



Expense Disclosure Summary

Name Dr. Nancy Brown **Position** Vice President Academic & Provost
Period Covered September - October 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
September 2, 2025	Brooks, AB	Brooks Campus New Student		\$ 108.12					\$ 108.12
Sept.15-20, 2025	Courtenay, BC	PIN Leadership Summit	\$ 791.10	\$ 49.50	\$ 1,374.25	\$ 158.00		\$ 50.00	\$ 2,422.85
October 23-24, 2025	Calgary, AB	ACOSAO Fall Meeting		\$ 351.21	\$ 306.19	\$ 54.00		\$ 10.00	\$ 721.40
			\$ 791.10	\$ 508.83	\$ 1,680.44	\$ 212.00	\$ -	\$ 60.00	\$ 3,252.37

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 Dr. Nancy Brown **Date** September 2, 2025

Position Vice President Academic & Provost **Purpose** New Student Orientation, Brooks Campus **Destination** Brooks, AB

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

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
September 2, 2025	MHC Travel Claim	Other Transportation	Mileage (212km x \$0.51/km)	108.12		108.12
				Total Receipts		108.12

MEDICINE HAT COLLEGE TRAVEL CLAIM

CLAIMANT

Name: Nancy Brown
Address:

MEETING/CONFERENCE

Name: Brooks Campus New Student Orientation
Location: Brooks, AB



DAYS INVOLVED [0.15]

Departure date Sep 2 2025 7:30AM
Return date Sep 2 2025 11:00AM

EXPENSES

				FOR OFFICE USE ONLY	
Meals	Days Rate	Total		Amount	GST
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		INVOICE TOTAL	
	USD	\$0.00	*\$1.00/CND		
	TOTAL EXPENSE	\$108.12			
	Less - Advance (if applicable)	-\$0.00			
	NET CLAIM DUE (Repayable)	108.12			

FOR OFFICE USE ONLY		VENDOR NUMBER		CONTROL	
GL CODE	AMOUNT		GST	03 - 22906	TOTAL

Written Signatures

Request By

Department Signature
(If Necessary Signature)

Electronic Signature

Active Directory

Department Code

Address:



Expense Disclosure Sheet

Name

Dr. Nancy Brown

Date

September 15 - 20, 2025

Position

Vice President Academic
& Provost

Purpose

PIN Leadership Summit

Destination: Courtenay, BC

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

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
Sept.15-20, 2025	WestJet	Airfare	Medicine Hat to Comox/Return	753.42	37.68	\$ 791.10
September 15, 2025	Ambassador Transportation	Other Transportation	Transportation - airport to hotel	47.36	2.14	\$ 49.50
Sept.15-20, 2025	Crown Aisle Resort	Accommodation	Accommodation x 5 nights	1314.50	59.75	\$ 1,374.25
Sept.15-20, 2025	MHC Travel Claim	Meals		158.00		\$ 158.00
Sept.15-20, 2025	MHC Travel Claim	Incidentals	Overnight incidentals x 5	50.00		\$ 50.00
				Total Receipts		\$ 2,422.85



eTicket Receipt

Prepared For
BROWN/NANCY MS

RESERVATION CODE	FNWIYU
ISSUE DATE	30 Jul 25
TICKET NUMBER	8382199324744
ISSUING AIRLINE	WESTJET
ISSUING AGENT	WestJet/SDX
FREQUENT FLYER NUMBER	

Itinerary Details

TRAVEL DATE	AIRLINE	DEPARTURE	ARRIVAL	OTHER NOTES
15 Sep 25	WESTJET WS 3483 Operated by: WESTJET ENCORE	MEDICINE HAT AB, CANADA Time 3:35pm	CALGARY INTL AB, CANADA Time 4:28pm	Fare EconoFlex Cabin ECONOMY Seat Number 10B Included Bags 1 PIECE Booking Status OK TO FLY Fare Basis LBVD0LFLK Not Valid After 25 OCT 25
15 Sep 25	WESTJET WS 309	CALGARY INTL AB, CANADA Time 9:30pm	COMOX BC, CANADA Time 10:10pm	Fare EconoFlex Cabin ECONOMY Seat Number 17C Included Bags 1 PIECE Booking Status OK TO FLY Fare Basis LBVD0LFLK Not Valid After 15 SEP 26
20 Sep 25	WESTJET WS 3590 Operated by: WESTJET ENCORE	COMOX BC, CANADA Time 6:35am	VANCOUVER BC, CANADA Time 7:16am Terminal MAIN TERMINAL	Fare EconoFlex Cabin ECONOMY Seat Number 05C Included Bags 1 PIECE Booking Status OK TO FLY Fare Basis LAVD0LFLK Not Valid After 25 OCT 25
20 Sep 25	WESTJET WS 104	VANCOUVER BC, CANADA Time 8:30am Terminal MAIN TERMINAL	CALGARY INTL AB, CANADA Time 11:01am	Fare EconoFlex Cabin ECONOMY Seat Number 10C Included Bags 1 PIECE Booking Status OK TO FLY Fare Basis KBUD0LFLS Not Valid After 15 SEP 26
20 Sep 25	WESTJET WS 3484 Operated by: WESTJET ENCORE	CALGARY INTL AB, CANADA Time 2:05pm	MEDICINE HAT AB, CANADA Time 3:03pm	Fare EconoFlex Cabin ECONOMY Seat Number 05B Included Bags 1 PIECE Booking Status OK TO FLY Fare Basis KBUD0LFLS Not Valid After 15 SEP 26

Allowances

Baggage Allowance

YXH to YQQ - 1 Piece WESTJET , each piece up to 50 pounds/23 kilograms and up to 62 linear inches/158 linear centimeters

Prices of additional baggage pieces:

1. 75.00 CAD up to 50 pounds/23 kilograms and up to 62 linear inches/158 linear centimeters**

YQQ to YXH - 1 Piece WESTJET , each piece up to 50 pounds/23 kilograms and up to 62 linear inches/158 linear centimeters

Prices of additional baggage pieces:

1. 75.00 CAD up to 50 pounds/23 kilograms and up to 62 linear inches/158 linear centimeters****bag fees apply at each check in location

ADDITIONAL ALLOWANCES AND/OR DISCOUNTS MAY APPLY DEPENDING ON FLYER-SPECIFIC FACTORS /E.G. FREQUENT FLYER STATUS/MILITARY/ CREDIT CARD FORM OF PAYMENT/EARLY PURCHASE OVER INTERNET,ETC

Carry On Allowances

YXH to YYC , YYC to YQQ , YQQ to YVR , YVR to YYC , YYC to YXH - 1 Piece (WS - WESTJET) carry on hand baggage

Carry On Charges

YXH to YYC , YYC to YQQ , YQQ to YVR , YVR to YYC , YYC to YXH - (WS - WESTJET)

Payment/Fare Details

Form of Payment	CREDIT CARD - [REDACTED]
Fare Calculation Line	YXH WS X/YYC WS YQQ187.00WS YVR128.00WS X/YYC WS YXH315.00CAD630.00END
Fare	CAD 630.00
Taxes/Fees/Carrier-Imposed Charges	CAD 62.00 YQI (OTHER AIR TRANSPORTATION CHARGES)
	CAD 35.55 XG8 (GOODS AND SERVICES TAX (GST))
	CAD 18.92 CA4 (AIR TRAVELLERS SECURITY CHARGE)
	CAD 42.50 SQ (AIRPORT IMPROVEMENT FEE (AIF))
	CAD 2.13 XG9 (GOODS AND SERVICES TAX (GST))
Total	CAD 791.10

Positive identification required for airport check in

Notice:

QST # 1202807956TQ0001 GST # 866112535

**Checked baggage dimensions can be within 158 total centimeters (62 total inches) and not weighing more than 23 kilograms (50 pounds). Baggage exceeding the size or weight allowance is subject to applicable oversized weight and size restrictions and fees.

Baggage fees are charged in Canadian (CAD) dollars; for flight departures outside Canada, baggage fees will be converted and charged in the local currency of the departure country. GST is charged on all itineraries that originate in Canada. Please see <https://www.westjet.com/en-ca/flights/fees> for

Subject: [EXTERNAL] Receipt from Ambassador Transportation Corp #PpDh

CAUTION: This email originates from outside of Medicine Hat College.

Do not click links or open attachments unless you recognize the sender and know the content is safe.

Ambassador Transportation Corp



Let Ambassador Transportation Corp know
how your experience was

\$49.50

Custom Amount	\$45.00
Purchase Subtotal	\$45.00
GST - included, \$2.14	
Tip	\$4.50
Total	\$49.50



Ambassador Transportation Corp

2002E Comox Ave

Comox, BC V9M3M6

[\(250\) 339-5252](tel:(250)339-5252)



2025-
09-15-
22:27
#PpDh
Auth
code:
014785

AID: A0000000031010

GST/HST: 804447845RT0001

© 2025 Square Canada, Inc.

Please contact Ambassador Transportation Corp about its privacy practices.

[Not your receipt?](#)

[Report message to Square](#)



This communication is intended for the use of the recipient to which it is addressed, and may contain confidential, personal, and or privileged information. Please contact the sender immediately if you are not the intended recipient of this communication, and do not copy, distribute, or take action relying on it. Any communication received in error, or subsequent reply, should be deleted or destroyed.



Reservation Number 142242

Send to **Nancy Brown**
 299 College Drive Se
 Medicine Hat, AB T1A 3Y6

Phone .

Guest Name	Nancy Brown	Arrival Date	9/15/25	Departure Date	9/20/25
-------------------	-------------	---------------------	---------	-----------------------	---------

Group	Postsecondary International Network (PIN)	Room Information	0901 - Golf Course Queen Room
--------------	---	-------------------------	-------------------------------

Folio Number 150676

Trans Date	Description	Voucher	Amount
Charges			
9/15/25	Call-In Rate	c -0901	239.00
9/15/25	Goods & Services Tax	c -0901	11.95
9/15/25	Hotel Room Tax	c -0901	19.12
9/15/25	Municipal/District Tax	c -0901	4.78
9/16/25	Call-In Rate	c -0901	239.00
9/16/25	Goods & Services Tax	c -0901	11.95
9/16/25	Hotel Room Tax	c -0901	19.12
9/16/25	Municipal/District Tax	c -0901	4.78
9/17/25	Call-In Rate	c -0901	239.00
9/17/25	Goods & Services Tax	c -0901	11.95
9/17/25	Hotel Room Tax	c -0901	19.12
9/17/25	Municipal/District Tax	c -0901	4.78
9/18/25	Call-In Rate	c -0901	239.00
9/18/25	Goods & Services Tax	c -0901	11.95
9/18/25	Hotel Room Tax	c -0901	19.12
9/18/25	Municipal/District Tax	c -0901	4.78
9/19/25	Call-In Rate	c -0901	239.00
9/19/25	Goods & Services Tax	c -0901	11.95
9/19/25	Hotel Room Tax	c -0901	19.12
9/19/25	Municipal/District Tax	c -0901	4.78
Subtotal			1,374.25
Total Charges			1,374.25

Payments

9/20/25	Visa		-1,374.25
Subtotal			-1,374.25
Total Payments			-1,374.25

Balance Due: 0.00

	Goods & Services Tax	Hotel Room Tax	Municipal/District Tax	Total
Total Tax	\$59.75	\$95.60	\$23.90	\$179.25

GST#873769012

MEDICINE HAT COLLEGE TRAVEL CLAIM

CLAIMANT

Name: Nancy Brown
Address:

MEETING/CONFERENCE

Name: PIN Leadership Summit
Location: Courtenay, Vancouver Island BC



DAYS INVOLVED [4.98]

Departure date Sep 15 2025 3:30PM
Return date Sep 20 2025 3:00PM

EXPENSES

Meals

Breakfast
Lunch
Dinner
Full Per diem
Overnight incidental
Hospitality Allowance
Conference Cost
Hotel (attach invoice)
Miscellaneous

Days Rate	Total
2 @ \$13.00 =	\$26.00
3 @ \$17.00 =	\$51.00
3 @ \$27.00 =	\$81.00
0 @ \$57.00 =	\$0.00
5 @ \$10.00 =	\$50.00
0 @ \$20.00 =	\$0.00
	\$0.00
	\$0.00
	\$0.00
	\$0.00
	\$0.00

FOR OFFICE USE ONLY	
Amount	GST

TRANSPORTATION

Own Car
College Car
Rental Car
Air Fare
Taxi, buses, parking, road tolls

0 KM @ 0.51/KM	\$0.00
(Attach gas receipts)	\$0.00
(Attach invoice & gas receipts)	\$0.00
(Attach Air Line Tickets or Invoice)	\$791.10
(Less than \$10 receipt is not required)	\$0.00
CND	\$999.10
USD	\$0.00 *\$1.00/CND
TOTAL EXPENSE	\$999.10
Less - Advance (if applicable)	-\$0.00
NET CLAIM DUE (Repayable)	999.10

FOR OFFICE USE ONLY	
Amount	GST
INVOICE TOTAL	

FOR OFFICE USE ONLY		VENDOR NUMBER		CONTROL	
GL CODE		AMOUNT		03 - 22862	
				TOTAL	

Written Signatures

Request By

Department Signature
(If Necessary Signature)

Electronic Signatures

Active Directory

Code



Expense Disclosure Sheet

Name Dr. Nancy Brown **Date** October 23-24, 2025

Position Vice President Academic & Provost **Purpose** ACOSAO Fall Meeting (AB Consortium of Senior Academic Officers) **Destination:** Calgary, AB

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

Date	Vendor	Expense Category (Select from drop down menu)	Description	Subtotal	GST	Total
October 23-24, 2025	MHC Travel Claim	Transportation	Mileage (596km x \$0.51/km)	303.96		303.96
October 23-24, 2025	MHC Travel Claim	Meals	Dinner x 2	54.00		54.00
October 23, 2025	MHC Travel Claim	Incidentals	1 overnight incidental	10.00		10.00
October 24, 2025	Calgary Airport Marriot	Accommodation	1 night accommodation	292.14	14.05	306.19
October 23-24, 2025	Calgary Airport Marriot	Parking	Parking fee	45.00	2.25	47.25
				Total Receipts		721.40

MEDICINE HAT COLLEGE TRAVEL CLAIM

CLAIMANT

Name: Nancy Brown

Address:

MEETING/CONFERENCE

Name: AB Consortium of Senior Academic Officers
(ACOSAO) Meeting

Location: Calgary, AB



DAYS INVOLVED [1.29]

Departure date Oct 23 2025 1:00PM
Return date Oct 24 2025 8:00PM

EXPENSES

				FOR OFFICE USE ONLY	
		Days Rate	Total	Amount	GST
Meals					
Breakfast	0 @ \$13.00 =		\$0.00		
Lunch	0 @ \$17.00 =		\$0.00		
Dinner	2 @ \$27.00 =		\$54.00		
Full Per diem	0 @ \$57.00 =		\$0.00		
Overnight incidental	1 @ \$10.00 =		\$10.00		
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	596 KM @ 0.51/KM	\$303.96			
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	\$367.96		INVOICE TOTAL	
	USD	\$0.00	*\$1.00/CND		
	TOTAL EXPENSE	\$367.96			
	Less - Advance (if applicable)	-\$0.00			
	NET CLAIM DUE (Repayable)	367.96			

FOR OFFICE USE ONLY		VENDOR NUMBER		CONTROL
GL CODE	AMOUNT	GST	TOTAL	03 - 22964

Written Signatures

Request By

Department Signature
(If Necessary Signature)

Electronic Signature
Active Directory

Document Code



**MARRIOTT
CALGARY AIRPORT
IN-TERMINAL HOTEL**

Calgary Airport Marriott In-Terminal Hotel
2008 Airport Road NE Calgary, Alberta, Canada T2E 3B9
Telephone: (403) 717-0522 Fax: (587) 232-0600

██████████
 Nancy Brown
 299 College Drive SE
 Medicine Hat AB T1A3Y6
 Canada

Room: 327
 Folio: 582119
 Cashier: 165
 Arrival: 10-23-25
 Departure: 10-24-25

Group: St Mary's University ACOSAO, M-VHIPNK8

Date	Description	Additional Information	Charges	Credits
10-23-25	Valet Parking		45.00	
10-23-25	Parking GST		2.25	
10-23-25	Room Charge		265.00	
10-23-25	Rooms Destination Market Fee		15.90	
10-23-25	Rooms Tourism Levy		11.24	
10-23-25	Room GST		14.05	
10-24-25	Visa Card	X ██████████ XX/XX		353.44
GST Summary Reg No: 741907497 RT0001 Room 14.05 F&B 0.00 Other 0.00 Total 14.05			Total 353.44 Balance Due 0.00 CDN	353.44

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.