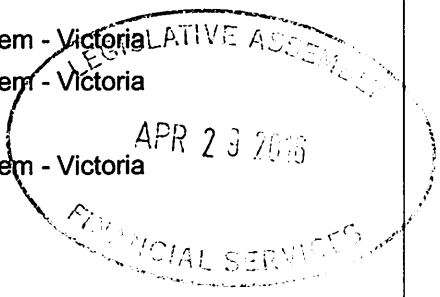




Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36531
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** April 04, 2016
Constituency: Vancouver-False Creek
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Vancouver **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
April 04, 2016	[REDACTED] HWR	[REDACTED] 109.18 ✓
April 04, 2016	Breakfast & Lunch Only-Victoria	\$39.50
April 04, 2016	Ferry	\$16.70 ✗
April 04, 2016	Taxi	\$71.25 ✗
April 04, 2016	Taxi	\$76.80 ✗
April 05, 2016	MLA Per Diem - Victoria	\$61.00
April 06, 2016	MLA Per Diem - Victoria	\$61.00
April 07, 2016	Ferry	\$16.70 ✗
April 07, 2016	MLA Per Diem - Victoria	\$61.00
April 07, 2016	Taxi	\$82.00 ✗
April 07, 2016	Taxi	\$69.55 ✗



Total Payable \$ [REDACTED] 664.68

Date 28 Apr 2016

Signature [REDACTED]
 Sullivan, Sam VM150101-HWR
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]	[REDACTED]	[REDACTED]	[REDACTED]

Date 4/28/16

Signature _____
 Spending Authority Signature

Tsawwassen
To
Swartz Bay
BC Ferries
Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 8B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/04

2 Adult
Fuel Rebate
Total
MasterCard

AUTH 094124 66251449 8010816428 C
MasterCard
A000000041010 / 0000000000 / E800

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

TSA 04 Apr 2016

SEE REVERSE SIDE OF TICKET
KIOSK00745

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240024

**** PURCHASE ****
04-14-2016
Acct # ***** C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A000000041010 MasterCard

Trace # 839 Operator 24
Inv. # 024
Auth # 123127 RBN 001828001

Purchase
Tip
Total

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

www.yellowcabvictoria.com
250-381-2222

VANCOUVER TAXI
790 CLARK DR
VANCOUVER BC

CARD *****
CARD TYPE MASTERCARD
DATE 2016/04/04
TIME 5042
CLERK ID 4444
RECEIPT NUMBER
CB5008534-001-669-001-0

PURCHASE AMOUNT \$76.80
TIP
TOTAL

MasterCard
A000000041010
8B3E916526A34A1C
0000008000-E800
B03E42C52B401283

APPROVED

AUTH# 094306 01-027
THANK YOU

CARDHOLDER COPY

REMAIN THIS COPY FOR YOUR RECORDS

DELTA SU... 4... 14
13425 71A AVE
SURREY BC

Swartz Bay
To
Tsawwassen
BC Ferries

Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

CARD *****
CARD TYPE MASTERCARD
DATE 2016/04/07
TIME 3824
CLERK ID 002
RECEIPT NUMBER
C85034489-001-171-009-0

PURCHASE 2016/04/07

2 Adult
Fuel Rebate

Total

MasterCard

AUTH 213222 66251947 0010017850 C

MasterCard

0000000041010 / 0000000000 / E000

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

PURCHASE AMOUNT \$82.00
TIP
TOTAL

N/A

MasterCard
A0000000041010
438A63C7DC5DA570
0000008000-E800
8F6CEB7E41850B6E

SWB 07 Apr 2016

SEE REVERSE SIDE OF TICKET
KIOSK00546

APPROVED

AUTH# 004541 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORD

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240090

**** PURCHASE ****

04-07-2016

Acct # ***** C

Exp Date **/** Card Type MC

Name: SAM SULLIVAN

A0000000041010 MasterCard

Trace # 879

Operator 190

Inv # 23

Auth # 213039

RRN 001968001

Purchase

Tip

Total

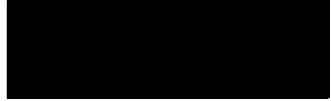
\$69.55

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

www.yellowcabvictoria.com
250-381-2222

Mr Sam Sullivan



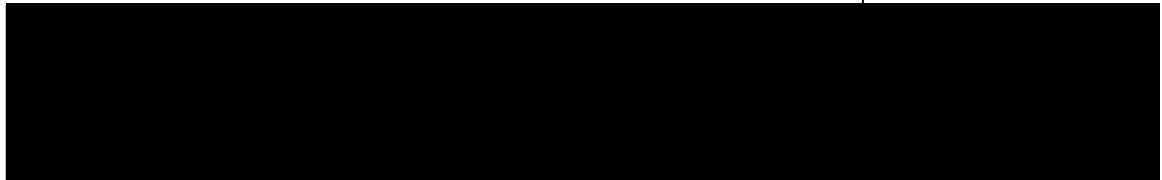
Room :
Arrival Date : 04/04/16
Invoice No. :
Folio No. :
Conf. No. :
Cashier No. : 11
Billing Date : 04/28/16
A/R Number

MLA

Date	Description	Debit	Credit
04/04/16	Room Charge	94.00	
04/04/16	Destination Marketing Fée	0.94	
04/04/16	Provincial Room Tax	9.49	
04/04/16	Room GST	4.75	
<hr/>			
04/05/16	Mastercard XXXXXX		
Room H/GST Total - 4.75		Total	
Other H/GST Total - 0.00			
H/GST #	PST#	Balance	0.00

109.18

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.

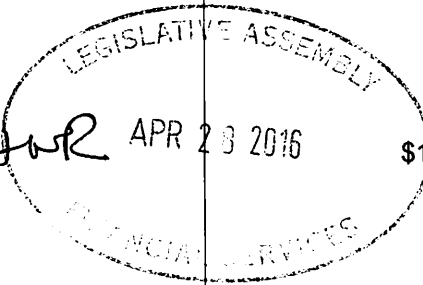




**Members Of The Legislative Assembly
Travel Claim Form**

Claim Number: 36644
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** April 14, 2016
Constituency: Vancouver-False Creek
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Vancouver **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
April 11, 2016	Ferry	\$16.70
April 11, 2016	MLA Per Diem - Victoria	\$61.00
April 11, 2016	Taxi	\$78.00
April 11, 2016	Taxi	\$68.75
April 12, 2016	MLA Per Diem - Victoria	\$61.00
April 13, 2016	MLA Per Diem - Victoria	\$61.00
April 14, 2016	[REDACTED]	\$1254.42
April 14, 2016	Ferry	\$16.70
April 14, 2016	MLA Per Diem - Victoria	\$61.00
April 14, 2016	Taxi	\$82.00
April 14, 2016	Taxi	\$68.35



Total Payable \$1828.92

Date 28 Apr 2016

Signature [REDACTED]
 Sullivan, Sam VM150101-HWR
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]	[REDACTED]	[REDACTED]	[REDACTED]
------------	------------	------------	------------

Date 4/28/16

Signature _____
 Spending Authority Signature

[Redacted]

From: reservations@[Redacted]
Sent: March-18-16 4:11 PM
To: [Redacted]
Subject: Confirmation from [Redacted]

[Redacted]

Dear Sam Sullivan :

Thank you for choosing [Redacted] for your upcoming trip to Victoria. Please find below your reservation confirmation details.

Guest Info	Hotel Info
Sam Sullivan Email: [Redacted] Phone: Billing Address: [Redacted] [Redacted] Canada	[Redacted]

Reservation Info	Charge
Confirmation Number: [Redacted] Number of Adults: 2 Number of Children: 0 Room Type: 1 BR Suite Arrival Date: 4/5/2016 Departure Date: 4/14/2016 Total Stay: 9	\$1,080.00

Your arrival is guaranteed with the credit card provided at the time of booking. An additional pre-authorization will be processed on the primary Guest's credit card upon check-in; the amount processed ranges from \$100 to \$1000 CDN plus full nights of room & taxes, dependent on the length of stay and room type. Fees and deposits are subject to change, and may not include taxes.

Check in time: [Redacted]
 Check out time: [Redacted]
 Tax & Fee Percentage: 16.15%
 Parking: \$15 per evening or valet parking is \$20 per evening plus taxes
 Smoking Policy: [Redacted] is a 100% non-smoking property.
 Cancellation Policy: 48 Hours priors to arrival date; Reservation Policy may differ

[Redacted]

Pet Policy: Any applicable pet fees will be included in your Total Room Charge

Tax	\$174.42
Total Room Charge	\$1,254.42

Our Guest Services Team would be delighted to assist you with any recommendations or reservations.

Thank you, and we look forward to your arrival!

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240084

VANCOUVER TAXI
790 CLARK DR
VANCOUVER BC

Tsawwassen
To
Swartz Bay



Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 8B7

**** PURCHASE ****

~~04-10-2016~~

Acct # ***** C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A0000000041010 MasterCard

Operator 084
Trace # 1025
Inv. # 084
Auth # 122600 RRN 001856002

Purchase Tip \$68.75
Total N/A

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

www.yellowcabvictoria.com
250-381-2222

CARD *****
CARD TYPE MASTERCARD
DATE 2016/04/11
TIME 7323
CLERK ID 333
RECEIPT NUMBER CB5023951-001-777-001-0

PURCHASE AMOUNT \$78.00
TIP N/A
TOTAL

MasterCard
A0000000041010
8E25CD4C904C67BF
0000008000-E800
116FDBD391B3DC48

APPROVED

AUTH# 093713 01-027
THANK YOU

CARDHOLDER

IMPORTANT - SEE REVERSE SIDE OF TICKET

GST-
604*671*1111

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/11

2 Adult 34.40
Fuel Rebate 1.00-
Total 33.40

MasterCard
***** 33.40
AUTH 093907 66251448 0010012448 C
MasterCard
A0000000041010 / 0000000000 / E800

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

16.70

TSA 11 Apr 2016

SEE REVERSE SIDE OF TICKET
K10SK00742

Swartz Bay
To
Tsawwassen
BC Ferries

Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 8B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/14

2 Adult	34.40
Fuel Rebate	1.00-
Total	33.40
MasterCard *****	33.40
AUTH 213888 66251533 0010015530 C	
MasterCard R0000000041010 / 0000000000 / E800	

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

16-20

SWB 14 Apr 2016

SEE REVERSE SIDE OF TICKET
KIOSK00542

DELTA SUNSHINE TAXI # 14
13425 71A AVE.
SURREY BC

CARD *****
CARD TYPE MASTERCARD
DATE 2016/04/14
TIME 0447
CLERK ID 002
RECEIPT NUMBER
C85034489-001-180-006-0

PURCHASE
AMOUNT
TIP
TOTAL

\$82.00

MasterCard
A0000000041010
E554731BB9A67D22
0000008000-E800
17C08A9688DC09AA

APPROVED

AUTH# 003022
THANK YOU

01-027

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240013

*** PURCHASE ***
04-14-2016
Acct # *****
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A0000000041010 MasterCard

Trace # 5042 Operator 253
Inv. # 253
Auth # 213534 RRN 0:1716002

Purchase
Tip
Total

\$68.35

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

www.yellowcabvictoria.com
250-381-2222



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36654

MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** April 28, 2016

Constituency: Vancouver-False Creek

Type Of Trip: MLA Travel

Prepared By: [Redacted]

Claimant Type: Member of Legislative Assembly

Travel From: Vancouver

Travel To: Victoria

Trip Details:

Date	Expenses	Amount
April 24, 2016	Dinner Only - Victoria	\$36.00
April 24, 2016	Ferry	\$16.70
April 24, 2016	Taxi	\$68.15
April 24, 2016	Taxi	\$80.00
April 25, 2016	Breakfast & Lunch Only-Victoria	\$39.50
April 26, 2016	MLA Per Diem - Victoria	\$61.00
April 27, 2016	MLA Per Diem - Victoria	\$61.00
April 28, 2016	Ferry	\$16.70
April 28, 2016	MLA Per Diem - Victoria	\$61.00
April 28, 2016	Taxi	\$70.45
April 28, 2016	Taxi	\$82.00

Total Payable \$592.50

Date 03 May 2016

Signature [Redacted]

*Sullivan, Sam VM150101-HWR
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]	[Redacted]	[Redacted]	[Redacted]

Date 5/12/16

Signature [Redacted]

Spending Authority Signature

Tsawwassen
To
Swartz Bay
BCFerries
Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/24

Adult
Fuel Rebate
Total
MasterCard

AUTH 194415 66251538 0010013348 C
MasterCard
0000000041010 / 0000000000 / E800

VERIFIED BY PIN

01 APPROVED - THANK YOU

CARDHOLDER COPY

16.70

TSA 24 Apr 2016

SEE REVERSE SIDE OF TICKET
KIOSK00744

Swartz Bay
To
Tsawwassen
BCFerries
Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/28

Adult
Fuel Rebate
Total
MasterCard

AUTH 214036 66251533 0010017778 C
MasterCard
0000000041010 / 0000000000 / E800

VERIFIED BY PIN

01 APPROVED - THANK YOU

CARDHOLDER COPY

16.70

SWB 28 Apr 2016

SEE REVERSE SIDE OF TICKET
KIOSK00542

DELTA SUNSHINE TAXI # 14
13425 71A AVE
SURREY BC

VANCOUVER TAXI
790 CLARK DR
VANCOUVER BC

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH218524000A

CARD *****
CARD TYPE MASTERCARD
DATE 2016/04/28
TIME 0971
CLERK ID 1162
RECEIPT NUMBER
C85034489-001-195-004-0

CARD *****
CARD TYPE MASTERCARD
DATE 2016/04/24
TIME 8663
CLERK ID 333
RECEIPT NUMBER
C85026194-001-340-008-0

PURCHASE
AMOUNT \$82.00
TIP
TOTAL

PURCHASE
AMOUNT \$80.00
TIP
TOTAL

**** PURCHASE ****
04-24-2016
Acct # ***** C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A000000041010 MasterCard

Operator 252
Trace # 2516
Inv. # 252
Auth # 224255 RRN 001910004

MasterCard
A0000000041010
59C8033A00DECF51
0000008000-E800
DC4697AF31F272E7

MasterCard
A0000000041010
CA2FD1CF12491629
0000008000-E800
805678F1911660A4

Purchase
Tip \$68.15
Total

APPROVED
AUTH# 005501 01-027
THANK YOU

APPROVED
AUTH# 193712 01-027
THANK YOU

Retain this copy for your records
Customer copy

CARDHOLDER COPY

CARDHOLDER COPY

www.yellowcabvictoria.com
250-381-2222

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

604*871*1111
GST

YELLOW CAB
817 FIGGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240090

**** PURCHASE ****

04-28-2016
Acct # ***** [REDACTED] C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A0000000041010 MasterCard

Trace # 1133 Operator 190
Inv. # 23
Auth # 213724 RRN 001010001

Purchase
Tip
Total [REDACTED] \$70.45

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

www.yellowcabvictoria.com
250-381-2222



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36739
 MLA Name: Sullivan, Sam VM150101-HWR Claim Date: May 03, 2016
 Constituency: Vancouver-False Creek
 Type Of Trip: MLA Travel
 Prepared By: [Redacted]
 Claimant Type: Member of Legislative Assembly
 Travel From: Vancouver Travel To: Victoria
 Trip Details:

Date	Expenses	Amount
May 02, 2016	Ferry	\$8.35
May 02, 2016	Hotel Victoria - With Receipts	\$1045.35
May 02, 2016	Taxi	\$88.90
May 02, 2016	Taxi	\$81.35
May 03, 2016	Ferry	\$8.35
May 03, 2016	Taxi	\$75.50
May 03, 2016	Taxi	\$68.55

Total Payable \$1376.35

Date 09 May 2016

Signature [Redacted]
 Sullivan, Sam VM150101-HWR
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 5/12/16

Signature [Redacted]
 Spending Authority Signature

PURCHASE
BCFerries

2016/05/02
Tsawwassen
To
Swartz Bay
AUTH ONLY

1	Disabled Adult	8.60
	Fuel Rebate	0.25-
	Total	8.35
	MasterCard	8.35
	***** (S)	
	005/01-66223123	
	0019410200	
	Approved: 094633	
	CHANGE DUE	0.00

FOOT AREA 5A

TSA 02 May 2016



SEE REVERSE SIDE OF TICKET

PURCHASE
BCFerries

2016/05/03
Swartz Bay
To
Tsawwassen
AUTH ONLY

1	Disabled Adult	8.60
	Fuel Rebate	0.25
	Total	8.35
	MasterCard	8.35
	***** (S)	
	005/01-66223105	
	0019461290	
	Approved: 213603	
	CHANGE DUE	0.00

FOOT AREA 0T

SMB 03 MAY 2016



SEE REVERSE SIDE OF TICKET

YELLOW CAB
817 FIGGARD STREET V8W1R9
VICTORIA BC
21852400
GH218524000A

**** PURCHASE ****

05-03-2016
Acct # ***** C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A0000000041010 MasterCard

Operator 352
Trace # 2611
Inv. # 352
Auth # 213242 RRN 001934001

Purchase
Tip \$68.55
Total

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

www.yellowcabvictoria.com
250-381-2222

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240090

**** PURCHASE ****

05-02-2016
Acct # ***** C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A0000000041010 MasterCard

Trace # 1170 Operator 90
Inv. # 0908135
Auth # 123230 RRN 001016003

Total \$81.35

(00) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

www.yellowcabvictoria.com
250-381-2222

DELTA SUNSHINE TAXI # 14
13425 71A AVE
SURREY BC

CARD *****
CARD TYPE MASTERCARD
DATE 2016/05/03
TIME 5336
CLERK ID 817
RECEIPT NUMBER
C85034489-001-201-005-0

PURCHASE AMOUNT \$75.50
TIP
TOTAL

MasterCard
A0000000041010
5CE28034F1DF3EED
0000008000-E800
D18025A8F2E241D1

APPROVED

AUTH# 003607 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

VANCOUVER TAXI
790 CLARK DR
VANCOUVER BC

CARD *****
CARD TYPE MASTERCARD
DATE 2016/05/02
TIME 5200
CLERK ID 52792
RECEIPT NUMBER
C85021119-001-081-001-0

PURCHASE TOTAL \$88.90

MasterCard
A0000000041010
E49CBB6AE8D5C7C9
0000008000-E800
E9EEC37488FE9D0E

APPROVED

AUTH# 094908 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

Sam Sullivan

Confirmation No: [REDACTED]

Arrival: 4/24/2016

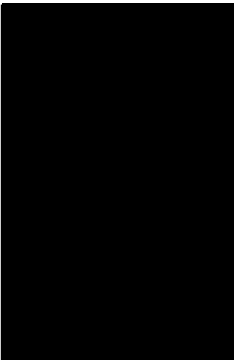
Departure: 5/19/2016

Date: 5/3/2016

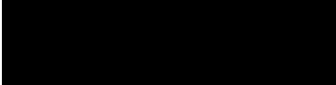
Page 1 of 3

Date	Name	Room Number	Description	Debit/Credit
4/24/2016	Sam Sullivan	[REDACTED]	Room Rate	100.00
4/24/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
4/24/2016	Sam Sullivan	[REDACTED]	HST Hotel Room (10.10%)	10.10
4/24/2016	Sam Sullivan	[REDACTED]	DMF Destination Marketing Fee (1%)	1.00
4/25/2016	Sam Sullivan	[REDACTED]	Room Rate	100.00
4/25/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
4/25/2016	Sam Sullivan	[REDACTED]	HST Hotel Room (10.10%)	10.10
4/25/2016	Sam Sullivan	[REDACTED]	DMF Destination Marketing Fee (1%)	1.00
4/26/2016	Sam Sullivan	[REDACTED]	Room Rate	100.00
4/26/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
4/26/2016	Sam Sullivan	[REDACTED]	HST Hotel Room (10.10%)	10.10
4/26/2016	Sam Sullivan	[REDACTED]	DMF Destination Marketing Fee (1%)	1.00
4/27/2016	Sam Sullivan	[REDACTED]	Room Rate	100.00
4/27/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
4/27/2016	Sam Sullivan	[REDACTED]	HST Hotel Room (10.10%)	10.10
4/27/2016	Sam Sullivan	[REDACTED]	DMF Destination Marketing Fee (1%)	1.00
4/28/2016	Sam Sullivan	[REDACTED]	Room Rate	100.00
4/28/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
4/28/2016	Sam Sullivan	[REDACTED]	HST Hotel Room	10.10

GST # [REDACTED]



Sam Sullivan



Confirmation No: [REDACTED]

Arrival: 4/24/2016

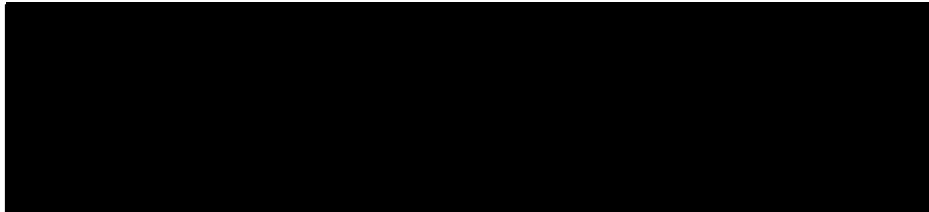
Departure: 5/19/2016

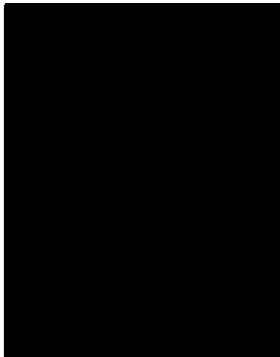
Date: 5/3/2016

Page 2 of 3

Date	Name	Room Number	Description	Debit/Credit
4/28/2016	Sam Sullivan	[REDACTED]	(10.10%) DMF Destination	1.00
4/29/2016	Sam Sullivan	[REDACTED]	Marketing Fee (1%) Room Rate	100.00
4/29/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
4/29/2016	Sam Sullivan	[REDACTED]	HST Hotel Room	10.10
4/29/2016	Sam Sullivan	[REDACTED]	(10.10%) DMF Destination	1.00
4/30/2016	Sam Sullivan	[REDACTED]	Marketing Fee (1%) Room Rate	100.00
4/30/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
4/30/2016	Sam Sullivan	[REDACTED]	HST Hotel Room	10.10
4/30/2016	Sam Sullivan	[REDACTED]	(10.10%) DMF Destination	1.00
5/1/2016	Sam Sullivan	[REDACTED]	Marketing Fee (1%) Room Rate	100.00
5/1/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
5/1/2016	Sam Sullivan	[REDACTED]	HST Hotel Room	10.10
5/1/2016	Sam Sullivan	[REDACTED]	(10.10%) DMF Destination	1.00
5/2/2016	Sam Sullivan	[REDACTED]	Marketing Fee (1%) Room Rate	100.00
5/2/2016	Sam Sullivan	[REDACTED]	GST Room (5.05%)	5.05
5/2/2016	Sam Sullivan	[REDACTED]	HST Hotel Room	10.10
5/2/2016	Sam Sullivan	[REDACTED]	(10.10%) DMF Destination	1.00
5/2/2016	Sam Sullivan	[REDACTED]	Marketing Fee (1%)	
5/3/2016	Master Card for XXXXXXXXXXXXXXX [REDACTED]			\$1,045.35

GST # [REDACTED]






Sam Sullivan



Confirmation No: 

Arrival: 4/24/2016

Departure: 5/19/2016

Date: 5/3/2016 

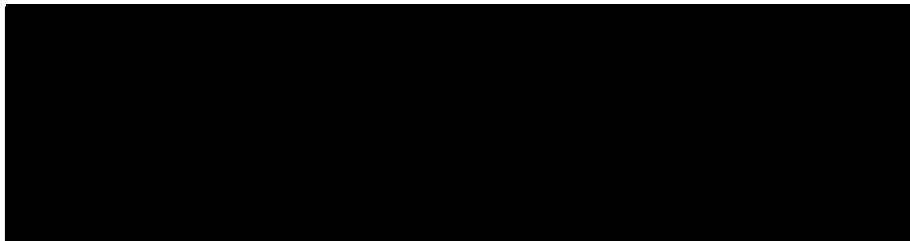
Page 3 of 3

Total Net of Tax	900.00
Tax	145.35
Total Including Tax	1,045.35
Balance Due	0.00

GST: 

X _____

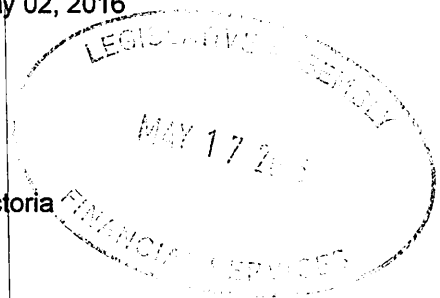
Guest Signature





Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36834
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** May 02, 2016
Constituency: Vancouver-False Creek
Type Of Trip: MLA Travel
Prepared By: [Redacted]
Claimant Type: Member of Legislative Assembly
Travel From: Vancouver **Travel To:** Victoria
Trip Details:



Date	Expenses	Amount
May 02, 2016	MLA Per Diem - Victoria	\$61.00 ✓
May 03, 2016	MLA Per Diem - Victoria	\$61.00
Total Payable		\$122.00

Date 16 May 2016

Signature [Redacted]

Sullivan, Sam VM150101-HWR
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
-------------------	--------------	-----------	--------



Date 5/17/16

Signature [Redacted]

Spending Authority Signature



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

Claim Number: 36832

MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** May 09, 2016

Constituency: Vancouver-False Creek

Type Of Trip: MLA Travel

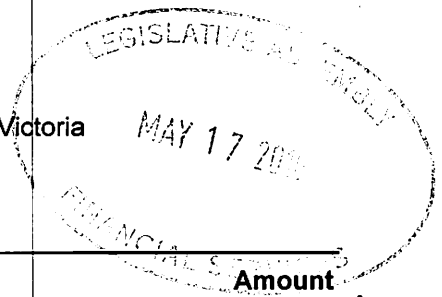
Prepared By: [Redacted]

Claimant Type: Member of Legislative Assembly

Travel From: Vancouver

Travel To: Victoria

Trip Details:



Date	Expenses	Amount
May 09, 2016	Ferry	\$16.70 +
May 09, 2016	MLA Per Diem	\$61.00
May 09, 2016	Taxi	\$74.30 +
May 09, 2016	Taxi	\$70.05 +
May 10, 2016	MLA Per Diem - Victoria	\$61.00
May 11, 2016	MLA Per Diem - Victoria	\$61.00
May 12, 2016	Ferry	\$16.70 +
May 12, 2016	MLA Per Diem - Victoria	\$61.00
May 12, 2016	Taxi	\$72.80 +
May 12, 2016	Taxi	\$65.55 +

Total Payable \$560.10

Date 16 May 2016

Signature [Redacted]
 Sullivan, Sam VM150101-HWR
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]	[Redacted]	[Redacted]	[Redacted]

Date 5/17/16

Signature [Redacted]
 Spending Authority Signature

DELTA SUNSHINE TAXI #
131
203 - 12837 76 AVE
SURREY BC

CARD *****
CARD TYPE MASTERCARD
DATE 2016/05/12
TIME 0326
CLERK ID 002
RECEIPT NUMBER
C85033718-001-077-002-0

PURCHASE AMOUNT \$72.80
TIP
TOTAL

MasterCard
A0000000041010
26C667F4703B05D4
0000008000-E800
366574945271AE08

APPROVED

AUTH# 002518 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240013

**** PURCHASE ****
05-12-2016
Acct # ***** C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A0000000041010 MasterCard
Trace # 5319 Operator 253
Inv. # 253
Auth # 213323 RRN 001744003

Purchase \$65.55
Tip
Total

(00) APPROVED-THANK YOU

Retain this copy for your
records
Customer copy

www.yellowcabvictoria.com
250-381-2222

Swartz Bay
To
Tsawwassen



RECEIPT - PLEASE RETAIN

PURCHASE 2016/05/12

Adult
Fuel Rebate
Total
MasterCard

RUTH 213513 66251450 0010019200
MasterCard
A0000000041010 / 0000008000 / E800

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

16:10

SWB 12 May 2016

SEE REVERSE SIDE OF TICKET

YELLOW CAB
817 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240090

VANCOUVER TAXI
790 CLARK DR
VANCOUVER BC

PURCHASE
BCFerries

**** PURCHASE ****

05-09-2016
Acct # ***** C
Exp Date **/** Card Type MC
Name: SAM SULLIVAN
A000000041010 MasterCard

CARD *****
CARD TYPE MASTERCARD
DATE 2016/05/09
TIME 2168
CLERK ID 333
RECEIPT NUMBER
C85023951-001-833-002-0

2016/05/09
Tsawwassen
To
Swartz Bay
AUTH ONLY

Trace # 1256 Operator 90
Inv. # 090
Auth # 123041 RBN 001031008

PURCHASE AMOUNT \$74.30
TIP
TOTAL

Adult
Fuel Rebate
Total
MasterCard
***** S
005/01-68223125
0019520240
Approved: 094224
CHANGE DUE 0.00

Purchase \$70.05
Tip
Total

MasterCard
A0000000041010
4312F86955E3F3FD
0000008000-EB00
A1C9A334E741A9DE

16.70
[Signature]

Retain this copy for your records
Customer copy

APPROVED

AUTH# 094041 01-027
THANK YOU

FOOT AREA 5S
ISA 09 May 2016

www.yellowcabvictoria.com
250-381-2222

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

SEE REVERSE SIDE OF TICKET

GST: [Redacted]
604*871*1111



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36643
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** April 07, 2016
Constituency: Vancouver-False Creek
Type Of Trip: Accompanying Person Travel
Prepared By: [Redacted]
Claimant Type: Accompanying Person (Family Member)
Travel From: Vancouver **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
April 04, 2016	Ferry	\$16.70 ✓
April 04, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 05, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 06, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 07, 2016	Ferry	\$16.70 ✓
April 07, 2016	Full Day Meals Per Diem Allow.	\$61.00
Total Payable		\$277.40

Date 28 Apr 2016

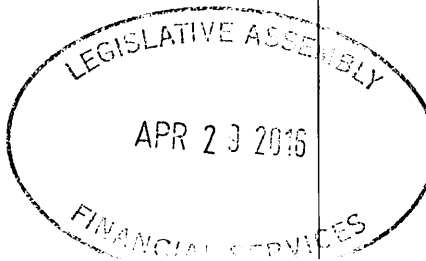
Signature [Redacted]
 Sullivan, Sam VM150101-HWR
 certified that the amount to be paid is correct, and is in accordance
 with appropriate statute or other authority for payment

ACCOUNTS OFFICE USE ONLY

Organization Code	Account Code	STOB Code	Amount
[Redacted]			

Date 4/28/16

Signature [Redacted]
 Spending Authority Signature



Tsawwassen
To
Swartz Bay
BC Ferries

Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/04

Adult

Fuel Rebate

Total

MasterCard

AUTH 094124 66251949 001001420 C

MasterCard

0000000041010 / 0000000000 / E000

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

TSA 04 Apr 2016

SEE REVERSE SIDE OF TICKET
KIOSK00745

Swartz Bay
To
Tsawwassen
BC Ferries

Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/07

Adult

Fuel Rebate

Total

MasterCard

AUTH 213222 66251947 0010017050 C

MasterCard

0000000041010 / 0000000000 / E000

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

SWB 07 Apr 2016

SEE REVERSE SIDE OF TICKET
KIOSK00546



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36646
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** April 14, 2016
Constituency: Vancouver-False Creek
Type Of Trip: Accompanying Person Travel
Prepared By: [REDACTED]
Claimant Type: Accompanying Person (Family Member)
Travel From: Vancouver **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
April 11, 2016	Ferry	\$16.70
April 11, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 12, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 13, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 14, 2016	Ferry	\$16.70
April 14, 2016	Full Day Meals Per Diem Allow.	\$61.00
Total Payable		\$277.40

Date 28 Apr 2016

Signature

[REDACTED]
 Sullivan, Sam VM150101-HWR
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

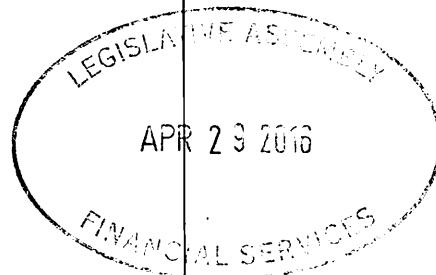
Organization Code	Account Code	STOB Code	Amount
-------------------	--------------	-----------	--------

[REDACTED]

Date 4/28/16

Signature

[REDACTED]
 Spending Authority Signature



Tsawwassen
To
Swartz Bay



Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/11

Adult

Fuel Rebate

Total

MasterCard

AUTH 093907 66251948 0010012448 C

MasterCard

8000000041010 / 0000000000 / E600

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

TSA 11 Apr 2016

SEE REVERSE SIDE OF TICKET

KIOSK00742

16.70

Swartz Bay
To
Tsawwassen



Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/14

Adult

Fuel Rebate

Total

MasterCard

AUTH 213000 66251533 0010015530 C

MasterCard

8000000041010 / 0000000000 / E600

VERIFIED BY PIN

01 APPROVED - THANK YOU 027

CARDHOLDER COPY

SWB 14 Apr 2016

SEE REVERSE SIDE OF TICKET

KIOSK00542

16.70



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36653
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** April 28, 2016
Constituency: Vancouver-False Creek
Type Of Trip: Accompanying Person Travel
Prepared By: [Redacted]
Claimant Type: Accompanying Person (Family Member)
Travel From: Vancouver **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
April 24, 2016	Ferry	\$16.70
April 25, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 26, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 27, 2016	Full Day Meals Per Diem Allow.	\$61.00
April 28, 2016	Ferry	\$16.70
April 28, 2016	Full Day Meals Per Diem Allow.	\$61.00

Total Payable \$277.40

Date 28 Apr 2016

Signature

[Redacted Signature]

Sullivan, Sam VM150101-HWR
*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 Accounts Office Information]

Date 5/12/16

Signature

[Redacted Signature]
 Spending Authority Signature

Tsawwassen
To
Swartz Bay
BC Ferries
Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/24

Adult
Fuel Rebate
Total
MasterCard

AUTH 194415 66251538 0010013348
MasterCard
A0000000041010 / 000000000 / E000

16.70

VERIFIED BY PIN
01 APPROVED - THANK YOU 027

CARDHOLDER COPY

TSA 24 Apr 2016
[Redacted]

SEE REVERSE SIDE OF TICKET
KIOSK00744

Swartz Bay
To
Tsawwassen
BC Ferries
Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 0B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/04/28

Adult
Fuel Rebate
Total
MasterCard

AUTH 214036 66251533 001001777
MasterCard
A0000000041010 / 000000000 / E000

16.70

VERIFIED BY PIN
01 APPROVED - THANK YOU 027

CARDHOLDER COPY

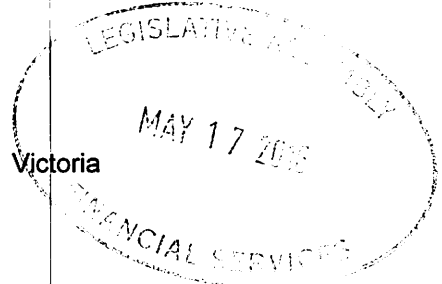
SWB 28 Apr 2016
[Redacted]

SEE REVERSE SIDE OF TICKET
KIOSK00542



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

Claim Number: 36833
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** May 09, 2016
Constituency: Vancouver-False Creek
Type Of Trip: Accompanying Person Travel
Prepared By: [REDACTED]
Claimant Type: Accompanying Person (Family Member)
Travel From: Vancouver **Travel To:** Victoria
Trip Details:



Date	Expenses	Amount
May 09, 2016	Ferry	\$16.70
May 09, 2016	Full Day Meals Per Diem Allow.	\$61.00
May 10, 2016	Full Day Meals Per Diem Allow.	\$61.00
May 11, 2016	Full Day Meals Per Diem Allow.	\$61.00
May 12, 2016	Ferry	\$16.70
May 12, 2016	Full Day Meals Per Diem Allow.	\$61.00

Total Payable \$277.40

Date 16 May 2016

Signature

[REDACTED]
 Sullivan, Sam VM150101-HWR
*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 5/17/16

Signature

Spending Authority Signature

PURCHASE



2016/05/09
Tsawwassen
To
Swartz Bay

AUTH ONLY

Adult

Fuel Rebate

Total
MasterCard

005/01-66223125
0019520240
Approved: 094224
CHANGE DUE

16.70
0.00

FOOT AREA 5S
TSA 09 May 2016

SEE REVERSE SIDE OF TICKET

Swartz Bay
To
Tsawwassen



Suite 500 - 1321 Blanshard Street
Victoria BC Canada V8W 8B7

RECEIPT - PLEASE RETAIN

PURCHASE 2016/05/12

Adult

Fuel Rebate

Total

MasterCard

AUTH 213513 66251450 8818819286 C

MasterCard

8888888841010 / 8888888888 / E888

VERIFIED BY PIN

01 APPROVED - THANK YOU 827

16.70
0.00

CARDHOLDER COPY

SWB 12 May 2016

SEE REVERSE SIDE OF TICKET



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36901
MLA Name: Sullivan, Sam VM150101-HWR **Claim Date:** May 25, 2016
Constituency: Vancouver-False Creek
Type Of Trip: Accompanying Person Travel
Prepared By: [REDACTED]
Claimant Type: Accompanying Person (LA) **Claimant Name:** [REDACTED]
Travel From: Victoria **Travel To:** Vancouver-False Creek
Trip Details:

V131425

Date	Expenses	Amount
May 25, 2016	8(km)	\$4.40
May 25, 2016	Airfare	\$205.37
May 25, 2016	Dinner Only	\$36.00
May 25, 2016	Relative/Friend Accom. Allow.	\$30.00
May 26, 2016	Breakfast & Dinner Only	\$48.50
May 26, 2016	Public Transportation	\$2.75
May 26, 2016	Public Transportation	\$2.75
Total Payable		\$329.77

Date 30 May 2016

Signature [REDACTED]
 Sullivan, Sam VM150101-HWR
certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

Date 30 May 2016

Signature [REDACTED]
 Accompanying Person (LA) - Eric Gustavson
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 6/3/16

Signature [REDACTED]
 Spending Authority Signature

Harbour Air Seaplanes

Vancouver (604) 274-1277
 Victoria (250) 384-2215
 Nanaimo (250) 714-0004
 Ganges 1-877-537-9880

Toll-free 1-800-665-0212
 Website: www.harbourair.com
 25/05/2016 [REDACTED]
 GST: [REDACTED]

CUSTOMER COPY

Booking Information:

Wednesday, May 25, 2016
 1 Passenger(s)

Flight [REDACTED] /Twin Otter
 Departs [REDACTED] @ Victoria Harbour
 Arrives [REDACTED] @ Vancouver Harbour

Invoice #: 5108070

1.00 Sked 200 : Carbon Offset \$0.50 CDN
~~1.00 Sked 200 : VUEC Terminal \$9.00 CDN~~
 1.00 Sked 200 : Web Fare \$185.23 CDN

Goods and Services Tax \$9.78 GST

Grand Total \$205.37 CDN

Payment Information:

Master Card \$205.37 CDN

Date/Time 25/05/2016 [REDACTED]
 Station HYWHCS02
 Terminal ID HYWHCC02
 Action Purchase/Telephone
 Card Type M/C
 Card Number **** * [REDACTED] M
 Amount \$205.37
 Authorization 09569Z
 Trace Number 356001001056
 Response 00-001/APPROVED 09569Z

CUSTOMER COPY

Free WIFI Password: [REDACTED]

TH.MY.25 [REDACTED] -1- 1 275

Date Expires at Zone Issued #of Zones Value Category

CONDITIONS OF USE Valid for travel for fare indicated until expiry date/time period printed, on South Coast British Columbia Transportation Authority (TransLink) service region buses, including for transfer to HandyDART, in accordance with the Transit Tariff. Proof of Payment/Bus Transfer must be retained while in the Fare Paid Zone, and be produced for inspection on request by an official of TransLink, its subsidiaries, or operating companies. Not valid for travel on SkyTrain and SeaBus. To travel on SkyTrain or SeaBus, Compass fare media is required in accordance with the South Coast British Columbia Transportation Authority (TransLink) Transit Tariff. Use of this Proof of payment/Bus Transfer is subject to the terms and conditions of South Coast British Columbia Transportation Authority (TransLink) Transit Tariff. Contravention may result in confiscation and/or prosecution.
 TransLink Customer Information: 604.953.3333. TransLink Lost Property: 604.953.3334.

NOT FOR RESALE/NON TRANSFERABLE/VOID IF ALTERED.

EDM2251-2

TH.MY.26 [REDACTED] P -1- 1 275

Date Expires at Zone Issued #of Zones Value Category

CONDITIONS OF USE Valid for travel for fare indicated until expiry date/time period printed, on South Coast British Columbia Transportation Authority (TransLink) service region buses, including for transfer to HandyDART, in accordance with the Transit Tariff. Proof of Payment/Bus Transfer must be retained while in the Fare Paid Zone, and be produced for inspection on request by an official of TransLink, its subsidiaries, or operating companies. Not valid for travel on SkyTrain and SeaBus. To travel on SkyTrain or SeaBus, Compass fare media is required in accordance with the South Coast British Columbia Transportation Authority (TransLink) Transit Tariff. Use of this Proof of payment/Bus Transfer is subject to the terms and conditions of South Coast British Columbia Transportation Authority (TransLink) Transit Tariff. Contravention may result in confiscation and/or prosecution.
 TransLink Customer Information: 604.953.3333. TransLink Lost Property: 604.953.3334.

NOT FOR RESALE/NON TRANSFERABLE/VOID IF ALTERED.

EDM2251-1