



Expense Disclosure Summary

Name Vicky Roy **Position** Provost & Vice President Academic
Period Covered April - June 2020

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
June 25, 2020	Brooks, AB	Drive-by thank you tour		\$ 94.16					\$ 94.16
			\$ -	\$ 94.16	\$ -	\$ -	\$ -	\$ -	\$ 94.16

* 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 Original Copy Signed



Expense Disclosure Sheet

Name Vicky Roy **Date** June 25, 2020

Position Provost & Vice President Academic **Purpose** First Responders & Frontline Health Workers Appreciation & Awareness Day, drive-by thank you tour. **Destination** Brooks, AB

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

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
June 25, 2020	Medicine Hat College Travel Claim	Other Transportation	Mileage (214km x \$0.44/km)	94.16		94.16
					Total Receipts	94.16

MEDICINE HAT COLLEGE TRAVEL CLAIM

CLAIMANT

Name: Vicky Roy

Address:

MEETING/CONFERENCE

Name: First Responders and Frontline Health Workers
Appreciation and Awareness Day

Location: Brooks, AB



DAYS INVOLVED [0.21]

Departure date Jun 25 2020 10:00AM
Return date Jun 25 2020 3:00PM

EXPENSES

	Days	Rate	Total	FOR OFFICE USE ONLY	
				Amount	GST
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		

TRANSPORTATION

Own Car	214 KM @ 0.44/KM	\$94.16		
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	\$94.16		
	USD	\$0.00	*\$1.00/CND	
	TOTAL EXPENSE	\$94.16		
	Less - Advance (if applicable)	-\$0.00		
	NET CLAIM DUE (Repayable)	94.16		

INVOICE TOTAL

FOR OFFICE USE ONLY	VENDOR NUMBER		CONTROL
GL CODE	AMOUNT	GST	03 - 18187
			TOTAL

Written Signatures

[Redacted Signature]
[Redacted Signature]

[Redacted Signature]
[Redacted Signature]

[Redacted Signature]
[Redacted Signature]

[Redacted Signature]
[Redacted Signature]

Finance:

Electronic Signatures

Active Directory [Redacted]