



Expense Disclosure Summary

Name Dr. Nancy I Position Vice President Academic & Provost
Period Covered Nov - Dec 2025

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
November 5, 2025	Brooks, AB	Brooks Newell Leadership Breakfast		\$ 108.12					\$ 108.12
November 19, 2025	Brooks, AB	Documentary interview/filming with Global Village		\$ 108.12					\$ 108.12
			\$ -	\$ 216.24	\$ -	\$ -	\$ -	\$ -	\$ 216.24

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

Signature



Expense Disclosure Sheet

Name Dr. Nancy Brown **Date** November 5, 2025

Position Vice President Academic & **Purpose** 2025 Brooks Newell Leadership Breakfast **Destination** Brooks, AB
Provost

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

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Nov.5, 2025	MHC Travel Claim	Other Transportation	212km x \$0.51/km	108.12		108.12

MEDICINE HAT COLLEGE TRAVEL CLAIM

CLAIMANT

Name: Nancy Brown
Address:

MEETING/CONFERENCE

Name: 2025 Brooks Newell Leadership Breakfast
Location: Brooks, AB



DAYS INVOLVED [0.27]

Departure date Nov 5 2025 6:30AM
Return date Nov 5 2025 1:00PM

EXPENSES

	Days	Rate	Total	Amount	GST
Meals					
Breakfast	0	@ \$13.00	= \$0.00		
Lunch	0	@ \$17.00	= \$0.00		
Dinner	0	@ \$27.00	= \$0.00		
Full Per diem	0	@ \$57.00	= \$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		

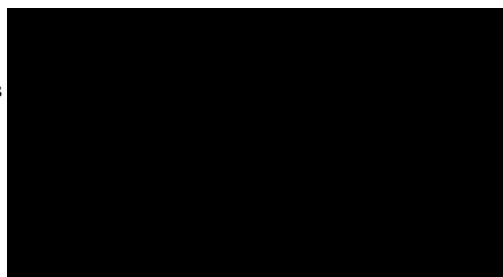
TRANSPORTATION

Own Car	212 KM @ 0.51/KM	\$108.12		
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	\$108.12		
	USD	\$0.00	*\$1.00/CND	
	TOTAL EXPENSE	\$108.12		INVOICE TOTAL
	Less - Advance (if applicable)	-\$0.00		
	NET CLAIM DUE (Repayable)	108.12		

FOR OFFICE USE ONLY	VENDOR NUMBER	CONTROL 03 - 22987	
GL CODE	AMOUNT	GST	TOTAL

Written Signatures

Request By



partment Code

0 _____

Department Signatures
(If Necessary Signature)

nce:

Electronic Signatures

Active Directory



Expense Disclosure Sheet

Name Dr. Nancy Brown Date November 19, 2025

Position Vice President Academic & Provost **Purpose** Newcomer documentary filming/interview with Global Village **Destination:** Brooks, AB

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

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Nov.19, 2025	MHC Travel Claim	Other Transportation	212km x \$0.51/km	108.12		108.12

MEDICINE HAT COLLEGE TRAVEL CLAIM

CLAIMANT

Name: Nancy Brown
Address:

MEETING/CONFERENCE

Name: Filming with Global Village (Newcomer Documentary)
Location: Brooks, AB



Days Involved | 0.25 |

Departure date Nov 19 2025 7:00AM
Return date Nov 19 2025 1:00PM

EXPENSES

TRANSPORTATION

212 KM @ 0.51/KM	\$108.12		
(Attach gas receipts)	\$0.00		
(Attach invoice & gas receipts)	\$0.00		
(Attach Air Line Tickets or Invoice)	\$0.00		
(Less than \$10 receipt is not required)	\$0.00		
CND	\$108.12		INVOICE TOTAL
USD	\$0.00	*\$1.00/CND	
TOTAL EXPENSE	\$108.12		
Less - Advance (if applicable)	-\$0.00		
NET CLAIM DUE (Repayable)	108.12		

Written Signatures

Request By

Department Signature
(If Necessary Signature)

ent Code

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Electronic Signature

Active Directory