44.00 ✓
Overnight incidental	1 @	\$10.00	= \$10.00 ✓
Hospitality Allowance	0 @	\$20.00	= \$0.00
Conference Cost			\$0.00
Hotel (attach invoice)			\$172.89 ✓
Miscellaneous	Supper Receipt in accordance with Policy (Just Jacks)		\$21.14 ✓
			\$0.00
			\$0.00

## FOR OFFICE USE ONLY

Amount	GST

## TRANSPORTATION

Own Car	590 KM @ 0.44/KM	\$259.60 ✓
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$0.00

CND \$507.63  
 USD \$0.00 \*\$1.00/CND

TOTAL EXPENSE \$507.63  
 Less - Advance (if applicable) -\$0.00  
**NET CLAIM DUE (Repayable) 507.63**

## INVOICE TOTAL

### FOR OFFICE USE ONLY

### VENDOR NUMBER

CONTROL  
 03 - 7579  
 TOTAL

GL CODE	AMOUNT	GST	TOTAL

## Written Signatures

Request By: *Denise Henning* Department Code: 12000 - 9240  
 Department Signatures (If Necessary Signature): *J. Hinn* Finance: \_\_\_\_\_

## Electronic Signatures

Active Directory: CLavrence@mhc.ab.ca

# Pomeroy Inn & Suites @ Olds College

GST# 824143507

Box 3702 : 4601 46th Avenue

Olds, AB T4H 1P5

Telephone: (403)556-8815 Fax: (403)556-1056

Apr 01, 2015  
10:26 am

Denise Henning  
299 College Dr Se  
Medicine Hat, AB T1A 3Y6

Folio #: 24320  
Room Number: 328  
Rate: \$129.00  
Pay Method: VISA3518

Arrival Date: Monday, March 23, 2015  
Departure Date: Tuesday, March 24, 2015

Member #: 5514

Information: ADV CXL POL

Date	Department	Reference	Voucher	Room	Debit	Credit
3/23/2015	ROOM CHARGE	Auto Posted		328	\$129.00	
3/23/2015	ROOM G.S.T.	Auto Posted		328	\$6.45	
3/23/2015	DMF FEE	Auto Posted		328	\$3.87	
3/23/2015	G.S.T.	Auto Posted		328	\$0.19	
3/23/2015	HOTEL TAX	Auto Posted		328	\$0.15	
3/23/2015	HOTEL TAX	Auto Posted		328	\$5.16	
3/23/2015	Room Fees	Auto posted - Service		328	\$25.00	
3/23/2015	ROOM G.S.T.	Auto posted - Service		328	\$1.25	
3/23/2015	DMF FEE	Auto posted - Service		328	\$0.75	
3/23/2015	G.S.T.	Auto posted - Service		328	\$0.04	
3/23/2015	HOTEL TAX	Auto posted - Service		328	\$0.03	
3/23/2015	HOTEL TAX	Auto posted - Service		328	\$1.00	
3/24/2015	VISA	CHECKED-OUTVI3518		328		\$172.89

I agree that my liability for all charges is not waived

Signature \_\_\_\_\_

Tax Summary	
ROOM G.S.T.	\$7.70
G.S.T.	\$0.23
HOTEL TAX	\$6.34
DMF FEE	\$4.62

Balance: \$0.00

**Just Jacks**

MON MARCH 23, 2015  
**CHECK #116787-1**  
TABLE #31

LUNCH  
1 JACKS SHRIMP \$11.50  
DINNER  
1 HOUSE SALAD \$6.00  
SUB-TOTAL : \$17.50  
TAX : \$0.88  
**TOTAL \$18.38**

Room Number \_\_\_\_\_

Guest Name \_\_\_\_\_

Tip \_\_\_\_\_

Total \_\_\_\_\_

Sign \_\_\_\_\_

Thank you; See you again soon!  
Coming later this March 2015  
Just Jacks , Olds : NEW MENUS!  
587 796 0387  
Time: 17:02 1 CUSTOMER

THANK-YOU  
GST # 824143507

YOU HAVE BEEN SERVED  
BY : Joshua

JACKS RESTAURANT  
4601 46 AVE  
OLDS AB

CARD \*\*\*\*\*  
CARD TYPE INTERAC  
ACCOUNT TYPE CHEQUING  
DATE 2015/03/23  
TIME 1173 17:03:20  
SERV ID 027  
CHECK # 116787  
TABLE # 31  
RECEIPT NUMBER  
032029124-001-193-010

PURCHASE  
AMOUNT \$18.38  
TIP \$2.76  
TOTAL

**\$21.14**

INTERAC  
A0000002771010  
F4059BF8CCF04FD0  
8000008000-6800  
89E43D8111B9DDB6  
8000008000-7800

**APPROVED**

AUTH# 006133 00-001  
THANK YOU

CARDHOLDER COPY



## Expense Disclosure Sheet

Name Denise Henning, PhD          Date March 26, 2015          Destination Edmonton, AB  
Position President and CEO          Purpose Provincial Budget Meeting

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
3/24/2015	Travel Claim	Other Transportation	Mileage from Olds to Edmonton, AB. Mileage from Edmonton to Medicine Hat, AB.			235.40
3/24/2015	Travel Claim	Incidentals	Overnight incidental			20.00
3/24/2015- 3/25/2015	Holiday Inn Express	Accommodation	Hotel			336.12
3/25/2015	Travel Claim	Meals	Meal Allowance			120.54
3/26/2015	Travel Claim	Other Transportation	Taxis			8.36
						-
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>720.42</b>

# MEDICINE HAT COLLEGE TRAVEL CLAIM



**CLAIMANT**

Name: Denise Henning  
Address:

**MEETING/CONFERENCE**

Name: Provincial Budget Meeting  
Location: Edmonton, AB

**DAYS INVOLVED [ 2.25 ]**

Departure date Mar 24 2015 3:00PM  
Return date Mar 26 2015 9:00PM

**EXPENSES**

**FOR OFFICE USE ONLY**

Meals	Days Rate	Total
Breakfast	0 @ \$10.00 =	\$0.00
Lunch	0 @ \$12.00 =	\$0.00
Dinner	0 @ \$22.00 =	\$0.00
Full Per diem	0 @ \$44.00 =	\$0.00
Overnight incidental	2 @ \$10.00 =	\$20.00 ✓
Hospitality Allowance	0 @ \$20.00 =	\$0.00
Conference Cost		\$0.00
Hotel (attach invoice)		\$336.12 ✓
Miscellaneous	Actual food receipts in accordance with \$120.54 policy ✓	\$0.00
		\$0.00

Amount	GST

**TRANSPORTATION**

Own Car	535 KM @ 0.44/KM	\$235.40 ✓
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$8.36 ✓


CND \$720.42  
USD \$0.00 \*\$1.00/CND

**INVOICE TOTAL**

TOTAL EXPENSE \$720.42  
Less - Advance (if applicable) -\$0.00  
NET CLAIM DUE (Repayable) 720.42

**FOR OFFICE USE ONLY**

**VENDOR NUMBER**

CONTROL 03 - 7580  
TOTAL

GL CODE	AMOUNT	GST	TOTAL

**Written Signatures**

Request By

*Denise Henning*  
*J. Smith*

Department Signatures  
(If Necessary Signature)

Department Code  
Finance:

12000-9240

**Electronic Signatures**

Active Directory CLawrence@mhc.ab.ca



YELLOW CAB  
10135 31 AVENUE NW  
EDMONTON AB T6H-1C2  
780-462-3456

Id: 45024124782298  
#: 0276

CHASE  
Id: 189176  
d #: XXXXXXXXXXXX3518

D: A0000000031010

APPROVED

AMOUNT	CAD\$7.00
TIP	CAD\$0.70
	=====
TOTAL	CAD\$8.30

Ref. #: C  
Auth. #: 071799  
Resp. Code: 00  
TUR: 0800008000  
TST: F000

BOOK ON LINE AT EDHTAXI.COM  
THANK YOU FOR BEING OUR GUEST

GST 100403070

Date: 2015/03/26 Time: 12:29:04  
Response: AUTH 071799



03-26-15

<b>Denise Hennina</b>	Folio No. :	Room No. : <b>606</b>
	A/R Number :	Arrival : <b>03-24-15</b>
<b>Canada</b>	Group Code :	Departure : <b>03-26-15</b>
	Company :	Conf. No. : <b>68119050</b>
	Membership No. : <b>PC 195634428</b>	Rate Code : <b>IMCGV</b>
	Invoice No. :	Page No. : <b>1 of 1</b>

Date	Description	Charges	Credits
03-24-15	Parking	12.00	
03-24-15	*Room	139.00	
03-24-15	GST Tax	6.95	
03-24-15	Trsm Levy Tax	5.56	
03-24-15	Municipal DMF	4.17	
03-24-15	Municipal DMF GST	0.21	
03-24-15	Municipal DMF Tourism Levy	0.17	
03-25-15	Parking	12.00	
03-25-15	*Room	139.00	
03-25-15	GST Tax	6.95	
03-25-15	Trsm Levy Tax	5.56	
03-25-15	Municipal DMF	4.17	
03-25-15	Municipal DMF GST	0.21	
03-25-15	Municipal DMF Tourism Levy	0.17	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - [www.ihg.com/reviews](http://www.ihg.com/reviews). We look forward to welcoming you back soon.

<b>Total</b>	<b>336.12</b>	<b>0.00</b>
<b>Balance</b>	<b>336.12</b>	

**Guest Signature:** \_\_\_\_\_

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express Downtown  
 Edmonton 10010 - 104 Street  
 Canada T5J 0Z1 Edmonton, AB  
 Telephone: (780) 423-2450 Fax: (780) 426-6090  
 OGST #896724515  
[www.hiexdowntown.com](http://www.hiexdowntown.com)

ALBERT'S FAMILY RESTAURANT  
10041 106 ST NW  
EDMONTON AB T5J 1G3  
TEL: 780-413-4869

GST # 858229010  
TERM # 780111  
CORD # 00240  
POST INVOICE # 0002367  
POST SEQ # 100310

\*\*\*\*\*  
CASH/SAV  
03/25 09:45:0

**CHASE**  
AMOUNT *14.00 cc* \$27.00  
*Tip \$4 cc* \$4.00  
\$32.00

009236 B:01  
201503250945

**TRANSACTION**  
**APPROVED 000**  
THANK YOU

INTERAC  
AID: A0000002771010  
TC: CAA2ACD283DD0252  
TVR: 8000008000  
TSI: 7800

CUSTOMER COPY

*no receipt provided*

The Old Spaghetti Factory  
Bourbon Street  
West Edmonton Mall  
(780) 444-2181

142 STEF M

Tbl 93/1 Chk 7978 Gst 3  
Station 9 Mar25'15 02:16PM

1 GINGER ALE	2.99	
2 3 MTBLS @ 3.50	7.00	3.50
1 LUNCH MIZITARA	9.55	
1 SUB F.O.	2.50	
1 SMALL CHOWDER	4.25	

Food	26.29	
GST Tax	1.31	
02:50PM Total	27.60	
Tip	4.14	

We are committed to total guest satisfaction. If we have not met or exceeded your expectations in any way, please let us know.

Please Pay Your Server  
Gratuity not Included

GST# R133989145  
Call to book reservations Today!

OLD SPAGHETTI WEST ED  
MALL  
8882 170TH ST NW UNIT  
166  
EDMONTON AB

CARD \*\*\*\*\*  
CARD TYPE VISA  
DATE 2015/03/25  
TIME 8885 14:53:45  
SERK ID  
RECEIPT NUMBER  
32034288-C01-266-00

PURCHASE  
TAXT \$27.60  
TIP \$4.14  
TOTAL

**\$31.74**

VISA  
00000031010  
IF443391E09570  
000008000-EB00  
D97ACDCC2BDD81E7  
0000008000-FB00

**APPROVED**

AUTH# 004362 01-027  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

31.74



Here to make you happy.

BOSTON PIZZA #179  
JASPER AVENUE

0291 Table 43 #Party 2

EMPTY L SvrCk: 4 18:09 03/24/15

1 16 OZ GLASS, c.moon shiraz	( 6.49)
1 BRIES WINE 50% OF .	-3.25
1 PBL OVEN WINGS, hot, h. garlic,	
w/ranch	20.99
1 DRY RIBS	10.99
1 CHIP CHKN CLUB, original,	
w/fries	14.49

Sub Total: 49.71  
GST : 2.49

03/24 18:57 TOTAL: 52.20

*TIP 7.83*

THANK YOU!

GST#893018549

PLEASE PAY SERVER

JOIN US FOR \$7.99 PASTA TUESDAY

PLEASE NOTE THAT BOSTON PIZZAS' PARKING  
IS ON THE EAST AND WEST SIDE  
OF THE BUILDING ONLY!!  
TELL US HOW WE DID!

We value your feedback.

Complete short survey and receive a  
weekly chance to WIN an awesome  
\$50 Boston Pizza Gift Card  
keep this receipt and go to  
[www.tellbostonpizza.com](http://www.tellbostonpizza.com)  
OR call 1.888.205.5778

\*\*\*\*\*

For complete rules, eligibility  
please visit [www.tellbostonpizza.com](http://www.tellbostonpizza.com)

18991-32000-4/211

Full Rules & Regulations can be found at

\*\*\*\*\*

BOSTON PIZZA # 179  
10620 JASPER AVENUE T5J2A3  
EDMONTON AB  
20153908  
BH2015390815

\*\*\*\* PURCHASE \*\*\*\*

03-24-2015 19:02:48  
Acce # \*\*\*\*\* C  
Exp Date \*\*/\*\* Card Type VI  
Name: DENISE HENNING  
A0000000031010 VISA

Check # 291  
Trace # 1242 Operator 152  
Inv. # 1259  
Job # 074817 RRR 001258

Purchase	\$52.20
Tip	\$7.83
<b>Total</b>	<b>\$60.03</b>

( 00 ) APPROVED-THANK YOU

Retain this copy for your  
records  
Customer copy

3.24 wine  
.16 tax  

---

3.40 subtotal

60.03  
- 3.40  

---

---

56.63



## Expense Disclosure Sheet

Name Denise Henning, PhD      Date March 17, 2015      Destination Brooks, AB  
Position President and CEO      Purpose Board of Governors' Meeting

**Receipt Reconciliation: (Please attach supporting documentation i.e.: receipts)**

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
3/17/2015	Travel Claim	Other Transportation	Return mileage from Medicine Hat to Brooks, AB.			95.04
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
						-
<b>Total Receipts</b>						<b>95.04</b>

**MEDICINE HAT COLLEGE TRAVEL CLAIM**

**CLAIMANT**

Name: Denise Henning  
Address:

**MEETING/CONFERENCE**

Name: Board Meeting  
Location: Brooks



**DAYS INVOLVED | 8.33 |**

Departure date Mar 17 2015 1:00PM  
Return date Mar 25 2015 9:00PM

*17*  
*cu*

**EXPENSES**

Meals	Days	Rate	Total
Breakfast	0	@ \$10.00	= \$0.00
Lunch	0	@ \$12.00	= \$0.00
Dinner	0	@ \$22.00	= \$0.00
Full Per diem	0	@ \$44.00	= \$0.00
Overnight incidental	0	@ \$10.00	= \$0.00
Hospitality Allowance	0	@ \$20.00	= \$0.00
Conference Cost			\$0.00
Hotel (attach invoice)			\$0.00
Miscellaneous			\$0.00
			\$0.00
			\$0.00

**FOR OFFICE USE ONLY**

Amount	GST

**TRANSPORTATION**

Own Car	216 KM @ 0.44/KM	\$95.04
College Car	(Attach gas receipts)	\$0.00
Rental Car	(Attach invoice & gas receipts)	\$0.00
Air Fare	(Attach Air Line Tickets or Invoice)	\$0.00
Taxi, buses, parking, road tolls	(Less than \$10 receipt is not required)	\$0.00

CND \$95.04  
USD \$0.00 \*\$1.00/CND

**TOTAL EXPENSE \$95.04**  
Less - Advance (if applicable) -\$0.00  
**NET CLAIM DUE (Repayable) 95.04**

**INVOICE TOTAL**

**FOR OFFICE USE ONLY**

GL CODE

**VENDOR NUMBER**

AMOUNT

**GST**


**CONTROL  
03 - 7550  
TOTAL**


**Written Signatures**

Request By

*[Signature]*

Department Code

*11000 - 9240*

Department Signatures  
(If Necessary Signature)

*[Signature]*

Finance:

\_\_\_\_\_

**Electronic Signatures**

Active Directory

MWatson@mhc.ab.ca