



**Members Of The Legislative Assembly  
Travel Claim Form**

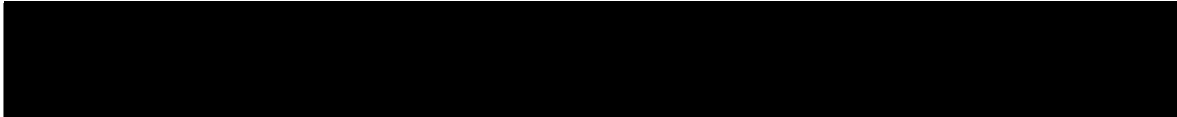
Claim Number: 33857  
 MLA Name: Holman, Gary VM150095      Claim Date: April 13, 2015  
 Constituency: Saanich North & the Islands  
 Type Of Trip: MLA Travel  
 Prepared By: [REDACTED]  
 Claimant Type: Member of Legislative Assembly  
 Travel From: Constituency      Travel To: Victoria  
 Trip Details: Travel for session

Date	Expenses	Amount
April 13, 2015	Lunch Only - Victoria	\$27.00
April 14, 2015	Lunch Only - Victoria	\$27.00
April 15, 2015	Lunch Only - Victoria	\$27.00
April 16, 2015	Lunch Only - Victoria	\$27.00

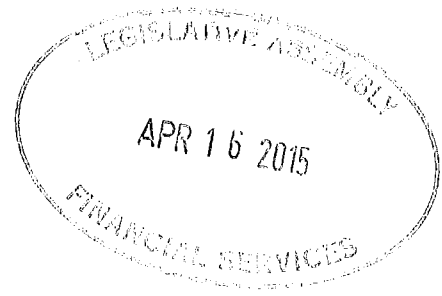
**Total Payable      \$108.00**

Date 16 Apr 2015      Signature [REDACTED]  
 Holman, Gary VM150095  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

**ACCOUNTS OFFICE USE ONLY**



Date 4/20/15      Signature [REDACTED]  
 Spending Authority Signature





## Members Of The Legislative Assembly Travel Claim Form

**Claim Number:** 34001  
**MLA Name:** Holman, Gary VM150095      **Claim Date:** April 20, 2015  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** MLA Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Member of Legislative Assembly  
**Travel From:** Constituency      **Travel To:** Victoria  
**Trip Details:** Travel for session

Date	Expenses	Amount
April 20, 2015	Lunch Only - Victoria	\$27.00
April 21, 2015	Lunch Only - Victoria	\$27.00
April 22, 2015	Lunch and Dinner Only-Victoria	\$48.50
April 23, 2015	Lunch Only - Victoria	\$27.00

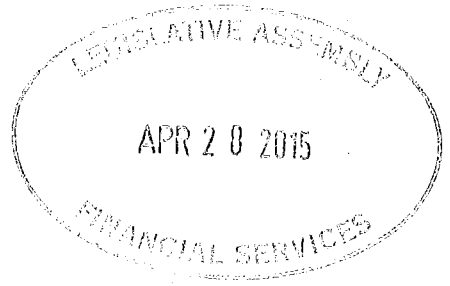
**Total Payable      \$129.50**

Date 23 Apr 2015      Signature [REDACTED]  
 Holman, Gary  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

**ACCOUNTS OFFICE USE ONLY**



Date 4/29/15      Signature [REDACTED]  
 Spending Authority Signature





# Members Of The Legislative Assembly Travel Claim Form

**Claim Number:** 33936  
**MLA Name:** Holman, Gary VM150095      **Claim Date:** April 13, 2015  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** Accompanying Person Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Accompanying Person (CA)  
**Travel From:** Salt Spring Island      **Travel To:** Victoria  
**Trip Details:** Travel for CA conference

Y130486

Date	Expenses	Amount
April 13, 2015	55(km)	\$28.60
April 16, 2015	55(km)	\$28.60
April 13, 2015	Accommodation Expenses	\$104.54 <sup>+</sup>
April 13, 2015	Dinner Only	\$36.00
April 13, 2015	Ferry	\$32.75 <sup>+</sup>
April 13, 2015	Parking	\$18.90 <sup>+</sup>
April 14, 2015	Accommodation Expenses	\$104.54 <sup>+</sup>
April 14, 2015	Full Day Meals Per Diem Allow.	\$61.00
April 14, 2015	Parking	\$18.90 <sup>+</sup>
April 15, 2015	Accommodation Expenses	\$104.54 <sup>+</sup>
April 15, 2015	Full Day Meals Per Diem Allow.	\$61.00
April 15, 2015	Parking	\$18.90 <sup>+</sup>
April 16, 2015	Breakfast only	\$27.00

**Total Payable      \$645.27**

Date 20 Apr 2015

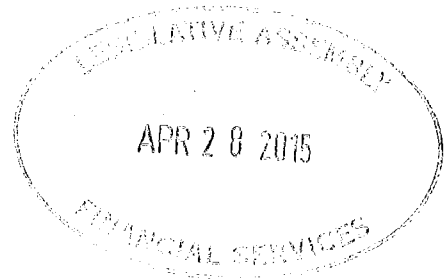
Signature \_\_\_\_\_

[REDACTED SIGNATURE]

Holman certifies that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

**ACCOUNTS OFFICE USE ONLY**

[REDACTED ACCOUNTS OFFICE USE ONLY AREA]



Signatures



**Members Of The Legislative Assembly  
Travel Claim Form**

**Claim Number:** 33936

**MLA Name:** Holman, Gary VM150095

**Claim Date:** April 13, 2015

**Constituency:** Saanich North & the Islands

**Type Of Trip:** Accompanying Person Travel

Date	Expenses	Amount
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Date 5/1/15

Signature   
Spending Authority Signature



**Members Of The Legislative Assembly  
Travel Claim Form**

**Claim Number:** 33936

**MLA Name:** Holman, Gary VM150095

**Claim Date:** April 13, 2015

**Constituency:** Saanich North & the Islands

**Type Of Trip:** Accompanying Person Travel

**Prepared By:** [REDACTED]

**Claimant Type:** Accompanying Person (CA)

**Claimant Name:** [REDACTED]

**Travel From:** Salt Spring Island

**Travel To:** Victoria

**Trip Details:** Travel for CA conference

Date	Expenses	Amount
April 13, 2015	55(km)	\$28.60
April 16, 2015	55(km)	\$28.60
April 13, 2015	Accommodation Expenses	\$104.54
April 13, 2015	Dinner Only	\$36.00
April 13, 2015	Ferry	\$32.75
April 13, 2015	Parking	\$18.90
April 14, 2015	Accommodation Expenses	\$104.54
April 14, 2015	Full Day Meals Per Diem Allow.	\$61.00
April 14, 2015	Parking	\$18.90
April 15, 2015	Accommodation Expenses	\$104.54
April 15, 2015	Full Day Meals Per Diem Allow.	\$61.00
April 15, 2015	Parking	\$18.90
April 16, 2015	Breakfast only	\$27.00
<b>Total Payable</b>		<b>\$645.27</b>

Date 29 Apr 2015

Signature

[REDACTED SIGNATURE]

Holman, Gary VM150095  
certified that the amount to be paid is correct, and is in accordance  
with appropriate statute or other authority for payment

Date 29 Apr 2015

Sign

[REDACTED SIGNATURE]

Accompanying Person (CA)  
certified that the amount to be paid is correct, and is in accordance  
with appropriate statute or other authority for payment

**ACCOUNTS OFFICE USE ONLY**

Organization Code	Account Code	STOB Code	Amount
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Room : [REDACTED]  
 Arrival Date : 04/13/15  
 Invoice No. : [REDACTED]  
 Folio No. : [REDACTED]  
 Conf. No. : 4100154  
 Cashier No. : 11  
 Billing Date : 04/16/15  
 A/R Number

Canada

Association of BC Constituenc

Date	Description	Debit	Credit
04/13/15	Room	90.00	
04/13/15	Destination Marketing Fee	0.90	
04/13/15	Provincial Room Tax	9.09	
04/13/15	Room GST	4.55	
04/13/15	Parking Charges	18.00	
04/13/15	GST	0.90	
04/14/15	Room	90.00	
04/14/15	Destination Marketing Fee	0.90	
04/14/15	Provincial Room Tax	9.09	
04/14/15	Room GST	4.55	
04/14/15	Parking Charges	18.00	
04/14/15	GST	0.90	
04/15/15	Room	90.00	
04/15/15	Destination Marketing Fee	0.90	
04/15/15	Provincial Room Tax	9.09	
04/15/15	Room GST	4.55	
04/15/15	Parking Charges	18.00	
04/15/15	GST	0.90	
04/16/15	Mastercard [REDACTED]XXXXXXXX[REDACTED] [REDACTED]		370.32
Room H/GST Total - 13.65		<b>Total</b>	<b>370.32</b>
Other H/GST Total - 2.70			<b>370.32</b>
H/GST # [REDACTED] PST# [REDACTED]	<b>Balance</b>		<b>0.00</b>

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 association fails to pay for any part or the full amount of these charges. Guests have accepted delivery of The Globe and Mail on a complimentary basis. Guests are not responsible for payment of the newspaper if they decline.

Email: [REDACTED]

#33936

Apl. 16

# PURCHASE



2015/04/16

Swartz Bay

To

Fulford Harbour

## PURCHASE

1	Adult	12.35
20'	Undersize Vehi	36.20
1	UH Savings	11.55-
1	Adult Savings	3.90-
	Fuel Rebate	0.35-
	Total	32.75
	BCF Experience	32.75
	*** **	
	CHANGE DUE	0.00
	Today's Savings	15.45

Stored Value  
Savings:VEH & PASS Savings  
Balance:\$403.35

**LANE 31**

SWB 16 Apr 2015

SEE REVERSE SIDE OF TICKET



**Members Of The Legislative Assembly  
Travel Claim Form**

**Claim Number:** 34067  
**MLA Name:** Holman, Gary VM150095      **Claim Date:** April 27, 2015  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** MLA Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Member of Legislative Assembly  
**Travel From:** Constituency      **Travel To:** Victoria  
**Trip Details:** Travel for session

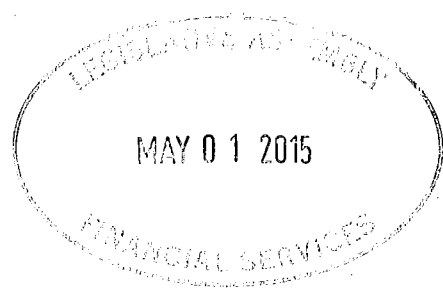
Date	Expenses	Amount
April 27, 2015	Lunch Only - Victoria	\$27.00 ✓
April 28, 2015	Lunch Only - Victoria	\$27.00
<b>Total Payable</b>		<b>\$54.00</b>

Date 30 Apr 2015      Signature [REDACTED]  
 Holman, Gary VM150095  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

**ACCOUNTS OFFICE USE ONLY**



Date 5/1/15      Signature [REDACTED]  
 Spending Authority Signature

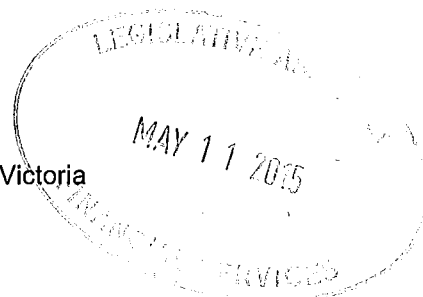






## Members Of The Legislative Assembly Travel Claim Form

**Claim Number:** 34166  
**MLA Name:** Holman, Gary VM150095      **Claim Date:** May 04, 2015  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** MLA Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Member of Legislative Assembly  
**Travel From:** Constituency      **Travel To:** Victoria  
**Trip Details:** MLA Travel for session



Date	Expenses	Amount
May 04, 2015	Lunch Only - Victoria	\$27.00
May 05, 2015	Lunch Only - Victoria	\$27.00
May 07, 2015	Lunch Only - Victoria	\$27.00
<b>Total Payable</b>		<b>\$81.00</b>

Date 07 May 2015

Signature [REDACTED]  
 Holman, Gary VM150095  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

### ACCOUNTS OFFICE USE ONLY



Date 5/11/15

Signature [REDACTED]  
 Spending Authority Signature

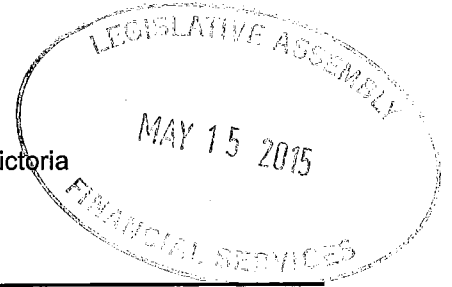


**Members Of The Legislative Assembly  
Travel Claim Form**

**Claim Number:** 34249  
**MLA Name:** Holman, Gary VM150095  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** MLA Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Member of Legislative Assembly  
**Travel From:** Constituency  
**Trip Details:** MLA Travel for session

**Claim Date:** May 11, 2015

**Travel To:** Victoria



Date	Expenses	Amount
May 11, 2015	Lunch Only - Victoria	\$27.00
May 12, 2015	Lunch Only - Victoria	\$27.00 ✓
May 13, 2015	Lunch Only - Victoria	\$27.00
May 14, 2015	Lunch Only - Victoria	\$27.00

**Total Payable \$108.00**

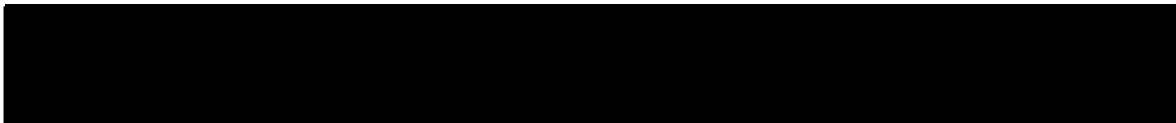
Date 14 May 2015

Signature

[REDACTED]  
Holman, Gary VM150095

*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

**ACCOUNTS OFFICE USE ONLY**



Date 5/19/15

Signature

[REDACTED]  
Spending Authority Signature



# Members Of The Legislative Assembly Travel Claim Form

**Claim Number:** 34113  
**MLA Name:** Holman, Gary VM150095  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** Accompanying Person Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Accompanying Person (CA)  
**Travel From:** Constituency  
**Trip Details:** CA Conference  
**Claim Date:** April 14, 2015  
**Claimant Name:** [REDACTED]  
**Travel To:** Victoria

V130698

Date	Expenses	Amount
April 14, 2015	Lunch only	\$27.00
April 15, 2015	Lunch only	\$27.00
<b>Total Payable</b>		<b>\$54.00</b>

Date 12 May 2015

Signature [REDACTED]  
 Ho [REDACTED]  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

Date 12 May 2015

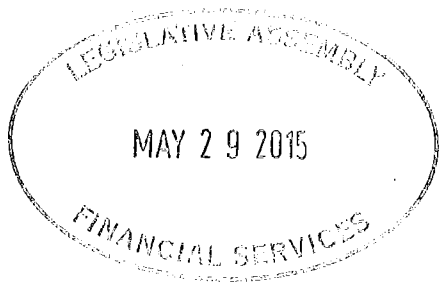
Signature [REDACTED]  
 Accompanying Person (CA) [REDACTED]  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

**ACCOUNTS OFFICE USE ONLY**

Organization Code	Account Code	STOB Code	Amount
[REDACTED]			

Date 5/29/15

Signature [REDACTED]  
 Spending Authority Signature





**Members Of The Legislative Assembly  
Travel Claim Form**

**Claim Number:** 34113  
**MLA Name:** Holman, Gary VM150095      **Claim Date:** April 14, 2015  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** Accompanying Person Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Accompanying Person (CA)      **Claimant Name:** [REDACTED]  
**Travel From:** Constituency      **Travel To:** Victoria  
**Trip Details:** CA Conference

Date	Expenses	Amount
April 14, 2015	Lunch only	\$27.00
April 15, 2015	Lunch only	\$27.00
<b>Total Payable</b>		<b>\$54.00</b>

Date 12 May 2015

Signature

[REDACTED]  
 Holman, Gary VM150095  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

Date 12 May 2015

Signature

[REDACTED]  
 Accompanying Person (CA)  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

**ACCOUNTS OFFICE USE ONLY**

**Organization Code      Account Code      STOB Code      Amount**

[REDACTED]

Date \_\_\_\_\_

Signature

[REDACTED]  
 Spending Authority Signature



# Members Of The Legislative Assembly Travel Claim Form

**Claim Number:** 34311  
**MLA Name:** Holman, Gary VM150095      **Claim Date:** May 25, 2015  
**Constituency:** Saanich North & the Islands  
**Type Of Trip:** MLA Travel  
**Prepared By:** [REDACTED]  
**Claimant Type:** Member of Legislative Assembly  
**Travel From:** Constituency      **Travel To:** Victoria  
**Trip Details:** Travel for session

Date	Expenses	Amount
May 25, 2015	Lunch Only - Victoria	\$27.00
May 26, 2015	Lunch Only - Victoria	\$27.00
May 27, 2015	Lunch Only - Victoria	\$27.00
May 28, 2015	Lunch Only - Victoria	\$27.00

**Total Payable**      **\$108.00**

Date 28 May 2015

Signature

[REDACTED SIGNATURE]

Holman, Gary VM150095  
*certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment*

### ACCOUNTS OFFICE USE ONLY

Organization Code	Account Code	STOB Code	Amount
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[REDACTED ACCOUNTS OFFICE USE ONLY SECTION]

Date 5/28/15

Signature

[REDACTED SIGNATURE]  
 Spending Authority Signature

