

Page: 1

Claim Number: 34730

MLA Name:

Reid, Linda VM089019

Claim Date:

July 17, 2015

Constituency:

Richmond East

Type Of Trip:

CPA Travel

Prepared By:

Claimant Type: Member of Legislative Assembly

Travel From:

Richmond

Travel To:

Victoria

Trip Details:

CPA Regional Conference

Date	Expenses		Amount
July 17, 2015	53(km)		\$27.77
July 16, 2015	Taxi	1993 () Par A	\$9.15
July 16, 2015	Taxi	LEGISLATIVE ASSEMBLY	\$26.57
July 17, 2015 Vehicle and drive	Ferry er	JUL 2 7 2015	\$71.00
July 17, 2015 Reservation fee	Ferry	MANCIAL SERVICES	\$15.00
July 18, 2015	MLA Per Di	The Company of the Co	\$61.00
July 19, 2015	Breakfast &	Dinner Only	\$48.50
July 20, 2015	Lunch & Dir	nner only	\$48.50
July 21, 2015	Lunch only		\$27.00
		Total Payable	\$334.49
Date23 Jul 2015	_	Signatur Reid, Linda VM089019	and is in assaulance
		certified that the amount to be paid is correct with appropriate statute or other authority fo	

ACCOUNTS OFFICE USE ONLY

Organization Code

Account Code

STOB Code

Amount

Date 7/27/15

Signature

Spending Authority Signature



Your reservation has been completed!

Thank you for reserving online with BC Ferries. A copy of this reservation has also been emailed to you.

O (n coelendor)

1-888-223-3779

RESE	RVATION	DEPA	RTS	TIME / DATE	ARRIVES
		VANCO Tsawwassen		Friday July 17	VICTORIA Swartz Bay Terminal
VEHICLE VESSEL DEPART ARRIVE	Standard vehicle under 7F Spirit of British Columbia Tsawwassen Swartz Bay	Fri	Jul 17 2015 Jul 17 2015	FARE INFORMATION 20' Standard vehicle under 7Ft (2.13m) high 1 12 yrs+ 1 Reservation Fee * Total for this sailing	\$54.80 \$16.70 \$15.00 \$86.50
				Due at terminal: \$71.50 vehicle & passenger fares	Paid: \$15.00 reservation fee

Vehicle and Passenger fares will be collected at the terminal

Still unsure who is travelling with you? You can still add and pay for passengers at the terminal.

We accept Visa, Mastercard and American Express. **Debit is not accepted at this time.** Due to vessel substitutions vessel amenities cannot be guaranteed.

Total Paid: \$15.00 reservation fee

Arrive at the terminal 30-60 minutes before departure



Reservation Check-In Opens

Check-in opens 6 ominutes prior to departure. Depending on schedules, you may not be able to check-in if you arrive more than 6 o minutes early.

Reservation Check-In Closed

Reservation check-in must occur 30 minutes prior to scheduled departure. If not checked in by this time, the reservation will not be valid and you will travel standby (on next available sailing). Your reservation fee will not be

What you need to redeem your reservation

The ticket agent will ask for your reservation number or phone number used to make the booking.

Terms and Conditions

All reservations are booked for one vehicle and one driver.

Reservation fees and change fees are non-refundable.

Reservations will not be honoured and travel will revert to a first-come, first-served basis if you:

- · arrive after the reservation check-in has closed, 30 minutes prior to the scheduled departure;
- arrive before the reservation check-in has opened, more than 60 minutes prior to the scheduled departure.

A reservation will only be honoured for the specific sailing you reserve and is valid only for the type and length of vehicle specified. If your reserved vehicle length differs by more than 5 feet (1.5 metres) at check-in, your reservation will not be honoured.

Vehicle length adjustments, sailing date and time changes can be made by accessing your account on line or by contacting our Customer Service Centre at 1-888-223-3779 in Canada and the USA, or 1-250-386-3431 outside Canada and the USA, on weekdays between 7:00 am and 8:00 pm and on weekends between 8:00 am and 6:00 pm Pacific Time.

Sailing Cancellations

If you check-in for your reservation and the sailing is cancelled, we will make every effort to load you on the next available sailing. Customers with a reservation on the next scheduled departure will be loaded in advance of customers from the cancelled sailing. If we are unable to load you on the next available sailing, travel will revert to a first-come, first-served basis. If you choose not to travel, your fares will be fully refunded.

If your sailing is cancelled before you check-in, your reservation will be cancelled, your reservation fee will be refunded, and travel will revert to a first-come, firstserved basis.

* Reservation and Change Fees

- \$15.00 reservation fee is applied to bookings made 7 days or more in advance of travel
- \$18.50 reservation fee is applied to bookings made less than 7 days up to day before travel
- \$22.00 reservation fee is applied to bookings made for same day travel
- \$9.00 change fee is incurred each time you make a change to your reservation date, time or sailing

By purchasing a reservation, you acknowledge your acceptance of BC Ferries Conditions of Carriage (available for viewing at www.bcferries.com or upon request at any terminal office, aboard ship or at BC Ferries' head office).

BC Ferries reserves the right to modify or change these terms and conditions from

Transaction Details

CARD# ******** PROCESSED JUN 29 2015

BCF RECEIPT# 00

RECEIPT# 0016300940

EXPIRY AMOUNT AUTH

MASTERCARD

BLUEBIRD CABS LTD.

CAB 82
2612 QUADRA ST. 2ND FLOOR
VICTORIA. BC V8T 4E4
250-382-2222

TERM ID: BU342463

BATCH#: 906 SHIFT#: 001

Sale

INV#: 000000003

Chip SEOM: 906001001003 AID: A00000000041010 TVR:00 00 00 80 00 TSI:E8 00

Amount: Tip:

7.15

Total:CAD\$

9.15

APPROVED 212119

16-Jul -15

CUSTOMER COPY VICTORIA'S FIRST CHOICE THANK YOU!

RICHMOND TAXI #15 2440 SHELL RD V6X2P1 RICHMOND 20121442

1111

1111

07-16-2015

Acct # ********* Exp Date ''/'

Name: LINDA REID A0000000041010

MasterCard

Trace # 310002 Operator 002 FB2012144201

Inv. # 2015

Auth # 224430

RRN 001946002

Purchase Tip

\$23.10 \$3.47

Total

\$26.57

APPROVED-THANK YOU

Retain this copy for your records Customer copy

PURCHASE

≈BCFerries

2015/07/17 Tsawwassen Swartz Bay AUTH ONLY RESERVATION-RES: 16.90 Fuel Rebate 1.30-Total Prepayment MasterCard 005/01-6622: 0016411730 Approved: 203140 CHANGE DUE

0.00





Page: 1

Claim Number: 34538

MLA Name:

Reid, Linda VM089019

Claim Date:

June 29, 2015

Constituency:

Richmond East

Type Of Trip:

MLA Travel

Prepared By:

Claimant Type: Member of Legislative Assembly

Travel From:

Richmond

Travel To:

Victoria

Trip Details:

Date	Expenses	Amount
June 24, 2015	8(km)	\$4.37
June 24, 2015	Parking	\$2.50
June 24, 2015	Taxi	\$8.75
June 24, 2015	Taxi	\$46.40
June 29, 2015	Breakfast & Lunch Only-Victoria	\$39.50
June 29, 2015 Return trip ;	Quick tickets (\$220 x2)	\$0.00
June 29, 2015 Richmond 1	Taxi Faxi invoiced \$20	\$0.00

Total Payable \$101.52

Date _____29 Jun 2015

Signatu

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

Spending Authority Signature

CASLATIVE ASSEMBLE



CAB 160 2612 QUADRA ST, 2ND FLOOR VICTORIA, BC V8T 4E4 250-382-2222

TERM ID: P4342463

BATCHN: 003 SHIFTH: 001

Sale INV#: 000000144

Chir SEON: 009001001144

Application Label: MasterCard AID: A00000000041010 TVR:00 00 00 80 00 TSI:E8 00

XXXXXXXXXXX Amount: Tip:

6.75

Total:CAD\$

8.75

APPROVED 118641

24-Jun -15

VICTORIA'S FIRST CHOICE THANK YOU!

VANCOUVER THAT 790 CLARK DR VANCOUVER BC

CARD

CARD TYPE

MASTERCARD

DATE

2015/06/24

TIME CLERK ID 0652

RECEIPT NUMBER

C85004653-001-098-005-0

PURCHASE

AMOUNT

TIP TOTAL \$41.40 \$5.00

MasterCard A0000000041010 211A742E06E20BA8 0000008000-E800 A7B3E20187C24685

APPROVED

AUTH# 122322

01-027

THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

PLACE FACE UP ON DASH

City of Richmond www.richmond.ca

Expiration Date/Time

JUN 24, 2015

Purchase Date/Time

Jun 24, 2015

Total Due: \$2.50 Total Paid: \$2.50 Rate: \$2.50 For 1 Hour Payment Type: Card

Ticket #: 00000303 S/N #: 520015040079

Setting: Mach Name:

HasterCard

Auth #: 180747

Thank You! Please come again

RECEIPT

Expiration Date/Time Purchase Date/Time: Jun 24, 2015 un 24, 2015

Total Due: \$2.50 Total Paid: \$2.50 Ticket #: 00000303 Rate: \$2.50 For 1 Hour Payment Type: Card

Setting: Mach Name:

HANA

MasterCard



Page: 1

Claim Number: 34586

MLA Name:

Reid, Linda VM089019

Claim Date:

July 12, 2015

Constituency:

Richmond East

Type Of Trip:

MLA Travel

Prepared By:

Claimant Type: Member of Legislative Assembly

Travel From:

Richmond

Travel To:

Victoria

-	D	
Irin	Detai	
HILL	Detai	13.

Date	Expenses	Amount
July 03, 2015 Chan Centre	46(km)	\$24.13
ıly 04, 2015 Thai Festival	38(km)	\$20.07
ay 31, 2015 No receipt -	Parking Statement entry	\$11.00
une 02, 2015 No receipt -	Parking Statement entry	\$2.50
lune 29, 2015	Taxi	\$9.45 ^v
une 29, 2015	Taxi	\$20.80
uly 03, 2015	Parking	\$8.00
uly 04, 2015	Parking	\$20.00
uly 07, 2015 Annual Travel I	Miscellaneous Expense nsurance	\$77.00~
uly 08, 2015	Parking	
uly 12, 2015	Airfare - oneway	\$174.43
uly 13, 2015	MLA Per Diem - Victoria	\$61.00
uly 13, 2015	Taxi	\$55.85
uly 13, 2015	Taxi	\$22.95
uly 14, 2015	Breakfast & Dinner Only	\$48.50
uly 15, 2015	MLA Per Diem - Victoria	\$61.00
uly 16, 2015	Breakfast & Lunch Only-Victoria	\$39.50
uly 16, 2015	Breakfast & Dinner Only MLA Per Diem - Victoria Breakfast & Lunch Only-Victoria Quick tickets (\$220)	\$0.00



Page: 2

Claim Number: 34586

MLA Name:

Reid, Linda VM089019

Claim Date: Richmond East

July 12, 2015

Constituency: Type Of Trip:

MLA Travel

	Expenses			Amount
Date16 Jul 201	5	cert	Total Payable J. Linua VINIO09019 ified that the amount to be paid is corn appropriate statute or other authority	
ACCOUNTS OF Organization Code	FICE USE ONLY Account Co		STOB Code	Amount

2 QUADRA ST. 2ND FLOOR VICTORIA DE COST 4E4 250-382-2222

TERM ID: CV342463

BATCHM: 151 SHIFTM: 001

Sale INVII: 000000016

SEON: 151001001016

Application Label: MasterCard AID: A0000000001010 TVR:00 00 00 80 00 TSI:E8 00 *****

Amount: Tip:

7.45

Total:CAD\$

9.45

APPROVED 191048 001/00

29-Jun -15

VICTORIA'S FIRST CHOICE THANK YOU!

U TAXI 790 CLARK DR VANCOUVER BC

CARD CARD TYPE MAS TERCARD DATE 2015/06/29 TIME 7370 CLERK ID RECEIPT NUMBER C85023889+001-273-002-0

PURCHASE AMOUNT TIP TOTAL

\$17.80 \$3.00

\$20.80

MasterCard A0000000041010 5EED75CC2AE70A5A 0000008000-E800 9293B886E8B81EC2

AUTH# 202015 THANK YOU

01-027

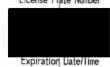
CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

GST* 604*871*1111

RECEIPT

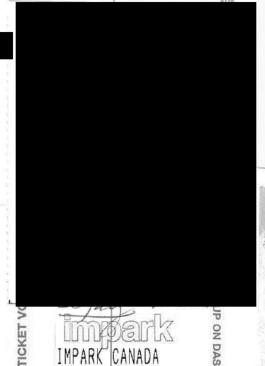
License Plate Number



Purchase Date/Time Total Due: \$8.00 Total Paid: \$8.00 Ticket #: 00000824 S/N #: 520015140394 Setting: Event 2 Mach Name: 0094

Jul 03, 2015 Rate: \$8.00 Until 12AM Payment Type: Card

lasterCard Auth #: 214532



Four HOUR RATE

Meter: 01161005 Trans: 071319 orchase Time: 02:00 Price: \$10.00

Card: M.C. Auth: EXPIRATION TIME:

Noid

20

EL PAPI OUR Call 1-866-277-5501 This is your ticket PLACE ON DASH

817 FISGARD STREET V8W1R9 VICTORIA BC 21852400 GH2185240043

VELLOW CLAS

**** **PURCHASE**

titt

07-13-2015 Acct #

Exp Date **/**

Card Type MC

Name: LINDA REID A0000000041010

MasterCard

Trace # 1988

Operator 143

Inv. # 143

Auth # 031640

RRN 001428003

Purchase Tip Total

\$50.85 \$5.00

APPROVED-THANK YOU

Retain this copy for your records Customer copy

www.yellowcabvictoria.com 250-381-2222

BLUEBIRD CABS LTD.

CAB 51 2612 QUADRA ST, 2ND FLOOR VICTORIA, BC V8T 4E4 250-382-2222

TERM ID: 14342463

BATCH#: 430 SHIFT#: 008

Sale INV#: 000000051 MCARD

SEO#: 430001001045 Application Label: MasterCard AID: A00000000041010 TVR:00 00 00 80 00 TSI:E8 00

PLACE

SIHT

SIDE

SP

20

DASH

19.95

Total:CAD\$

22.95

APPROVED 104328 001/00

13-Jul -15

CUSTOMER COPY VICTORIA'S FIRST CHOICE THANK YOU!

From:

Sent:

To: Subject: June 24, 2015 8:38 AM

The Speaker

Fw: Air Canada - 12-Jul: Vancouver - Victoria (booking re

seat selected

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****

AIR CANADA

Itinerary/Receipt

Your booking is confirmed. Please print/retain this page for your financial records (e.g. for taxation, expense claim or payment card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

Scan this barcode to check in at any Air Canac check in kiosk.



Access your personalized
Air Canada travel information

View your planner >

Booking Information

Booking Reference:

Electronic Ticketing confirmed. This is your official itinerary/receipt.

Main Contact:

Ms Linda

Reid

Customer Care Air Canada 1-888-247-2262 Flight Arrivals and Departures

1-888-422-7533

Online Services

Manage my booking online (view/change my booking; select seats*).

Select Seats

Maple Leaf Lounge | Meal Vouchers | On My Way

Alert me of flight status changes directly to my mobile phone or email.

Flight Arrivals & Departures - check online if my flight is on time.

Check-in online and print my boarding pass.

* Can my booking be changed online?

Flight Itinerary

Flight	From	То	Stops	Duration	Aircraft	Fare Type	Meal
75.00.356	Vancouver, Vancouver Int'l	Victoria, Victoria Int'l	0	0hr27	DH3	Flex, G	

(YVR) (YYJ) Sun 12-Jul 2015 Sun 12-Jul Terminal M 2015	
Operated by: ¹ Air Canada Express - Jazz	
Passenger Information	×
	Number: 0142149972072
Air Canada - Aeroplan : Payment Card: Seat Selection:	Meal Preference : None Special Needs: None
Purchase Summary	
Fare Summary Passenger Type Air Transportation Charges	Adult
Departing Flight - <u>Flex</u> Surcharges	142.00 12.00
Taxes, Fees and Charges Canada Airport Improvement Fee Canada Goods and Services Tax (GST/HST # Air Travellers Security Charge (ATSC)	5.00 8.31 7.12
Total before options (per passenger)	174.43
Number of passengers	<u> </u>
Total with options	174.43
Travel Insurance (declined) Grand Total - Canadian dollars	\$174.43
Payment Information	
Credit/Debit Card xxxx-xxxx-xxx The following amount (tax inclusive) will appear of	nount paid: \$174.43 or your credit card or debit card statement:
Air Canada: \$174.43 (Air Transp. Charges - per t	icket)
Ticket number(s): 0142149972072	
Fare Rules	
Changes: Prior to day of departure - Change fe applicable taxes and any additional far prior to departure. Same-day confirmed changes at changes.	Pyl) - Flex e per direction, per passenger, is \$50 CAD plus re difference. Changes can be made up to 2 hours neck-in or at the airport are permitted at a flat fee of enger (subject to availability). Same-day flights only.



CONFIRMATION OF COVERAGE (B)

Issued Date: July 7, 2015 7:40:46 PM

LINDA REID

Central Agencies Ltd. 1192 103-11020 No. 5 Road RICHMOND, British Columbia V7A 4E7 604-276-0234

Contact Number: Policy Number: **Insured Persons** Coverage Dates Date of Birth Name yyyy/mm/dd (yyyy/mm/dd) Application Date: 2015/07/07 LINDA REID Effective Date: 2015/08/06 Expiry Date: 2016/08/05 Coverage Days per Trip: 15 Plan Name and Benefits Summary Sum Insured Premium **Payment Details** Payment Method: Mastercard Multi-Trip Basic Medical Age Card Number: Hospital and Medical \$154.00 \$10,000,000 \$154.00 Amount: Deductible: \$0 Premium: \$154.00 Total: \$154.00 Taxes: \$0.00 Approval Code: 194044 001/00 Response Code: CHILDREN NO CHARGE FOR DEPENDENT Terminal ID: SPEAKER'S PORTION \$77.00 Sequence #: 078001001403 Transaction Time: 2015/07/07

Please retain this confirmation as your receipt.

Please read your enclosed policy or certificate of insurance carefully. Because travel insurance doesn't cover everything, it's important to fully understand the terms, conditions, limitations and exclusions that are part of your TIC policy. If you have not received your policy, contact your TIC travel insurance representative.

If the sum insured for Emergency Hospital & Medical shown above is \$10 million, and the one shown in your policy booklet is \$5 million, the \$10 million sum insured will apply.

Pre-Existing Conditions Exclusion: Benefits are not payable for costs incurred due to or resulting from your medical condition or related condition, other than a *minor ailment*, that was not *stable* at any time during the 90 days immediately before the *effective date*.

You must meet the eligibility requirements of this policy at the time of application and on the effective date.

You must notify TIC Emergency Assistance within 24 hours of admission to a *hospital* and before any surgery is performed. Failure to notify TIC Emergency Assistance as required will delay the processing and payment of your claim and may limit the amount of your claim payment.

Key terms are printed in bold italics and are defined in the Definitions section of your policy.

In the event of an emergency, contact TIC Emergency Assistance: Toll Free Canada/U.S.A. 1-800-995-1662 Toll Free Worldwide: 800-842-08420 If unable to contact us through these toll free numbers, please call collect: 416-340-0049.

Effective January 1, 2015: This product is underwritten by CUMIS General Insurance Company, a member of The Co-operators group of companies, and administered by Allianz Global Assistance. Allianz Global Assistance is a registered business name of AZGA Service Canada Inc. and AZGA Insurance Agency Canada Ltd. AZGA Service Canada Inc. is the successor by amalgamation to TIC Travel Insurance Coordinators Ltd. AZGA Service Canada Inc. is a member of the Allianz Group.

From: Sent: To: Subject: June 23, 2015 3:57 PM The Speaker;

Helijet ITINERARY



Victoria Harbour: 79 Dallas Road, Victoria BC V8V 1A1
Vancouver Airport: 5911 Airport Road South, Richmond BC V7B 1B5
Vancouver Harbour: 455 Waterfront Road W, Vancouver BC V6B 5E8
Nanaimo Harbour: 100 Port Drive, Nanaimo BC V9R 0C7

Reservations: 1.800.665.4354 | website: helijet.com

RESERVATION CONFIRMATION Passenger Name Reservation # REID LINDA **Itinerary** Status Lea Date From To Flight Quickticket Used 1 16 Jul 2015 VICTORIA HARBOUR ANCOUVER HARBOUR CONFIRMED \$220.00

THIS ITINERARY IS YOUR OFFICIAL TRAVEL DOCUMENT, PLEASE READ FULLY.

Carriage is subject to applicable tariffs, conditions of carriage and related regulations which are available at the Helijet International administration offices. Carriage hereunder is subject to the rules and limitations relating to the liability established by the Warsaw Convention.

Itinerary Status Codes:

C - Confirmed / W- Waitlist / X - Cancelled / S - Standby

Passenger Travel Information:

For detailed Travel Information visit helijet.com or call Helijet Reservations 1.800.665.4354

Passenger Check-in:

Passengers are required to check-in at least 20 minutes prior to scheduled flight departure time.

Aircraft Type:

Scheduled flights are operated by 12 passenger Sikorsky S-76 helicopters.

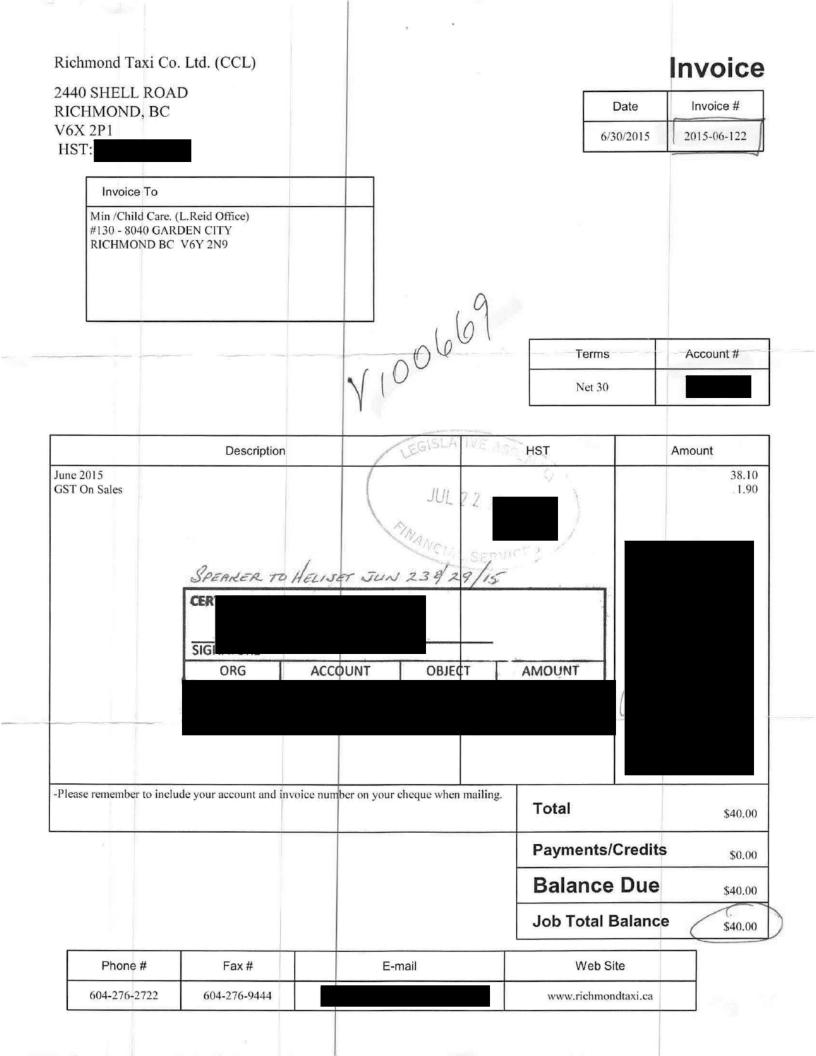
Travel Documentation:

Government issued Photo ID must be presented at check-in of all flights.

Changes/Cancellations & No Show Penalty:

Unless otherwise stated, all fares may be cancelled, changed and refunded up to 5pm the day prior to departure. All same—day bookings are non-refundable. Failure to cancel or change a flight by 5pm the day prior to departure will result in a non-refundable penalty equal to the fare of the one-way travel. After 5pm all next-day travel is non-refundable and only changeable for same-day travel; fare upgrade may be required. On the day of travel, changes must be made at least 1 hour prior to departure or cancellation fee will apply. Failure to check in 20 minutes prior to departure will also result in any onward and/or return reservations being cancelled with any additional applicable cancellation fees applied.

Baggage Allowance:



www.richmondtaxi.ca Office: 604-276-2722	CORAL CABS	, []	13/63
CHARGE TO:	REID	Trip ID No	1251201
	.cc. # _	_ DateOut _	3 20 15
To	termind Dr. L. RE	IVET	
Amount \$ 20		gnature	

WWW.richmondtaxi.ca Office: 604-276-2722	CORAL CA	BS LID.	MOND CABS LTD 400062 Taxi Service: 604-272-111
The second secon	INDA		_Trip ID No.4 2684
CHARGE TO:	Acc.		Date 6/29 2015
From		In _	Out _
1 helm	7	Driver_	1
To	,	RE 12	
Passenger Name	1		



Page: 1

Claim Nun
B/II A Name

nber: 34812

MLA Name:

Reid, Linda VM089019

Claim Date:

August 15, 2015

Constituency:

Richmond East

Type Of Trip:

MLA Travel

Prepared By:

Claimant Type: Member of Legislative Assembly

Travel From:

Richmond East

Travel To:

West Kelowna

Trip Details:

Mission Hill Winery Kelowna

Date	Expenses	Amount
August 15, 2015	389(km)	\$202.59
August 16, 2015	389(km)	\$202.59
August 15, 2015	Lunch & Dinner only	\$48.50
August 15, 2015	Relative/Friend Accomm. Allow.	\$30.00
August 16, 2015	Breakfast & Lunch only	\$39.50

Total Payable \$523.18

Date 19 Aug 2015

Signature

ACCOUNTS OFFICE USE ONLY

Organization Code STOB Code Account Code Amount

Date 8/3/15

Signature

Spending A





Members Of The Legislative Assembly

Page: 1

Travel Claim Form

Claim Number: 34761

1.1

MLA Name:

Reid, Linda VM089019

Claim Date:

July 29, 2015

Constituency:

Richmond East

Type Of Trip:

Speaker Authorized Travel

Prepared By:

Claimant Type: Member of Legislative Assembly

Travel From:

Richmond

Travel To:

Nashville

Trip Details:

National Speaker\'s Conference

Date	Expenses	Amount
July 29, 2015	Conference Fees Expenses	\$431,96
Delegate R	legistration (\$325 (IS)	\$ 10 1.00

Total Payable

\$431.96

Date 05 Aug 2015

Signatu

Reid, Linda VM089019

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

Signatur

	Welcome,	You are curre	ently logged in as an administrator.		
2015 National Spe	akers Confere	nce			
General Options					
Name: Linda Reid	-				·
Title: Speaker					
Number of People Registered: 2					
Confirmation Number: (needed to modify the Event Title: 2015 National Speakers Conference	your registration)				
Nashville, Tennessee 37201					
USA					
Date: 09/09/2015					
Time:					
Registration Fee Summary					
Order				_	
Date	Туре		Amt Ordered	Amt Paid	Amt Due
07/29/2015 3:01 PM ET	online o	rder	\$325.00	\$325.00	\$0.00
Total:			\$325.00	\$325.00	\$0.00
Payment Details					
Details					
Date	Туре		Referen	ce #	Amt Paid
07/29/2015	MasterCard		3	729	\$325.00

\$431.96 CAD \$325.00 USD x 1.3291



Page: 1

B. 1995	
BU STAN	
Date	
CITORA	

Claim Number: 34731

MLA Name:

Reid, Linda VM089019

Claim Date:

July 17, 2015

Constituency: Type Of Trip:

Richmond East

Accompanying Person Travel

Prepared By:

Claimant Type: Accompanying Person (Family Member) Richmond

Travel To:

4.5 peps. Victoria

Travel From: Trip Details:

CPA Regional Conference

Date	Expenses		Amount
July 17, 2015	53(km)		\$27.56
July 17, 2015	Ferry		\$42.251
July 17, 2015 Passengers	Ferry - misp	aced.	\$42.25
July 25, 2015	Ferry		\$96.55
		Total Payable	\$208.61
Date 31 Jul 2015	Sign	atx Reiu, Cinual VM059019	
		certified that the amount to be paid is correct, with appropriate statute or other authority for	

ACCOUNTS OFFICE USE ONLY

Organization Code - Account Code STOB Code Amount Augulis Date Signature Spending Authority Signature



PURCHASE

≈BCFerries

2015/07/17 Tsawwassen

Swartz Bay AUTH ONLY RESERVATION:

RES: 3 Adult 20 Under Undersize Vehi

Reservation Pr Child

50.70 46.93

0.00

Fuel Rebate

Total Prepayment MasterCard

005/01-66223136 0016411730 Approved: 203140 CHANGE DUE

\$42,25 claimed

TSA 17 Jul 2015

99238 SEE REVERSE SIDE OF TICKET

ORIGINAL RECEIPT SUBMITTED WITH CLAIM # 34731

PURCHASE ≈BCFerries

2015/07/25 Swartz Bay Tsawwassen AUTH ONLY

55.40 33.80 8.45 Undersize Vehi Adult Child 1.10-

Fuel Rebate

96.55 96.55 Total Visa 005/01-6622300E 0016637760 Approved: 021033 CHANGE DUE 0.00

ORIGINAL RECEIPT MISPLACED

\$42.25

SEE REVERSE SIDE OF TICKET



Page: 1

Claim Number: 34769

MLA Name:

Reid, Linda VM089019

Claim Date:

July 25, 2015

Constituency:

Richmond East

Type Of Trip:

CPA Travel

Prepared By:

Claimant Type: Member of Legislative Assembly

Travel From:

Victoria

Travel To:

Tortola BVI/Richmond

Trip Details:

Date	Expenses		Amount
July 25, 2015 Flights on Cl	Airfare aim #34258 (\$2234.09)		\$0.00
. ngc en e.	,		
July 25, 2015	Miscellaneous Expense 9,30,31 incidentals 32.64 US conve	arted to Cdn	\$211.87
July 21,20,20	1,50,51 meldentals 52.54 56 conve	inted to odn.	
July 25, 2015	MLA Per Diem		\$61.00
July 25, 2015	Taxi		\$61.85
July 26, 2015	Miscellaneous Expense		\$109.65
break/lunch/	ncidentials 84.29 US conv. 1.3009		
July 27, 2015 Conference	Miscellaneous Expense Registration \$300 US		\$401.10
August 01, 2015	MLA Per Diem		\$61.00
August 01, 2015 \$5 US @	Taxi		\$6.49
August 02, 2015	Тахі		\$60.13
		Total Payable	\$973.09
Date11 Aug 2015	Signature	11 14 14 14 14 14 14 14 14 14 14 14 14 1	948
	certifie	Linda VM089019 ed that the amount to be paid is correct,	
	with ap	ppropriate statute or other authority for	· paymeni

ACCOUNTS OFFICE USE ONLY

Organization Code

Account Code

STOB Code

Amount







Page: 2

Claim Number: 34769

MLA Name:

Reid, Linda VM089019

Claim Date:

July 25, 2015

Constituency: Type Of Trip:

CPA Travel

Richmond East

Organization Code

Account Code

STOB Code

Amount

Signature

Spending Authority Signature



Page: 2

Claim Number: 34769

MLA Name:

Reid, Linda VM089019

Constituency:

Richmond East

Type Of Trip:

CPA Travel

Claim Date:

July 25, 2015

Date Expenses

Amount

Date

06 Aug 2015

Signature

Reio, Linua VM089019

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

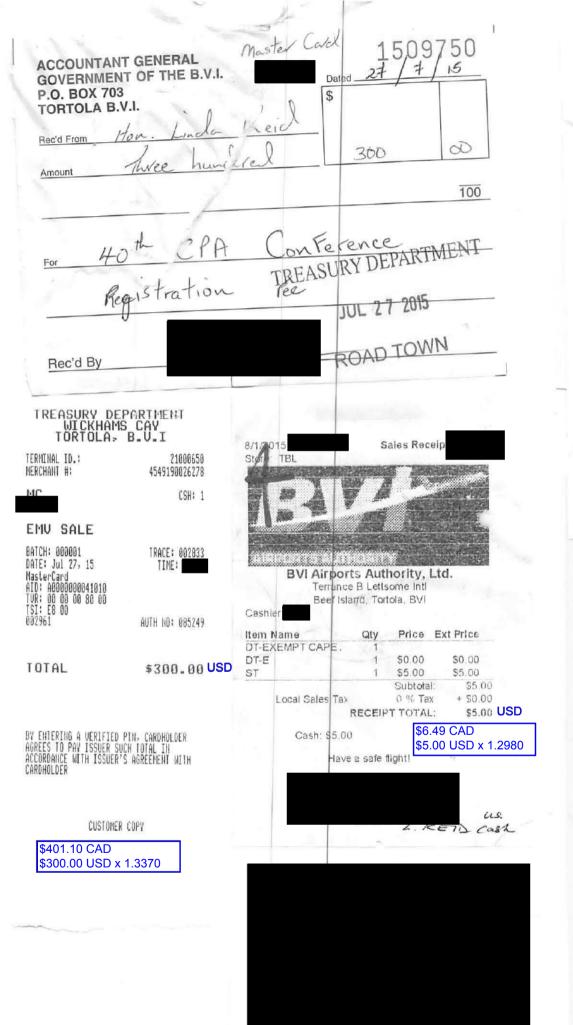
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AUG 1 1 2015



8360 BRIDGEPORT ROAD
RICHMOND,BC
V6X 3C7
604-298-1000

SALE

MED: 8028017468

TID: 0089250008028017468376

REF#: 00000001

Batch #: 087 08/02/15

APPR CODE: 040301

Trace: 1

MASTERCARD

Chip

AMOUNT TIP TOTAL \$55.13 \$5.00 \$60.13

APPROVED

MasterCard AID: A0000000041010 TVR: 00 00 00 80 00 TSI: E8 00

THANK YOU / MERCI

CUSTOMER COPY

817 FISGARD STREET V8W1R9 VICTORIA BC 21852400 GH2185240066

PURCHASE

07-25-2015

Acct # ********
Exp Date **/**

Card Type MC

Name: LINDA REID

A00000000041010

MasterCard

Trace # 2054

Operator 66

Inv. # 066

Auth # 102141

RRN 001461001

Purchase

\$54.85

Tip Total

61 85

.aı

\$61.85

(00) APPROVED-THANK YOU

Retain this copy for your records Customer copy

www.yellowcabvictoria.com 250-381-2222



National Joint Council

Travel Directive, Appendix D - Allowances - Module 4 - Effective July 1, 2015

Appendix D - Allowances - Module 4

Country:	or City:		Archives		
	Return to alphabetical list	Get Rates	Current - July 1, 2015	~	

Table Legend

C = Commercial Accommodation

P = Non-commercial Accommodation

United States of America (Outside the Continental USA ONLY: Guam, Hawaii, Northern Marianas, Puerto Rico and Virgin Islands) - Currency: US Dollar (USD)

Type of Accom- modation		Meal Rate				Grand	Total	
	City	Breakfast	Lunch	Dinner	Meal Total	Incidental Amount	(Taxes Included)	
С	Outside Continental USA	16.00	16.60	42.80	75.40	17.30		92.70
C-75%	Outside Continental USA	12.00	12.45	32.10	56.55	13.00		69.55
Р	Outside Continental USA	16.00	16.60	42.80	75.40	17.30		92.70
P-75%	Outside Continental USA	12.00	12.45	32.10	56.55	13.00		69.55

Virgin Islands (British) - Currency: US Dollar (USD) NOTE: One Rate for Country

Type of Accommodation	City	Mea	l Ra	te				Incidental	Grand Total	
	City	Brea	kfa:	st	Lunch	Dinner	Meal Total	Amount	(Taxes Included)	
С	Road Town		18.	30	33.35	50.35	102.00	32.64	1	34.64
C-75%	Road Town		13.	73	25.01	37.76	76.50	24.48	1	00.98
P	Road Town		18.	30	33.35	50.35	102.00	20.40	1	22.40
P-75%	Road Town		13.	73	25.01	37.76	76.50	15.30		91.80

\$211.87 CAD \$32.64 USD x 5 days x 1.2982 \$109.65 CAD \$18.30 + \$33.35 + \$32.64 = \$84.29 USD x 1.3009

^{* =} Reasonable and justifiable expenses. Receipts required.