

**TOWN OF FORT FRANCES - SCHEDULE "B"**  
**TRAVEL EXPENSE STATEMENT**

1.	Attendee	Doug Brown							
2.	Conference/Seminar Attended	AMCTO - Council Orientation							
	Location (Facility and City)	Thunder Bay, ONTARIO -							
	Dates	July 19/20/18							
3.		Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Total
	Accommodation					202.27			202.27
	Transportation								
	Breakfast								
	Lunch								n.a.
	Dinner					38.00			n.a.
	Per Diem					5.00	5.00		35.00
	Other								10.00
4.	Prepaid Expenses	Registration		Air Travel		Other		Total	
		438.44						438.44	
5.	Town Used Vehicle	<input checked="" type="radio"/> Yes	<input type="radio"/> No	Reason					Total
	Mileage Claimed	KM x \$0.47 =					n.a.		
6.	Approved						Total Expenses		
							743.49		
							Advance Received		
							n.a.		
							Balance Claimed		
							Balance Refunded		
							45.00		

**The agenda must be attached to process payment**

In claiming the above amounts, I certify that the expenses have been incurred on behalf of the Town, that the means of transportation were the most economical, with due regard to convenience, and that the expenditures were made in the exercise of my duties. NB – a valid and detailed receipt must accompany hotel Visa slips.

Date July 23/18

Employee Signature Doug Brown

Date \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

Date \_\_\_\_\_

Division Manager Signature \_\_\_\_\_

		10-020-0262-1500-71532	
Date	Treasurer	A / P	Cashier

10-020-0262-1500-71532

*By*



2680 Skymark Avenue, Suite 610,  
Mississauga, ON L4W 5L6  
Phone: 905-602-4294  
Fax: 905-602-4295

## Receipt

Invoice # 42035  
Invoice Date: June 27, 2018

Doug Brown  
320 Portage Avenue  
Fort Frances, ON P9A2B5  
CANADA

ID: 231357

### Council Orientation

Monday, June 18, 2018 through Saturday, September 01, 2018  
July 20, 2018 Through July 20, 2018  
Various Locations

You are registered for the following:

Function	Quantity	Rate	Amount
Thunder Bay - July 20 from 7/20/2018 9:00:00AM through 4:00:00PM	1	388.00	388.00
Subtotal			388.00
Tax			50.44
Total			438.44
Payment			438.44
Balance			0.00

**Payment Details**

HST#: R106732936

Please keep this as your receipt for income tax purposes



4

07-20-18

Doug Brown	Folio No. :	Room No. : 322
x	A/R Number :	Arrival : 07-19-18
Fort Frances ON P9A 3P9	Group Code :	Departure : 07-20-18
Canada	Company : Government Canada	Conf. No. : 41292781
	Membership No. :	Rate Code : IMCGV
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
07-19-18	*Accommodation 322 Doug Brown	179.00	
07-19-18	HST 322 Doug Brown	23.27	
07-20-18	Visa		202.27
Total		202.27	202.27
Balance		0.00	

**Guest Signature:**

I have received the goods and / or services in the amount shown hereon. 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.

How was your visit?  
When you get home,  
please review us on TripAdvisor.  
[www.tripadvisor.ca/reviewit](http://www.tripadvisor.ca/reviewit)

10-020-0262-1500-71532

*Doug Brown*

SHELL CANADA PRODUCTS  
4794 HIGHWAY 11 & 17  
Kakabeka Falls, ON P0T 1W0  
(807) 577-8767

Tax Description	Qty	Amount
-----------------	-----	--------

H Bronze No1		
39.333 L @ \$1.469/ L		\$57.78

Sub Total	\$57.78
-----------	---------

13.0% HST tax on	\$0.00	\$0.00
------------------	--------	--------

5.0% HST-F tax on	\$0.00	\$0.00
-------------------	--------	--------

<b>TOTAL</b>	\$57.78
--------------	---------

VISA:	\$57.78
-------	---------

Change	\$0.00
--------	--------

Fuel Includes HST	13.0%	\$6.65
Fuel Includes HST-F	5.0%	\$0.00
HST - Fuel - ON No.	863700670RT0001	

01 APPROVED - THANK YOU 001

VISA

XXXXXXXXXXXX4124

TERMINAL No. 89221551

C

PURCHASE

INV No. 2215612630

Visa Credit

AID A0000000031010

T/YR 0080208000

TSI E800

x Day B #10 069523

Cardholder will pay card issuer above  
amount pursuant to Cardholder Agreement

IMPORTANT

retain this copy for your records

685.71

57.78

743.49