



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

Claim Number: 37108
 MLA Name: Reid, Linda VM089019 Claim Date: July 06, 2016
 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 21, 2016	Taxi	\$9.00 ✓
June 21, 2016	Taxi	\$20.90 ✓
June 25, 2016	Parking	\$10.00 ✓
June 29, 2016	Parking	\$2.50 ✓
July 02, 2016	Parking	\$4.00 ✓
July 03, 2016	Miscellaneous Annual travel insurance policy	\$117.15 ✓
July 04, 2016	Parking	\$3.00 ✓
July 06, 2016	Lunch Only - Victoria	\$27.00
July 06, 2016	Quick tickets [REDACTED] - to be invoiced	\$0.00
July 06, 2016	Taxi Richmond Taxi invoiced \$20	\$0.00
Total Payable		\$193.55

Date 07 Jul 2016

Signature _____

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	Amount
[REDACTED]			



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37108

MLA Name: Reid, Linda VM089019

Claim Date: July 06, 2016

Constituency: Richmond East

Type Of Trip: MLA Travel

Organization Code	Account Code	STOB Code	Amount
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Date 7/28/16

Signature



Spending Authority Signature



CONFIRMATION OF COVERAGE (B)

Issued Date: July 4, 2016

Central Agencies Ltd. 1192
103-11020 No. 5 Road
RICHMOND, British Columbia
V7A 4E7
804-276-0234

LINDA REID

Contact Number:

Policy Number

Insured Persons		Coverage Dates	
Name	Date of Birth (yyyy/mm/dd)	Application Date: 2016/07/03	Effective Date: 2016/08/08
LINDA REID		Expiry Date: 2017/08/05	Coverage Days per Trip: 15
Plan Name and Benefits Summary		Payment Details	
Multi-Trip Basic Medical Age 0-59		Payment Method: Mastercard	
Benefit amounts are per person, per trip.		Card Number: [REDACTED]	
Hospital and Medical	\$10,000,000	Amount: \$234.30	
Deductible: \$0		Approval Code: 114825	
Premium: \$234.30	Taxes: \$0.00	Response Code: 001/00	
	Total: \$234.30	Terminal ID: AZGAMAIN21	
NO CHARGE FOR DEPENDANT CHILDREN		Sequence #: 014001001104	
SPEAKER'S PORTION \$117.15		Transaction Time: 2016/07/04	

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 policy. If you have not received your policy, contact your travel insurance representative.

Pre-Existing Conditions Exclusion: Emergency Hospital & Medical 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 Allianz Global Assistance within 24 hours of admission to a *hospital* and before any surgery is performed. Failure to notify Allianz Global 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 Allianz Global Assistance: Toll Free Canada/U.S.A. 1-800-998-1862 Toll Free Worldwide: 00-800-842-08420
If unable to contact us through these toll free numbers, please call collect: 416-340-0049.

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.

BLUEBIRD CABS LTD.
CAB 23
2612 QUADRA ST, 2ND FLOOR
VICTORIA, BC V8T 4E4
250-382-2222

TERM ID: BW342463

BATCH#: 909
SHIFT#: 003

Sale

INVT: 000000065
MCARD
Chip
SEC#: 978001001064
Application Label: MasterCard
AID: A0000300041010
IVR 00 00 00 00 00
TSI: E8 00

Total: CAD\$ 9.00

APPROVED 194005
001/00

21-Jun-16

CUSTOMER COPY
VICTORIA'S FIRST CHOICE
THANK YOU!

790 CLARK DR
VANCOUVER BC

CARD *****
CARD TYPE MASTERCARD
DATE 2016/06/21
TIME 5088
CLERK ID 88690
RECEIPT NUMBER
080016072-001-840-003

PLACE FACE UP ON DASH
Re-Entry Code

Expiration Date/Time

JUN 25, 2016

PURCHASE AMOUNT \$16.90
TIP \$4.00
TOTAL \$20.90

MasterCard
A0000000041010
886900E46269E2A9
0000008000-E800
00800220051AF7DF

Purchase Date/Time: Jun 24, 2016
Total Due: \$10.00 Rate: HOTEL STAFF ONLY
Total Paid: \$10.00 Payment Type: Card
Ticket #: 00006294
S/N #: 100009030031
Setting: 603
Mach Name: METER 1

***** MasterCard
Auth #: 223227

Tear off receipt portion
Note access code
For re-entry to parkade

APPROVED

AUTH# 205902 01-02
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS.

604*871*1111

RECEIPT

Expiration Date/Time Jun 25, 2016
Purchase Date/Time: Jun 24, 2016

Total Due: \$10.00 Rate: HOTEL STAFF ONLY
Total Paid: \$10.00 Payment Type: Card
Ticket #: 00006294
Setting: 603
Mach Name: METER 1

***** MasterCard

Auth #: 223227

PLACE FACE UP ON DASH
Street Parking
City of Richmond
www.richmond.ca

Expiration Date/Time

JUN 29, 2016

Purchase Date/Time: Jun 29, 2016
Total Due: \$2.50 Rate: \$2.50 For 1 Hour
Total Paid: \$2.50 Payment Type: Card
Ticket #: 00001789
S/N #: 520015040079
Setting:
Mach Name: 01160315

***** MasterCard

Auth #: 183713

Thank You!
Please come again

**RECEIPT
Impark**

www.impark.com

License Plate Number

Expiration Date/Time

JUL 02, 2016

Purchase Date/Time: Jul 02, 2016
Total Due: \$4.00 Rate: \$4.00 For 2.5 Hours
Total Paid: \$4.00 Payment Type: Card
Ticket #: 00022695
S/N #: 520015321300
Setting: 2221
Mach Name: Meter - 03

***** /isa

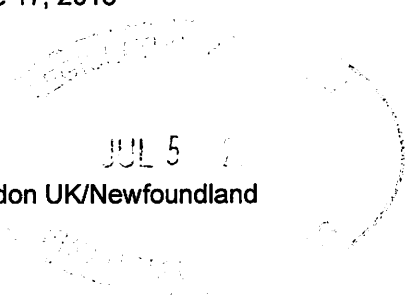
Auth #: 075017

Thank You!
Please come again



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37020
MLA Name: Reid, Linda VM089019 **Claim Date:** June 17, 2016
Constituency: Richmond East
Type Of Trip: CPA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Richmond **Travel To:** London UK/Newfoundland
Trip Details: Cost of future flights on [REDACTED] Statement



Date	Expenses	Amount
June 17, 2016	Airfare	\$4739.65
Total Payable		\$4739.65

Date 21 Jun 2016 Signature [REDACTED]
 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	Amount
[REDACTED]			

Date JUN 27/16 Signature [REDACTED]
 Spending Authority Signature

From: Reid.MLA, Linda
Sent: June 17, 2016 2:36 PM
To: [REDACTED]
Subject: FW: Expedia CruiseShipCenters Invoice

FYI

From: [REDACTED]@cruiseshipcenters.com]
Sent: June 17, 2016 [REDACTED]
To: Reid.MLA, Linda <Linda.Reid.MLA@leg.bc.ca>
Cc: [REDACTED]@cruiseshipcenters.com>
Subject: Expedia CruiseShipCenters Invoice

Dear Linda Reid,
 Here is the invoice for you Vancouver to London - St John's and then Halifax to Vancouver.



Expedia CruiseShipCenters, South Delta
 152 - 4857 Elliott Street
 Delta BC V4K 2X7
 604-946-7444
 Reg. No. [REDACTED]
 southdelta@cruiseshipcenters.com

Invoice # 101027-2016-00524

Printed Jun 17, 2016

	CAD
Invoice Amount	4,739.65
Payments to Date	(4,739.65)
Balance Due	0.00

Ms. Linda Reid

Canada

Contact Tel. [REDACTED]

Final Payment(s) Schedule
 AIR - Jun 16, 2016
 AIR - Jun 16, 2016

Consultant: [REDACTED]@cruiseshipcenters.com)

AIR:		Air Canada (Intair)				Arrival		
# Airline	Operated by	Flight Number	Departure					
1 Air Canada	Air Canada	[REDACTED]	Vancouver	Jul 11, 2016 at [REDACTED]		Heathrow	Jul 12, 2016 at [REDACTED]	
2 Air Canada	Air Canada	[REDACTED]	Heathrow	Jul 15, 2016 at [REDACTED]		St John's	Jul 15, 2016 at [REDACTED]	
Guest			Seating		Air Fare	Deviation	Tax	Summary
Mrs Linda [REDACTED] Reid			[REDACTED]		2,958.00	0.00	1,208.14	4,166.14 CAD
Total:					2,958.00	0.00	1,208.14	4,166.14 CAD

Booking Date: Jun 16, 2016

Booking Number: [REDACTED]

Notes:

Business Class SEAT selection: [REDACTED]
 directions Air Canada Ref # [REDACTED]

AIR:		Air Canada (Intair)					
# Airline	Operated by	Flight Number	Departure	Aug 04, 2016 at	Arrival	Aug 04, 2016 at	
1 Air Canada	Air Canada		Halifax		Toronto		
2 Air Canada	Air Canada		Toronto		Vancouver		
Guest			Seating		Air Fare	Deviation	Tax
Mrs Linda Reid					433.75	0.00	103.01
Total:					433.75	0.00	103.01
							Summary
							536.76 CAD
							Booking Fee: 35.00 CAD
							Other Tax: 1.75 CAD
Booking Date:	Jun 16, 2016	Booking Number:					573.51 CAD
Notes:					Economy Class Air Canada Ref #		

Customer Payment History						
Date	Merchant Name	Type	Method	Name		CAD
Jun 17, 2016	intair air	Final	Master Card	Linda Reid		4,166.14
Jun 17, 2016	Intair air	Final	Master Card	Linda Reid		573.51
				Payment(s) Total		4,739.65

Documentation Requirements:
 You have indicated you are Canadian citizen(s), therefore, a valid Passport is required for entry into the countries listed in your itinerary. Please note that entry into another country may be refused even if the required information and travel documents are complete. The expiry date of your Passport(s) is required to be valid for at least 6 months past your expected return date. For citizens of certain countries, including Canada & US, visa may be required for entry into some countries that your cruise will visit. Please check with the proper government authorities for specific requirements to avoid any entry issues. Expedia CruiseShipCenters is not responsible for any missing or inaccurate information provided to it concerning required documentation for travelers, or any changes to documentation requirements. It is the responsibility of the traveler to determine what travel documents are required, and to obtain all necessary documentation.

Passenger #1: Linda Reid **Citizenship : CANADA** **Documents Required :**

Disclaimer:
 Expedia CruiseShipCenters is acting as intermediary and agent for suppliers ("principals" identified on the attached or accompanying documents) in selling services, or in accepting reservations or bookings for services which are not directly supplied by this agency (such as cruises, air carriage, hotel accommodations, ground transportation, meals, tours, etc.). This agency, therefore, shall not be responsible for breach of contract or any intentional or careless actions or omissions on the part of such suppliers, which result in any loss, damage, delay, or injury to you or your travel companions or group members. Unless the term "guaranteed" is specifically stated in writing on your ticket, invoice or reservation itinerary, we do not guarantee any of such suppliers' rates, bookings or reservation. Agents shall not be responsible for any injuries, damages, or losses caused to any traveller in connection with terrorist activities, social or labour unrest, mechanical or construction difficulties, diseases, local laws, climatic conditions, abnormal conditions or developments, or any other actions, omissions or conditions outside the agent's control. By embarking upon his/her travel, the traveller(s) voluntarily assume(s) all risks involved with such travel, whether expected or unexpected. The traveller is hereby warned of such risks, and is advised to obtain appropriate insurance coverage against them. Your retention of tickets, reservations or bookings after issuance shall constitute consent to the above, and an agreement on your part to convey the contents hereto to your travel companions or group members.

Note: Expedia CruiseShipCenters reserves the right to charge a cancellation fee of \$100 per stateroom on all cruise travel or \$100 for air or other travel arrangements. All bookings are subject to the applicable Terms and Conditions of the individual travel provider (air line, cruise line, hotel, etc.) including any applicable cancellation penalties.
 Price increases may occur beyond our control, but will be limited to 7% increase, other than PST and GST. If the increase is greater than 7% the customer has the right to cancel the order and receive a full refund, or accept the price increase at their choice. No price increases are permitted after the customer is paid in full.

Travel Outside Canada
 Documentation Requirements A valid Passport is required for entry into the countries listed in your Itinerary. Please note that entry into another country may be refused even if the required information and travel documents are complete. The expiry date of your Passport(s) are required to be valid for at least 6 months past your expected return date.
 Living standards and practices at the destination and standards and conditions there with respect to the provision of utilities, services and accommodation may differ from those found in Canada.
 Your flight from Vancouver to Heathrow departs from Vancouver airport. Please review your itinerary to ensure that all information is correct. Check in 2-3 hours prior to departure.
 Your flight from Halifax to Toronto departs from Halifax airport. Please review your itinerary to ensure that all information is correct. Check in 2-3 hours prior to departure.
 Please be advised that some airlines have implemented luggage fees and restrictions for air travelers. If you are traveling by air, please contact the airlines or visit the airlines' web sites for complete details regarding fees, restrictions and terms for luggage. Please understand that fees imposed by airlines are outside of Expedia



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

Claim Number: 37118
MLA Name: Reid, Linda VM089019 **Claim Date:** July 05, 2016
Constituency: Richmond East
Type Of Trip: CPA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Richmond **Travel To:** Bangladesh
Trip Details:

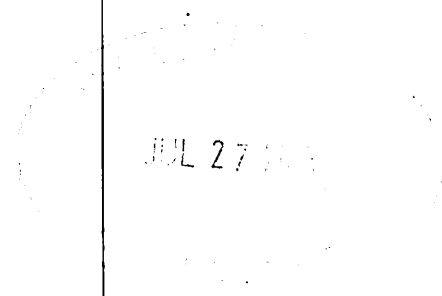
Date	Expenses	Amount
July 05, 2016	Miscellaneous Expense Travel Clinic - Bangladesh Sept Conference	\$145.00
Total Payable		\$145.00

Date 07 Jul 2016 **Signature** [REDACTED]
 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	Amount
[REDACTED]			

Date 7/28/16 **Signature** [REDACTED]
 Spending Authority Signature



Statement of Account

Printed: Jul 5, 2016

Statement Period: Jul 5, 2016 to Jul 5, 2016



Bill To SALE **** PRODUCT VANCOUVER, BC	Patient (File # [REDACTED]) PRODUCT, SALE **** VANCOUVER, BC
Referring Doctor	Birth Date Insurer PRIVATE Identity# Claim# Occupation Employer
Injury Information	

Adjuster:

Service Date	Invoice #	Description	Charges	Payments	Balance
		PREVIOUS BALANCE for PRIVATE			0.00
07/05/2016	454-0642159	PRIV	15.00	15.00 C	0.00
1.00	00167, Care Plus Icardin 20% 100ml - NO REFUNDS		00838 [REDACTED]	11776 (Vancouver Coastal Health)	
TOTAL DUE for PRIVATE					0.00

Summary Previous Balance: 0.00 Charges: 15.00 Payments: 15.00 Total Due: 0.00



CARD *****
 CARD TYPE MASTERCARD
 DATE 2016/07/05
 TIME 7527
 RECEIPT NUMBER [REDACTED]
 C84050435-001-452-011-0
 PURCHASE
 TOTAL
\$145.00

MasterCard
 A0000000041010
 3508DE52193A08B1
 0000008000-E800
 8879D4B180108B4E

APPROVED
 AUTH# 184653 01-027
 THANK YOU

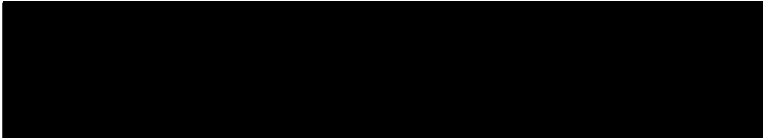
CARDHOLDER COPY
 IMPORTANT - RETAIN THIS
 COPY FOR YOUR RECORDS

Patient: PRODUCT, SALE ****

Statement of Account

Printed: Jul 5, 2016

Statement Period: Jul 5, 2016 to Jul 5, 2016



Bill To LINDA [REDACTED] REID [REDACTED]	Patient (File # [REDACTED]) REID, LINDA [REDACTED] [REDACTED]
Referring Doctor	Birth Date [REDACTED] Insurer PRIVATE Identity# Claim# Occupation Employer
Injury Information	

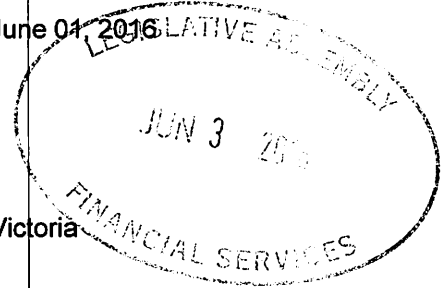
Adjuster:

Service Date	Invoice #	Description	Charges	Payments	Balance			
PREVIOUS BALANCE for PRIVATE					0.00			
07/05/2016	7-0642155	PRIV	40.00	40.00 C	0.00			
	1.00 00079, Consultation Fee 40		[REDACTED]	11776 (Vancouver Coastal Health)				
07/05/2016	7-0642156	PRIV	45.00	45.00 C	0.00			
	1.00 00001, Tet dip acel pertussis DIN# 02240255		[REDACTED]	11776 (Vancouver Coastal Health)				
07/05/2016	7-0642157	PRIV	45.00	45.00 C	0.00			
	1.00 00013, Dukoral B DIN 02247208 - NO-REFUNDS		[REDACTED]	11776 (Vancouver Coastal Health)				
07/05/2016	7-0642158	PRIV	0.00	0.00	0.00			
	1.00 00055, Travel Clinic Prescription		[REDACTED]	11776 (Vancouver Coastal Health)				
TOTAL DUE for PRIVATE					0.00			
Summary	Previous Balance:	0.00	Charges:	130.00	Payments:	130.00	Total Due:	0.00



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36928
MLA Name: Reid, Linda VM089019 **Claim Date:** June 01, 2016
Constituency: Richmond East
Type Of Trip: Accompanying Person Travel
Prepared By: [REDACTED]
Claimant Type: Accompanying Person (Family Member)
Travel From: Richmond **Travel To:** Victoria
Trip Details:



Date	Expenses	Amount
June 01, 2016	Quick tickets	\$0.00
June 1/2	[REDACTED] (\$220 x 2)	
Total Payable		\$0.00

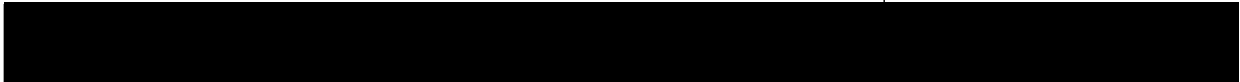
Date 01 Jun 2016

Signature

[REDACTED]
 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

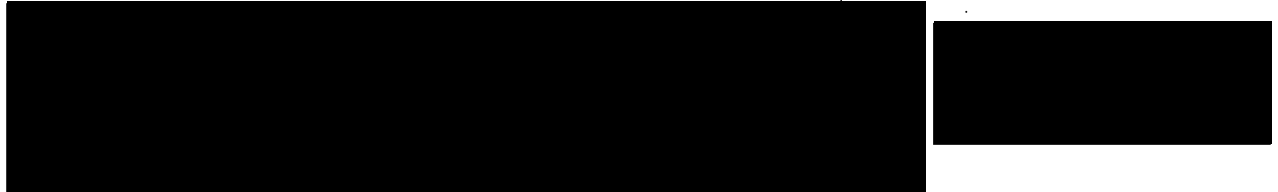
Organization Code	Account Code	STOB Code	Amount
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Date 6/3/16

Signature

[REDACTED]
 Spending Authority Signature





INVOICE

Charge To: Office of the Speaker
Room 207, Parliament Buildings
Victoria BC V8V 1X4

Invoice No. INV0000000005140
Invoice Date 15/06/2016
Print Date 16/06/2016
Account No. [REDACTED]
GST Reg. [REDACTED]

Attention: [REDACTED]

For services provided from: 01/06/2016
To: 15/06/2016

Terms: Due and payable within 10 days of the invoice date.
A service charge of 2.00% per month will be charged on overdue accounts.

Document	Description	Passenger Name	Fare	GST	Total								
[REDACTED]	CXH/ZNA Jun 07 2016 FLT: [REDACTED] BSBINV: 62929	LINDA REID	\$103.80	\$5.20	\$109.00								
[REDACTED]	ZNA/CXH Jun 07 2016 FLT: [REDACTED] BSBINV: 62930	LINDA REID	\$103.80	\$5.20	\$109.00								
[REDACTED]	YWH/CXH Jun 12 2016 FLT: [REDACTED] BSBINV: 71346	LINDA REID	\$151.42	\$7.58	\$159.00								
<p style="font-size: 2em; margin: 0;">V000239.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>CERTIFIED TO PAY:</p> <p>[REDACTED]</p> <p>SIGNATURE _____</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">ORG</th> <th style="width: 25%;">ACCOUNT</th> <th style="width: 25%;">OBJECT</th> <th style="width: 25%;">AMOUNT</th> </tr> </thead> <tbody> <tr> <td colspan="4" style="height: 40px;">[REDACTED]</td> </tr> </tbody> </table> </div> <p style="margin-top: 20px; text-align: right;"><i>Services rec'd 16/06/2016</i></p>						ORG	ACCOUNT	OBJECT	AMOUNT	[REDACTED]			
ORG	ACCOUNT	OBJECT	AMOUNT										
[REDACTED]													
Page Total			\$359.02	\$17.98	\$377.00								

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE

PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. Reid</i>	DATE <i>June 7/16</i>		
FROM	FLIGHT NO.	CLASS Y	TIME
TO	ACCOUNT NO.		
SIGNATURE	RESERVATION REFERENCE NO.		

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY

Helijet

GST #

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE

PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. Reid</i>	DATE <i>June 7/16</i>		
FROM <i>Nanaimo</i>	FLIGHT NO.	CLASS Y	TIME
TO <i>Vancouver</i>	ACCOUNT NO.		
SIGNATURE	RESERVATION REFERENCE NO.		

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY

Helijet

GST #

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE

PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>Vic Linda Reid</i>	DATE <i>June 12/16</i>		
FROM <i>Vancouver</i>	FLIGHT NO.	CLASS Y	TIME
TO <i>Van.</i>	ACCOUNT NO.		
SIGNATURE AUTHORIZING CHARGES	RESERVATION REFERENCE NO.		

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY

Helijet

GST #

claim 39021

INVOICE

Charge To: Office of the Speaker
Room 207, Parliament Buildings
Victoria BC V8V 1X4

Invoice No. INVO000000000
Invoice Date 30/06/2016
Print Date 04/07/2016
Account No. [REDACTED]
GST Reg. [REDACTED]

Attention: [REDACTED]

For services provided from: 16/06/2016
To: 30/06/2016

Terms: Due and payable within 10 days of the invoice date.
A service charge of 2.00% per month will be charged on overdue accounts.

Document	Description	Passenger Name	Fare	GST	Total
[REDACTED]	YVR/YWH Jun 21 2016 FLT	BSBINV: 79893 LINDA REID	\$199.04	\$9.96	\$209.00
[REDACTED]	YWH/CXH Jun 21 2016 FLT	BSBINV: 79894 LINDA REID	\$151.42	\$7.58	\$159.00

Y000239

QUICK TICKET

JUN 21/16

CERTIFIED TO PAY:

SIGNATURE

ORG	ACCOUNT	OBJECT	AMOUNT
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

2123

*Services rec'd
Leamington*

Page Total	\$350.46	\$17.54	\$368.00
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QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE

PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. REID</i>		DATE <i>June 21/16</i>	
FROM <i>Mc</i>	FLIGHT NO.	CLASS Y	TIME
TO <i>kn</i>	ACCOUNT NO. [REDACTED]		
SIGNATURE AUTHORIZING CHARGES [REDACTED]		RESERVATION REFERENCE NO.	

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354



PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY

Helijet

GST # [REDACTED]

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE

PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. REID</i>		DATE <i>June 21. 16.</i>	
FROM <i>YVR</i>	FLIGHT NO. [REDACTED]	CLASS Y	TIME [REDACTED]
TO <i>Van</i>	ACCOUNT NO. [REDACTED]		
SIGN [REDACTED]		RESERVATION REFERENCE NO.	

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY

Helijet

GST # [REDACTED]

NAME
NOM

JUN 21 2016

Richmond Taxi Co. Ltd. (CCL)

2440 SHELL ROAD
RICHMOND, BC
V6X 2P1
HST: [REDACTED]

Invoice

Date	Invoice #
6/30/2016	2016-06-105

*Less *429356 Being paid directly.*

Invoice To
Min /Child Care. (L.Reid Office) #130 - 8040 GARDEN CITY RICHMOND BC V6Y 2N9

V100669

Terms	Account #
Net 30	[REDACTED]

Description	HST	Amount
June 2016 GST On Sales		322.10 16.10
<i>LOCAL MILEAGE / AIRPORT MAY 31 JUN 1, 4, 7, 8, 9, 11, 18 & 21/16</i>		
CERTIFIED TO PAY:		
[REDACTED]		
SIGNATURE		
ORG	ACCOUNT	OBJECT
[REDACTED]		
[REDACTED]		
[REDACTED]		
[REDACTED]		

*L. Reid
Kearns/Strong*

-Please remember to include your account and invoice number on your cheque when mailing.

Total \$338.20

Balance Due \$338.20

Phone #	Fax #	E-mail	Web Site
604-276-2722	604-276-9444	[REDACTED]	www.richmondtaxi.ca

RICHMOND TAXI CO. LTD. RICHMOND-CABS LTD.

CORAL CABS LTD.

www.richmondtaxi.ca

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

426207

CHARGE TO: MINISTRY Trip ID No. 5211236

Cab # 89 Acc. # [REDACTED] Date 01/06/2016

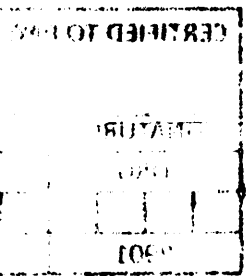
From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name LINDA REID

Amount \$ 22.00 Only Signature [REDACTED]

GST INCLUDED



RICHMOND TAXI CO. LTD. RICHMOND-CABS LTD.

CORAL CABS LTD. No 414395

www.richmondtaxi.ca

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

CHARGE TO: MINISTRY Trip ID No. 5222957

Cab # 92 Acc. # [REDACTED] Date 04/06/2016

From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name REID

Amount \$ 50.00 Only Signature [REDACTED]

GST INCLUDED

50.00

RICHMOND TAXI CO. LTD. RICHMOND CABS LTD.

CORAL CABS LTD. 428120

www.richmondtaxi.ca

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

CHARGE TO: Ministry Linda Reid Trip ID No. 5229866

Cab # 94 Acc. # [REDACTED] Date 7 June 2016

From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name L. REID

Amount \$ 53⁰⁰ Only Signature [REDACTED]

GST INCLUDED

RICHMOND TAXI CO. LTD. RICHMOND CABS LTD.

CORAL CABS LTD. 432778

www.richmondtaxi.ca

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

CHARGE TO: REID Trip ID No. 5933558

Cab # 60 Acc. # [REDACTED] Date Jun 8 2016

From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name L. REID

Amount \$ 55⁰⁰ Only Signature [REDACTED]

GST INCLUDED

RICHMOND TAXI CO. LTD. RICHMOND CABS LTD.

CORAL CABS LTD. 408757

www.richmondtaxi.ca

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

CHARGE TO: REID Trip ID No. 5737480

Cab # 77 Acc. # [REDACTED] Date Jun 9 2016

From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name L. REID

Amount \$ 50⁰⁰ Only Signature [REDACTED]

GST INCLUDED

RICHMOND TAXI CO. LTD. RICHMOND CABS LTD.

www.richmondtaxi.ca

CORAL CABS LTD.

428165

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

CHARGE TO: L. REID Trip ID No. 5242976

Cab # 64 Acc. # [REDACTED] Date June 11 2016

From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name L. REID

Amount \$ 15.00 Only Signature [REDACTED]
GST INCLUDED

RICHMOND TAXI CO. LTD. RICHMOND CABS LTD.

www.richmondtaxi.ca

CORAL CABS LTD.

430106

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

CHARGE TO: L. REID Trip ID No. 5265989

Cab # 85 Acc. # [REDACTED] Date June 18 2016

From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name L. REID

Amount \$ 46.00 Only Signature [REDACTED]
GST INCLUDED

RICHMOND TAXI CO. LTD. RICHMOND CABS LTD.

Office: 604-276-2722

24 HOUR SERVICE

Taxi Service: 604-272-1111

www.richmondtaxi.ca

435917

CHARGE TO: L. REID Trip ID No. 5272592

Cab # 15 - 139426 Acc. # [REDACTED] Date June 21 2016

From [REDACTED] In [REDACTED] Out [REDACTED]

To [REDACTED] Driver [REDACTED]

Passenger Name L. REID

Amount \$ 20.00 Only Signature [REDACTED]
GST INCLUDED



INVOICE

Charge To: Office of the Speaker
Room 207, Parliament Buildings
Victoria BC V8V 1X4

Invoice No. INV0000000005712
Invoice Date 15/07/2016
Print Date 15/07/2016
Account No. 150104
GST Reg. [REDACTED]

Attention: [REDACTED]

For services provided from: 01/07/2016
To: 15/07/2016

Terms: Due and payable within 10 days of the invoice date.
A service charge of 2.00% per month will be charged on overdue accounts.

Document	Description	Passenger Name	Fare	GST	Total								
[REDACTED]	YVR/YWH Jul 06 2016 FLT [REDACTED] BSBINV: 82330	LINDA REID	\$151.42	\$7.58	\$159.00								
[REDACTED]	YWH/CXH Jul 06 2016 FLT [REDACTED] BSBINV: 83880	LINDA REID	\$151.42	\$7.58	\$159.00								
<p><i>100023.9</i></p> <p><i>JUL 6/16 QUICK TICKET #4080-933-956 & 957 VAN-VIC-VAN</i></p> <p>CERTIFICATE [REDACTED]</p> <p>SIGNATURE [REDACTED]</p> <table border="1"> <thead> <tr> <th>ORG</th> <th>ACCOUNT</th> <th>OBJECT</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td colspan="4">[REDACTED]</td> </tr> </tbody> </table>						ORG	ACCOUNT	OBJECT	AMOUNT	[REDACTED]			
ORG	ACCOUNT	OBJECT	AMOUNT										
[REDACTED]													
Page Total			\$302.84	\$15.16	\$318.00								

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE
PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. RETI</i>	DATE <i>July 6/16</i>
FROM <i>Van YVR</i>	FLIGHT NO. [REDACTED] CLASS Y TIME
TO <i>h... KLC</i>	ACCOUNT NO. [REDACTED]
SIGNATURE [REDACTED]	RESERVATION REFERENCE NO.

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY [REDACTED]

Helijet

GST # [REDACTED]

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE
PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. RETI</i>	DATE <i>July 6/16</i>
FROM <i>VIC</i>	FLIGHT NO. [REDACTED] CLASS Y TIME
TO <i>VIAK</i>	ACCOUNT NO.
SIGNATURE [REDACTED]	RESERVATION REFERENCE NO.

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY [REDACTED]

Helijet

GST # [REDACTED]



CREDIT MEMO

Charge To: Office of the Speaker
Room 207, Parliament Buildings
Victoria BC V8V 1X4

Attention: Karen

Credit No. RTN00000000000094
Invoice Date 15/07/2016
Print Date 15/07/2016
Account No. 150104
GST Reg. [REDACTED]

For services provided from: 01/07/2016
To: 15/07/2016

Terms: Due and payable within 10 days of the invoice date.
A service charge of 2.00% per month will be charged on overdue accounts.

Document	Description	Passenger Name	Fare	GST	Total								
[REDACTED]	YVR/YWH Jun 21 2016 FLT [REDACTED] BSBINV: 79893	LINDA REID	\$47.61	\$2.39	\$50.00								
<p style="font-size: 2em; transform: rotate(-30deg); opacity: 0.5;">V000239</p> <p style="font-style: italic;">CREDIT ON JUN 21/16 QUICKTICKET #4080-983-954 VAN-VIC</p> <div style="border: 1px solid black; padding: 5px;"> <p>CERTIFICATE [REDACTED]</p> <p>SIGNATURE [REDACTED]</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">ORG</th> <th style="width: 25%;">ACCOUNT</th> <th style="width: 25%;">OBJECT</th> <th style="width: 25%;">AMOUNT</th> </tr> </thead> <tbody> <tr> <td colspan="4" style="height: 40px;">[REDACTED]</td> </tr> </tbody> </table> </div>						ORG	ACCOUNT	OBJECT	AMOUNT	[REDACTED]			
ORG	ACCOUNT	OBJECT	AMOUNT										
[REDACTED]													
Page Total			\$47.61	\$2.39	\$50.00								

Please do not pay this is a credit amount



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37219
MLA Name: Reid, Linda VM089019 **Claim Date:** July 15, 2016
Constituency: Richmond East
Type Of Trip: Speaker Authorized Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Richmond **Travel To:** London UK/Newfoundland 132
Trip Details: Commonwealth Secretariat Summit

Date	Expenses	Amount
July 12, 2016	Taxi £86.40 on [REDACTED] card	\$153.43 ✕
July 13, 2016	Miscellaneous Meals/Incidentals	\$120.25
July 13, 2016	Taxi 3 x £10 @ 0.5852	\$51.00 ✓
July 14, 2016	Miscellaneous Brkfst/Dinner/Incidentals	\$88.90
July 14, 2016	Taxi £6.80 @ 0.5809	\$12.00 ✕
July 15, 2016	Accommodation Expenses £540 on [REDACTED] Card	\$956.77 ✕
July 15, 2016	Airfare Flight cost previously claimed #37020	\$0.00
July 15, 2016	Miscellaneous Brkst/Lunch/Incidentals	\$79.10 -
July 15, 2016	Taxi £77.22 on [REDACTED] Card	\$138.14 ✕
Total Payable		\$1599.59

Date 28 Jul 2016

Signature [REDACTED]

Reid, Linda VM089019
 certified that the amount to be paid is correct, and is in accordance
 with appropriate statute or other authority for payment



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

Claim Number: 37219

MLA Name: Reid, Linda VM089019

Claim Date: July 15, 2016

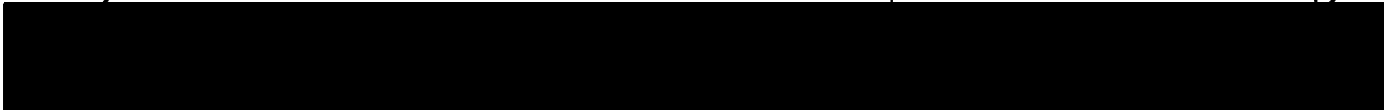
Constituency: Richmond East

Type Of Trip: Speaker Authorized Travel

Date	Expenses	Amount

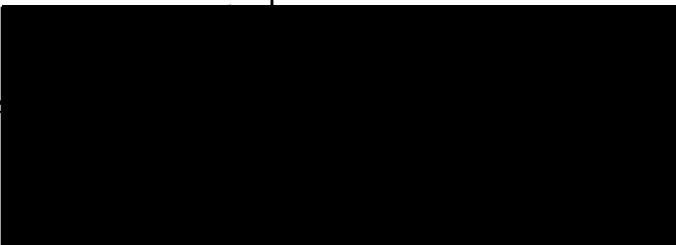
ACCOUNTS OFFICE USE ONLY

Organization Code	Account Code	STOB Code	Amount
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Date July 29/16

Signature



Aug 3/16

From: Reid.MLA, Linda
Sent: June 17, 2016 2:36 PM
To: [REDACTED]
Subject: FW: Expedia CruiseShipCenters Invoice

FYI

From: [REDACTED]
Sent: June 17, 2016 12:13 PM
To: Reid.MLA, Linda <Linda.Reid.MLA@leg.bc.ca>
Subject: Expedia CruiseShipCenters Invoice

Dear Linda Reid,
 Here is the invoice for you Vancouver to London - St John's and then Halifax to Vancouver.



Expedia CruiseShipCenters, South Delta
 152 - 4857 Elliott Street
 Delta BC V4K 2X7
 604-946-7444
 Reg [REDACTED]
 GST Reg No [REDACTED]
 southdelta@cruiseshipcenters.com

Invoice # 101027-2016-00524

Printed Jun 17, 2016

	CAD
Invoice Amount	4,739.65
Payments to Date	(4,739.65)
Balance Due	0.00

Ms. Linda Reid

[REDACTED]
 Canada

Contact Tel. [REDACTED]

Final Payment(s) Schedule
 AIR - Jun 16, 2016
 AIR - Jun 16, 2016

Consultant: [REDACTED]@cruiseshipcenters.com)
 604-946-7444, Fax: 604-946-7704

AIR:		Air Canada (Intair)		Arrival	
# Airline	Operated by	Flight Number	Departure	Arrival	
1 Air Canada	Air Canada	[REDACTED]	Vancouver Jul 11, 2016 at [REDACTED]	Heathrow	Jul 12, 2016 at [REDACTED]
2 Air Canada	Air Canada	[REDACTED]	Heathrow Jul 15, 2016 at [REDACTED]	St John's	Jul 15, 2016 at [REDACTED]

Guest	Seating	Air Fare	Deviation	Tax	Summary
Mrs Linda [REDACTED] Reid	1D	2,958.00	0.00	1,208.14	4,166.14 CAD
Total:		2,958.00	0.00	1,208.14	4,166.14 CAD

Booking Date: Jun 16, 2016

Booking Number : [REDACTED]

Notes: Business Class SEAT selection [REDACTED]
 directions Air Canada Ref # [REDACTED]

AIR: Air Canada (Intair)							
# Airline	Operated by	Flight Number	Departure	Arrival			
1 Air Canada	Air Canada		Halifax Aug 04, 2016 at	Toronto		Aug 04, 2016 at	
2 Air Canada	Air Canada		Toronto Aug 04, 2016 at	Vancouver		Aug 04, 2016 at	

Guest	Seating	Air Fare	Deviation	Tax	Summary
Mrs Linda Reid		433.75	0.00	103.01	536.76 CAD
Total:		433.75	0.00	103.01	536.76 CAD
				Booking Fee:	35.00 CAD
				Other Tax:	1.75 CAD

Booking Date: Jun 16, 2016 Booking Number: 573.51 CAD
Notes: Economy Class Air Canada Ref #

Customer Payment History

Date	Merchant Name	Type	Method	Name	CAD
Jun 17, 2016	intair air	Final	Master Card	Linda Reid	4,166.14
Jun 17, 2016	Intair air	Final	Master Card	Linda Reid	573.51
				Payment(s) Total	4,739.65

Documentation Requirements:

You have indicated you are Canadian citizen(s), therefore, a valid Passport is required for entry into the countries listed in your itinerary. Please note that entry into another country may be refused even if the required information and travel documents are complete. The expiry date of your Passport(s) is required to be valid for at least 6 months past your expected return date. For citizens of certain countries, including Canada & US, visa may be required for entry into some countries that your cruise will visit. Please check with the proper government authorities for specific requirements to avoid any entry issues. Expedia CruiseShipCenters is not responsible for any missing or inaccurate information provided to it concerning required documentation for travelers, or any changes to documentation requirements. It is the responsibility of the traveler to determine what travel documents are required, and to obtain all necessary documentation.

Passenger #1: Linda Amie Reid Citizenship : CANADA Documents Required :

Disclaimer:

Expedia CruiseShipCenters is acting as intermediary and agent for suppliers ("principals" identified on the attached or accompanying documents) in selling services, or in accepting reservations or bookings for services which are not directly supplied by this agency (such as cruises, air carriage, hotel accommodations, ground transportation, meals, tours, etc.). This agency, therefore, shall not be responsible for breach of contract or any intentional or careless actions or omissions on the part of such suppliers, which result in any loss, damage, delay, or injury to you or your travel companions or group members. Unless the term "guaranteed" is specifically stated in writing on your ticket, invoice or reservation itinerary, we do not guarantee any of such suppliers' rates, bookings or reservation. Agents shall not be responsible for any injuries, damages, or losses caused to any traveller in connection with terrorist activities, social or labour unrest, mechanical or construction difficulties, diseases, local laws, climatic conditions, abnormal conditions or developments, or any other actions, omissions or conditions outside the agent's control. By embarking upon his/her travel, the traveller(s) voluntarily assume(s) all risks involved with such travel, whether expected or unexpected. The traveller is hereby warned of such risks, and is advised to obtain appropriate insurance coverage against them. Your retention of tickets, reservations or bookings after issuance shall constitute consent to the above, and an agreement on your part to convey the contents hereto to your travel companions or group members.

Note: Expedia CruiseShipCenters reserves the right to charge a cancellation fee of \$100 per stateroom on all cruise travel or \$100 for air or other travel arrangements. All bookings are subject to the applicable Terms and Conditions of the individual travel provider (air line, cruise line, hotel, etc.) including any applicable cancellation penalties.

Price increases may occur beyond our control, but will be limited to 7% increase, other than PST and GST. If the increase is greater than 7% the customer has the right to cancel the order and receive a full refund, or accept the price increase at their choice. No price increases are permitted after the customer is paid in full.

Travel Outside Canada

Documentation Requirements A valid Passport is required for entry into the countries listed in your Itinerary. Please note that entry into another country may be refused even if the required information and travel documents are complete. The expiry date of your Passport(s) are required to be valid for at least 6 months past your expected return date.

Living standards and practices at the destination and standards and conditions there with respect to the provision of utilities, services and accommodation may differ from those found in Canada.

Your flight from Vancouver to Heathrow departs from Vancouver airport. Please review your itinerary to ensure that all information is correct. Check in 2-3 hours prior to departure.

Your flight from Halifax to Toronto departs from Halifax airport. Please review your itinerary to ensure that all information is correct. Check in 2-3 hours prior to departure.

Please be advised that some airlines have implemented luggage fees and restrictions for air travelers. If you are traveling by air, please contact the airlines or visit the airlines' web sites for complete details regarding fees, restrictions and terms for luggage. Please understand that fees imposed by airlines are outside of Expedia



National Joint Council

Travel Directive, Appendix D - Allowances - Module 4 - Effective July 1, 2016

Appendix D - Allowances - Module 4

Country: or City:
[Return to alphabetical list](#) | [Get Rates](#)

Archives
 Current - July 1, 2016 ▼

Table Legend

- C = Commercial Accommodation
 P = Non-commercial Accommodation
 * = Reasonable and justifiable expenses. Receipts required.

United Kingdom (includes Northern Ireland) - Currency: Pound Sterling (GBP)

Type of Accommodation	City	Meal Rate				Incidental Amount	Grand Total (Taxes Included)
		Breakfast	Lunch	Dinner	Meal Total		
C	London	18.60	31.35	41.15	91.10	29.15	120.25
C-75%	London	13.95	23.51	30.86	68.33	21.86	90.19
P	London	18.60	31.35	41.15	91.10	18.22	109.32
P-75%	London	13.95	23.51	30.86	68.33	13.67	81.99
C	Other	14.88	25.08	32.92	72.88	23.32	96.20
C-75%	Other	11.16	18.81	24.69	54.66	17.49	72.15
P	Other	14.88	25.08	32.92	72.88	14.58	87.46
P-75%	Other	11.16	18.81	24.69	54.66	10.93	65.59

CARDHOLDER COPY
PLEASE RETAIN THIS COPY
THANK YOU

DATE: 12/07/16

COMPLETION

MasterCard

PN: XXXXXXXX

CARD EXPY: XXXX

CARD-ENTRY: ICC

APPROVED

AUTH CODE: 101148

TERMINAL ID: 50052362

MERCHANT ID: 1084693

TRX.REF. NO.: 99583

ACCOUNT WILL BE DEBITED
TRANS.AMOUNT: CAD956.77
TOTAL AMOUNT: CAD956.77

PIN VERIFIED

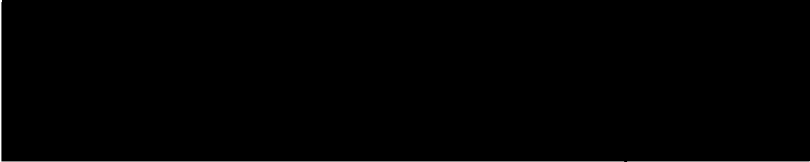
DYNAMIC CURRENTLY CONVERSION
MERCHANT SALES CURRENCY: GBP
ORIGINAL AMOUNT: 540.00
EXCHANGE RATE: 1.7718

I ACCEPT THAT I HAVE BEEN
OFFERED A CHOICE OF
CURRENCIES FOR PAYMENT AND
THAT THIS CHOICE IS FINAL.

TRANSACTIONS CAN ALSO BE IN GBP

I ACCEPT THE CONVERSION RATE
AND THE FINAL AMOUNT.

EXCHANGE RATE PROVIDED BY
FEXCO
THE TRANSACTION IS BASED ON
REUTERS WHOLESALE
EXCHANGE RATE INCL. 3.0%
INTERNATIONAL CONVERSION MARGIN



External Ref.:

Booking Ref.:

Room No.:

Arrival:

12/07/16

Departure:

15/07/16

Cashier:

180

Reserv No.:

Date:

12/07/16

Invoice/Folio No.:

	Debit (£)	Credit (£)
N		540.00
OICE		
Total £	0.00	540.00
Total Balance Due £		-540.00

\$956.77 CAD

Credit Card No.: XXXXXXXXXXXX Transaction Id: 490361

Signature:

Company Registration
VAT Reg No



Members Of The Legislative Assembly Travel Claim Form

Page: 1

Claim Number: 37220
 MLA Name: Reid, Linda VM089019 Claim Date: July 16, 2016
 Constituency: Richmond East
 Type Of Trip: CPA Travel
 Prepared By: [Redacted]
 Claimant Type: Member of Legislative Assembly
 Travel From: Newfoundland Travel To: Victoria
 Trip Details: CPA 54th Cdn Regional Conference
 Recall of Legislature

Date	Expenses	Amount
July 15, 2016	Accommodation Expenses Hotel - July 15-24	[Redacted] 2084.64/
July 15, 2016	Dinner Only	[Redacted] 21.50
July 16, 2016	MLA Per Diem	\$61.00
July 16, 2016	Taxi	\$25.00 ✓
July 17, 2016	Dinner Only	\$36.00
July 18, 2016	Laundry Expenses Pressing flags for CWP meeting	\$41.40 X
July 19, 2016	Taxi	\$31.00 X
July 22, 2016	Dinner Only	\$36.00
July 24, 2016	Airfare Baggage Fee	\$69.00 X
July 24, 2016	Taxi From Victoria Airport	\$62.40 X

Total Payable

[Redacted] 2467.94

Date 08 Aug 2016

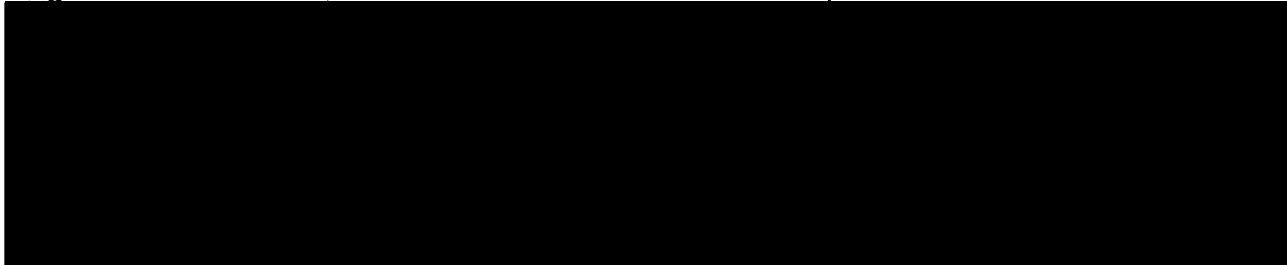
Signature

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	Amount
[Redacted]			



372219



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

Claim Number: 37220

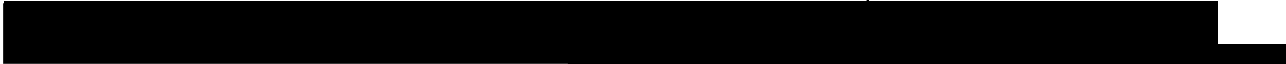
MLA Name: Reid, Linda VM089019

Claim Date: July 16, 2016

Constituency: Richmond East

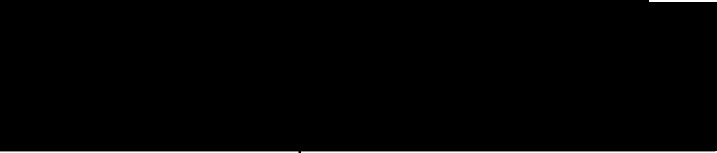
Type Of Trip: CPA Travel

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



Date Aug 22/16

Signature



City Wide Taxi

722-7777

CASH

Major Credit Cards Accepted
Wake Up Calls
Bus Charters Available

Date: 24-07-16

To: [Redacted]

From: 1 ASD

Car No: L. REID

Amount: \$ 25.00

H.S.T. # [Redacted]

Thank You & Have a nice day!



Take Home Clean Clothes

Please fill out this form, place your clothing in the bag provided,
and contact Guest Services to arrange for pickup.

UNDRY

MENSWEAR	RATE	AMOUNT
shirt	6.25	
tux shirt	8.00	
t-shirt	5.75	
undershirts	4.50	
briefs	4.00	
socks	3.25	
pyjamas	9.50	
bathrobe	11.75	
sweater	8.00	
handkerchief	4.25	
trousers	11.00	
jeans	11.00	
other		

WOMEN'S WEAR	RATE	AMOUNT
blouse	7.50	
slip	8.50	
panties	4.50	
brassiere	4.50	
handkerchief	4.25	
nightgown	9.75	
slacks	9.00	
skirt	10.00	
shorts	6.00	
dress	11.50	
hose	4.25	
sweater	10.00	
jeans	11.00	
other		

DRY CLEANING

QTY	MENSWEAR	RATE	AMOUNT
	suit (2-piece)	18.00	
	suit (3-piece)	19.50	
	coat	20.00	
	trousers	11.00	
	jacket	10.00	
	sweater	10.25	
	raglan	20.00	
	shirt	8.25	
	tie	7.50	
	tuxedo (smoking)	13.00	
	shirt	8.00	
	rayon		
	other		

QTY	WOMEN'S WEAR	RATE	AMOUNT
	suit	18.00	
	coat	17.50	
	trousers	11.00	
	jacket	10.00	
	sweater	10.25	
	dress	17.50	
	skirt	11.50	
	blouse	9.25	
	cocktail dress	16.50	
	evening dress	19.50	
	housecoat	11.75	
	other		

ARCH none light medium heavy

DELIVER hangers

RATON HOTEL NEWFOUNDLAND T 209 726 4980

press only to flags

return on hangers

dry cleaning

AVAILABLE MONDAY-SATURDAY

Same-day service - in by 9:00 AM, back by 6:00 PM
(5.00 minimum per order)

L. REID

NAME [Redacted]

ROOM [Redacted]

July 18/16
DATE

PRESS ONLY

QTY	MENSWEAR	RATE	AMOUNT
	suit (2-piece)	11.00	
	suit (3-piece)	12.50	
	coat	10.00	
	trousers	8.75	
	jacket	7.00	
	sweater	6.75	
	raglan	11.00	
	shirt	5.25	
	tie	4.00	
	tuxedo (smoking)	7.50	
	shirt		
	rayon		
	other		

QTY	WOMEN'S WEAR	RATE	AMOUNT
	suit	11.00	
	coat	9.50	
	trousers	7.50	
	jacket	7.50	
	sweater	6.75	
	dress	10.50	
	skirt	8.50	
	blouse	7.25	
	cocktail dress	12.00	
	evening dress	14.00	
	housecoat		

6 other flags 6.00 36.00

TOTAL 36.00
DELIVERY CHARGE 5.40
AMOUNT DUE 41.40

City Wide Taxi

722-7777

Major Credit Cards Accepted
Wake Up Calls
Bus Charters Available

Date: July 19/16

To: [Redacted]

From: [Redacted]

Car No: 31.00

Amount: 31.00

H.S.T. # [Redacted]

Thank You & Have a nice day!

Cost \$5.50 per garment for press only. Additional charges may apply for pleats and delicate fabrics. Liability in case of lost or damaged goods is limited to ten times the amount charged for laundering same. Not responsible for personal items left in pockets. Laundry and dry cleaning service is provided by yellowcabvictoria.com based on the following laundry/dry cleaning policy. The Hotel assumes no liability for any claims arising from processing. The laundry/dry cleaner exercises utmost care in processing articles entrusted to it and uses products which, in their opinion, are best suited to the nature and condition of each individual article. Nevertheless, laundry/dry cleaner cannot assume responsibility for inherent weaknesses or defects in materials that are not readily apparent prior to processing. In laundering the laundry/dry cleaner cannot guarantee against color loss and fade; or against damage to weak and tender fabrics. Differences in count must be reported, and this ticket presented, within 48 hours. Unless a list accompanied the bundle, our count must be accepted.

YELLOW CAB
117 FISGARD STREET V8W1R9
VICTORIA BC
21852400
GH2185240064

*** PURCHASE ***
07-24-2016
ALCT # *****
Exp Date **/**
Name: LINDA REID
4155000041010
MasterCard

Operator: 064
Trace # 633
Inv. # 064
RRN # 183807
RRN 0010560

Purchase \$57.40
Tip \$5.00
Total \$62.40

(301) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

www.yellowcabvictoria.com
250-381-2222

PASSENGER RECEIPT 1

24JUL16 21000475

YYT 4SS /ST JOHNS NF

REID/LINDA [REDACTED] MRS
NOT VALID FOR
TRANSPORTATION

PSGR TICKET 8382294168659

YYTYC-WS YYCYYJ-WS

01 FIRST BAG FEE
01 SECOND BAG FEE

25.00
35.00

PFPEKM/

CAD 60.00
RC 9.00

NA
NA

CAD 69.00

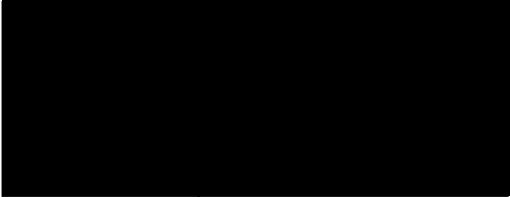
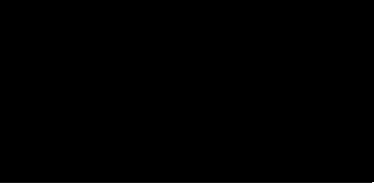
FP CAXXXXXXXXXX [REDACTED] 051018

[REDACTED]

1
CA REFUNDABLE ONLY WITH
RELATED FLIGHT CPN
6 RETAIN THIS RECEIPT
THROUGHOUT YOUR
JOURNEY

FOR CONDITIONS OF
CONTRACT - SEE
PASSENGER TICKET AND
BAGGAGE CHECK

NOT VALID FOR TRAVEL



Linda Reid

Page Number : 1 Invoice Nbr :

Guest Number :

Folio ID :

Arrive Date : 15-JUL-16

Depart Date : 25-JUL-16

No. Of Guest : 2

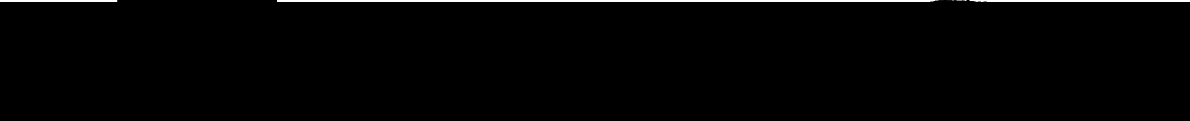
Room Number :

Club Account :

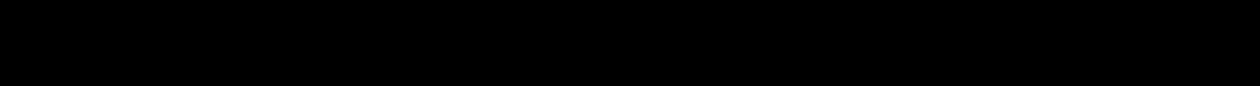
Copy Invoice

Tax ID :

Date	Time	Reference	Description	Charges (CAD)	Credits (CAD)
15-JUL-16			Room Charge	194.00	
15-JUL-16			HST	29.10	
15-JUL-16			Tourism Levy	7.76	
16-JUL-16			Package Handling	3.00	
16-JUL-16			HST Tax	0.45	



16-JUL-16			Room Charge	194.00	
16-JUL-16			HST	29.10	
16-JUL-16			Tourism Levy	7.76	
17-JUL-16			Room Charge	194.00	
17-JUL-16			HST	29.10	
17-JUL-16			Tourism Levy	7.76	



Continued on the next page



Linda Reid

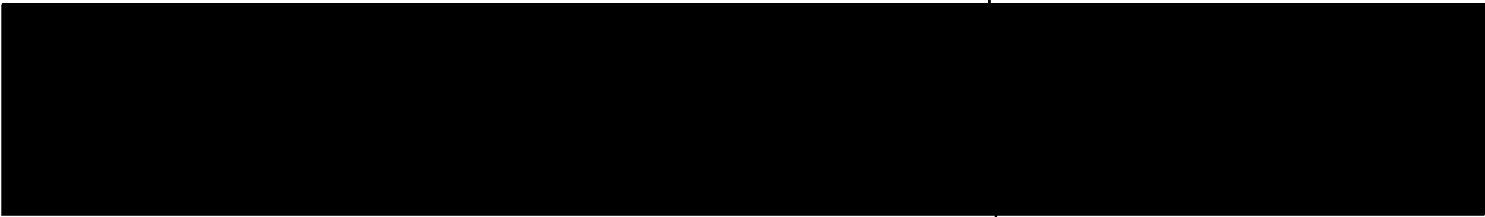
Page Number : 2
 Guest Number :
 Folio ID :
 Arrive Date : 15-JUL-16
 Depart Date : 25-JUL-16
 No. Of Guest : 2
 Room Number :
 Club Account :

Invoice Nbr :

Date	Time	Reference	Description	Charges(CAD)	Credits(CAD)
18-JUL-16			Package Handling	3.00	
18-JUL-16			HST Tax	0.45	
18-JUL-16			Room Charge	194.00	
18-JUL-16			HST	29.10	
18-JUL-16			Tourism Levy	7.76	
19-JUL-16			Room Charge	194.00	
19-JUL-16			HST	29.10	
19-JUL-16			Tourism Levy	7.76	
20-JUL-16			Room Charge	194.00	
20-JUL-16			HST	29.10	
20-JUL-16			Tourism Levy	7.76	
21-JUL-16			Room Charge	194.00	
21-JUL-16			HST	29.10	
21-JUL-16			Tourism Levy	7.76	
22-JUL-16			Room Charge	194.00	
22-JUL-16			HST	29.10	
22-JUL-16			Tourism Levy	7.76	
23-JUL-16			Room Charge	194.00	
23-JUL-16			HST	29.10	
23-JUL-16			Tourism Levy	7.76	

deduct

Continued on the next page



Linda Reid

Page Number : 3
Guest Number : [REDACTED]
Folio ID : [REDACTED]
Arrive Date : 15-JUL-16
Depart Date : 25-JUL-16
No. Of Guest : 2
Room Number : [REDACTED]
Club Account :

Invoice Nbr : [REDACTED]

Date	Time	Reference	Description	Charges (CAD)	Credits (CAD)
24-JUL-16	[REDACTED]	[REDACTED]	Room Charge	194.00	
24-JUL-16	[REDACTED]	[REDACTED]	HST	[REDACTED]	
24-JUL-16	[REDACTED]	[REDACTED]	Tourism Levy	7.76	
25-JUL-16	[REDACTED]	[REDACTED]	MasterCard		[REDACTED]
** Total				[REDACTED]	[REDACTED]
*** Balance				0.00	[REDACTED]



- 230.86
-



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37221

MLA Name: Reid, Linda VM089019

Claim Date: July 24, 2016

Constituency: Richmond East

Type Of Trip: MLA Travel

Prepared By: [REDACTED]

Claimant Type: Member of Legislative Assembly

Travel From: Victoria

Travel To: Richmond

Trip Details: Summer Sitting

Date	Expenses	Amount
June 18, 2016	Taxi Richmond Taxi Invoiced \$46	\$0.00
July 06, 2016	Taxi	\$46.60
July 06, 2016	Taxi	\$9.60
July 24, 2016	Lunch and Dinner Only-Victoria	\$48.50
July 25, 2016	MLA Per Diem - Victoria	\$61.00
July 26, 2016	Breakfast & Lunch only	\$39.50
July 27, 2016	MLA Per Diem - Victoria	\$61.00
July 28, 2016	MLA Per Diem - Victoria	\$61.00
Total Payable		\$327.20

Date 28 Jul 2016

Signature [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 8/3/16

Signature [REDACTED]

Spending Authority [REDACTED]

790 CLARK DR
VANCOUVER BC

BLUEBIRD CABS LTD.
CAB 59
2612 QUADRA ST. 2ND FLOOR
VICTORIA, BC V8T 4E4
250-382-2222

TERM ID: BG342463

BATCH#: 01
SHIFT#: 01

CARD *****
CARD TYPE MASTERCARD
DATE 2016/07/08
TIME 5216
CERK ID 999
RECEIPT NUMBER
035023889-001-198-001-0

PURCHASE
AMOUNT \$41.60
TIP \$5.00
TOTAL
\$46.60

Sale
INVT: 000000019
MCARD SEQ: 0298016100
Application Label: MasterCard
AID: A0000000041010
TVR:00 00 00 00 00
ISI:E8 00

Amount: \$ 7.60
Tip: \$ 2.00
=====

Total:CAD\$ 9.60

APPROVED 191039
001/00

06-Jul-16

CUSTOMER COPY
VICTORIA'S FIRST CHOICE
THANK YOU

MasterCard
AID: A000000041010
PA15A17141ECEB5
000000B000-E800
0000A961EBEE3A4B

APPROVED

DATA# 204802 01-000
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

GST
60%



Members Of The Legislative Assembly Travel Claim Form

Page: 1

Claim Number: **37304**
 MLA Name: **Reid, Linda VM089019** / Claim Date: **July 27, 2016**
 Constituency: **Richmond East**
 Type Of Trip: **MLA Travel**
 Prepared By: **[Redacted]**
 Claimant Type: **Member of Legislative Assembly**
 Travel From: **Victoria** Travel To: **Richmond**
 Trip Details:

Date	Expenses	Amount
July 27, 2016	Parking	\$2.60
July 28, 2016	Taxi	\$21.50
July 29, 2016	Taxi	\$60.80
Total Payable		\$84.90

Date 06 Aug 2016

Signature [Redacted]

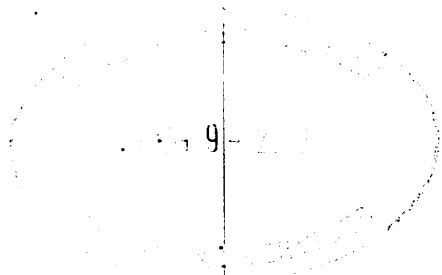
*Reid, Linda VM089019
certified that the amount to be paid is correct, and is in accordance
with appropriate statute or other authority for payment*

ACCOUNTS OFFICE USE ONLY

Organization Code	Account Code	STOB Code	Amount
[Redacted]			

Date Aug 9/16

Signature [Redacted]
Spending Authority Signature



BLUEBIRD CABS LTD.

CAB 53
2612 QUINLAN ST. 2ND FLOOR
VICTORIA, BC V8T 4E7
250-382-2222

TERM ID: 88342463

BATCH#: 158
SHIFT#: 031

Sale

INVT#: 000000014

MCARD SEQ#: 158001001019

Application Label: MasterCard
AID: A88888881010
TVR:00 00 00 00
TSI:00 00
XXXXXXXXXX

Amount: \$ 55.00
Tip: \$ 5.00

Total:CAD\$ 60.00

APPROVED 065919
001/00

29-Jul -16

CUSTOMER COPY
VICTORIA'S FIRST CHOICE
(THANK YOU!)

BLUEBIRD CABS LTD.

CAB 51
2612 QUINLAN ST. 2ND FLOOR
VICTORIA, BC V8T 4E7
250-382-7227

TERM ID: 14342463

BATCH#: 588
SHIFT#: 088

Sale

INVT#: 000000023

MCARD SEQ#: 588001001027

Application Label: MasterCard
AID: A88888881010
TVR:00 00 00 00
TSI:00 00
XXXXXXXXXX

Amount: \$ 18.50
Tip: \$ 3.00

Total:CAD\$ 21.50

APPROVED 004628
001/00

28-Jul -16

CUSTOMER COPY
VICTORIA'S FIRST CHOICE
(THANK YOU!)

PLACE FACE UP ON DASH

Expiration Date/Time

JUL 27, 2016

Purchase Date/Time: Jul 27, 2016
Total Due: \$2.60 Rate: Park 2 Hrs \$2.60
Total Paid: \$2.60 Payment Type: Card
Ticket #: 00032014
S/N #: 200009360006
Setting: Lot 030
Mach Name: Lot 30 - 1

Card #**** MasterCard
Auth #: 222657

RECEIPT

Expiration Date/Time: Jul 27, 2016
Purchase Date/Time: Jul 27, 2016
Total Due: \$2.50 Rate: Park 2 Hrs \$2.50
Total Paid: \$2.50 Payment Type: Card
Ticket #: 00032014
Setting: Lot 030
Mach Name: Lot 30 - 1

Card #**** MasterCard
Auth #: 222657



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37308
MLA Name: Reid, Linda VM089019 **Claim Date:** July 20, 2016
Constituency: Richmond East
Type Of Trip: CPA Travel
Prepared By:
Claimant Type: Member of Legislative Assembly
Travel From: Richmond **Travel To:** Bangladesh
Trip Details: Conference cancelled by CPA due to security concerns

Date	Expenses	Amount
July 20, 2016	Airfare Admin fee to cancel Bangladesh air travel Claim #39697 refers - see note below re refund	\$199.50 ✓
July 20, 2016	Airfare Airline retained \$400 from original cost of \$6298.89 - booking fee included. Refund of \$5846.39 coming from Emirates Air	\$0.00
Total Payable		\$199.50

Date 09 Aug 2016

Signature
 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	Amount

Date 8/23/16

Signature
 Spending

[REDACTED]

From: [REDACTED]
Sent: July 30, 2016 1:12 PM
To: [REDACTED]
Subject: Fw: Bangladesh cancellation

see below

From: [REDACTED]
Sent: July 20, 2016 12:35 PM
To: [REDACTED]
Subject: RE: Bangladesh cancellation

Thanks for the update Tracey, I appreciate your help.

[REDACTED]

From: [REDACTED]@cruiseshipcenters.com]
Sent: July 20, 2016 12:34 PM
To: [REDACTED]@leg.bc.ca>
Subject: Fw: Bangladesh cancellation

Dear [REDACTED],

I have cancelled the Bangladesh flights. Linda paid airline \$6246.39, their fee is \$400, she will receive back \$5846.31CAD on her MC ending [REDACTED]
I also had to charge the admin fees to cancel which were \$199..50

Our booking fee is non refundable.
Please e-mail me back you received this information.



Expedia CruiseShipCenters, South
Delta
152 - 4857 Elliott Street
Delta BC V4K 2X7
604-946-7444
Reg. No: [REDACTED]
GST Reg No: [REDACTED]
southdelta@cruiseshipcenters.com

Invoice # 101027-2016-00479

Printed Jul 20, 2016

CAD
Invoice Amount 6,298.89
Payments to Date (6,298.89)
Balance Due 0.00

Linda [REDACTED] Reid
[REDACTED]
Canada

Contact Tel. [REDACTED]

Final Payment(s) Schedule
AIR - Jun 03, 2016

Consultant: [REDACTED]
[REDACTED]
604-946-7444, Fax: 604-946-7704

AIR: Emirates Airlines (Intair)				
#Airline	Operated by	Flight Number	Departure	Arrival
1	Alaska Airlines	[REDACTED]	Vancouver	Aug 30, 2016 at Seattle [REDACTED]
2	Emirates Airlines	[REDACTED]	Seattle	Aug 30, 2016 at Dubai [REDACTED]
3	Emirates Airlines	[REDACTED]	Dubai	Aug 31, 2016 at Dhaka [REDACTED]
4	Emirates Airlines	[REDACTED]	Dhaka	Sep 10, 2016 at Dubai [REDACTED]
5	Emirates Airlines	[REDACTED]	Dubai	Sep 11, 2016 at Seattle [REDACTED]
6	Air Canada Jazz	[REDACTED]	Seattle	Sep 11, 2016 at Vancouver [REDACTED]

Guest Seating Air Fare Deviation Tax Summary

Mrs Linda [REDACTED] 4,979.00 0.00 1,267.39 6,246.39 CAD
 Reid
 Total: 4,979.00 0.00 1,267.39 6,246.39 CAD

Booking Fee: 50.00 CAD
 Other Tax: 2.50 CAD

Booking Jun 03, Booking [REDACTED] 6,298.89
 Date: 2016 Number : [REDACTED] CAD

Notes:

Alaska
 Airlines
 Ref #
 [REDACTED]
 Emirates
 Ref #
 [REDACTED]
 Air Canada
 REF #
 [REDACTED]
**Flight was
 Cancelled
 by Client
 July 20/16-
 CXL fee
 by airline
 \$400 fees
 charged
 for CXL
 \$199.50**

Customer Payment History

Date	Merchant Name	Type	Method	Name	CAD
Jun 03, 2016	Intair Air	Final	Master Card	Lind Reid	6,246.39
Jun 03, 2016	Expedia Cruiseship center	Final	Master Card	Linda Reid	52.50
Payment(s) Total					6,298.89

Documentation Requirements:

You have indicated you are Canadian citizen(s), therefore, a valid Passport is required for entry into the countries listed in your itinerary. Please note that entry into another country may be refused even if the required information and travel documents are complete. The expiry date of your Passport(s) is required to be valid for at least 6 months past your expected return date. For citizens of certain countries, including



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37328
MLA Name: Reid, Linda VM089019 **Claim Date:** July 24, 2016
Constituency: Richmond East
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: St Johns **Travel To:** Victoria 323
Trip Details: Legislature Recall

Date	Expenses	Amount
July 24, 2016	Airfare - oneway St. John's to Victoria	\$744.99
July 29, 2016	Airfare - oneway cost offset by aeroplan points	\$244.79
Total Payable		\$989.78

Date 22 Aug 2016

Signature

[REDACTED SIGNATURE]

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	Amount
-------------------	--------------	-----------	--------

[REDACTED ACCOUNTS OFFICE DATA]

Date 8/23/16

Signature

Spending

[REDACTED SIGNATURE]

[REDACTED]
From: [REDACTED]
Sent: August 11, 2016 2:11 PM
To: [REDACTED]
Cc: [REDACTED]
Subject: Interrupted Travel
Attachments: [REDACTED]

AUG 12 2016

Due to the Legislature being recalled for July 25, the Speaker's visit to St. John's/Halifax was interrupted. The costs outlined below were incurred as a result of her having to travel back to Victoria then rejoin her family in Halifax. [REDACTED] has asked me to itemize them for you as they will not be part of the travel claim for the CPA Conference in St. John's

Westjet flight from St. John's to Victoria on July 24:
\$744.99

Air Canada to Halifax on July 29 – Aeroplan miles were used to cover the cost of this flight
Miles used – 25,000 Equivalent amount \$244.79

Scanned documents attached here. I will send originals via house mail to your attention

From: [REDACTED]
Sent: August 9, 2016 2:59 PM
To: [REDACTED]
Subject: Expedia CruiseShipCenters Invoice

Dear [REDACTED]
 Here is the invoice for that amount. It was for her flight back from st Johns to Victoria- when legislature re-opened.



Expedia CruiseShipCenters, South Delta
 152 - 4857 Elliott Street
 Delta BC V4K 2X7
 604-946-7444
 Reg. No. [REDACTED]
 GST Reg No. [REDACTED]
 southdelta@cruiseshipcenters.com

Invoice # 101027-2016-00651

Printed Aug 09, 2016
 CAD
 Invoice Amount 744.99
 Payments to Date (744.99)
 Balance Due 0.00

Linda [REDACTED] Reid

Canada

Contact Tel. [REDACTED]

Final Payment(s) Schedule
 AIR - Jul 11, 2016

Consultant: Tracey Harms (tharms@cruiseshipcenters.com)
 604-946-7444, Fax: 604-946-7704

AIR:		WestJet (Intair)		Departure		Arrival	
# Airline	Operated by	Flight Number		St John's	Jul 24, 2016 a [REDACTED]	Calgary	Jul 24, 2016 a [REDACTED]
1 WestJet	WestJet	[REDACTED]		Calgary	Jul 24, 2016 a [REDACTED]	Victoria	Jul 24, 2016 a [REDACTED]
2 WestJet	WestJet	[REDACTED]					

Guest	Seating	Air Fare	Deviation	Tax	Summary
Mrs Linda [REDACTED] Reid		554.00	0.00	154.24	708.24 CAD
Total:		554.00	0.00	154.24	708.24 CAD
				Booking Fee:	35.00 CAD
				Other Tax:	1.75 CAD

Booking Date: Jul 11, 2016 Booking Number: PFPDMF 744.99 CAD
 Notes: Ref # PFPKM

Customer Payment History					Name	CAD
Date	Merchant Name	Type	Method		Linda Reid	744.99
Jul 11, 2016	Intair Air	Final	Master Card		Payment(s) Total	744.99

Embraer 175

Total travel time : 12h

Select your seat

Please note that seat selection is only available for Air Canada flights. To select a seat on another airline, please contact the other airline directly. Certain fees may apply.

Your Transaction Details

	Miles	Amount CAD \$
Grand Total		\$244.79

If you'd like more details on your transaction, please view the summary below.

Redemption details	Miles	Amount CAD \$
Total for 1 Adult - Fixed Mileage Flight Reward - Business		-
Subtotal		-

Aeroplan fees	Miles	Amount CAD \$
Top-up [redacted] miles	-	\$161.70
Booking Fees	-	\$30.00
GST	-	\$9.59
Subtotal	-	\$201.29
GST Tax Registration [redacted]		

Taxes, fees, charges and carrier surcharges	Miles	Amount CAD \$
Total amount paid under the invoice issued to you by the air carrier.		
Canada Domestic/International Air Travel Security Charge	-	\$7.12
Canada Harmonized Sales Tax	-	\$0.52
Canada Domestic/International Airport Improvement Fee	-	\$19.00
Canada Goods and Services Tax	-	\$1.86
Carrier Surcharge	-	\$15.00

LINDA,

This email contains important information about the flight reward you redeemed with Aeroplan.

Your official itinerary-receipt will be sent to you by the airline in the next 48 hours. Should the flight details listed below change before or after your departure, you will automatically receive an updated itinerary-receipt from the airline to the email address provided when you redeemed for the flight reward.

For your convenience, you can also access this confirmation by visiting [Manage Your Rewards](#) on aeroplan.com.

This email does not constitute a voucher for transportation services.

Your Transaction Summary

Name: MS LINDA REID
 Aeroplan Number: [REDACTED]
 Transaction Date: 2016-07-28 05:52:03
 Booking Reference Number: [REDACTED]
 Ticket Type and Delivery: Electronic Ticket sent by email
 Special Need(s):
 If you have redeemed for your flight reward online and you need to book for infants under two years old or unaccompanied children, please call the Aeroplan Contact Centre at 1-800-361-5373.

Flight Details

Your flight details may change. Please visit [Manage Your Rewards](#) on aeroplan.com before your departure.

 MS. LINDA REID

DEPARTURE

Victoria (YYJ) ▶ Halifax (YHZ)

Fri July 29, 2016



Air Canada [REDACTED]

Departs : Fri July 29 [REDACTED] Victoria (YYJ)
 Arrives : Fri July 29 [REDACTED] Toronto Pearson (YYZ)
 Economy Class X
 Airbus A320-100/200

Flight Duration : 4h 30 min



Change plane in Toronto Pearson



Time to Connect : 1h 30 min



Air Canada [REDACTED]

Departs : Fri July 29 [REDACTED] Toronto Pearson (YYZ)
 Arrives : Fri July 29 [REDACTED] Montreal Trudeau (YUL)
 Business Class I
 Boeing 767-300

Flight Duration : 1h 15 min



Change plane in Montreal Trudeau



Time to Connect : 3h 15 min



Air Canada [REDACTED]

Departs : Fri July 29 [REDACTED] Montreal Trudeau (YUL)
 Arrives : Fri July 29 [REDACTED] Halifax (YHZ)
 Business Class I

Flight Duration : 1h 30 min



We've Got Your Back

For flight changes after departure please contact us 24/7
Toll Free: 1 (800) 727-8687 (within North America) 416-850-0978
Email: travel@travelbrands.com

**ELECTRONIC TICKET
ITINERARY/RECEIPT**

PASSENGER(S) : Reid/Linda [REDACTED] Mrs

- * The spelling of the passenger's names must be identical as the ones shown on their passport
 - * The middle name is required if present on the passenger's passport and must be added to the "secure flight" information.
 - * The passenger's date of birth and gender must be provided no later than 72 hours prior departure.
 - * The free bag allowance indicated for each segment of your itinerary is automatically determined by the Sabre system.
- All other information must be verified directly with the carriers on your itinerary: size, weight, extra bags etc.

Issuing agent :

Ticket number : 838 2294168659
 Issuing airline : Westjet
 Issuing agent : IFS /BB50
 Date of issue : 11JUL16 IATA : 69-553083

Record locator : [REDACTED] Booking agent : [REDACTED]

Customer number : [REDACTED]

TOUR CODE :

ITINERARY :

Flight	From	To	Equipment	Status	Flight time	Class
Westjet [REDACTED] REF : PFPEKM	St.Johns, NF (YYT) Sun, 24 July 2016 [REDACTED]	Calgary (YYC) Sun, 24 July 2016 [REDACTED]	73H	Confirmed	6h15min	M
			Seat : NONE Free baggage: None			
Westjet [REDACTED] REF : PFPEKM	Calgary (YYC) Sun, 24 July 2016 [REDACTED]	Victoria (YYJ) Sun, 24 July 2016 [REDACTED]	73W	Confirmed	1h30min	M
			Seat : NONE Free baggage: None			

Travel agency :

Expedia Cruiseshipcenters, 9051
 152-4857 Elliott Street
 Ladner, BC.
 V4K 2X7
 604-946-7444



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37330

MLA Name: Reid, Linda VM089019

Claim Date: August 19, 2016

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
August 19, 2016	Ferry	\$88.50
August 19, 2016	Lunch and Dinner Only-Victoria	\$48.50
August 21, 2016	Ferry	\$89.00
Total Payable		\$226.00

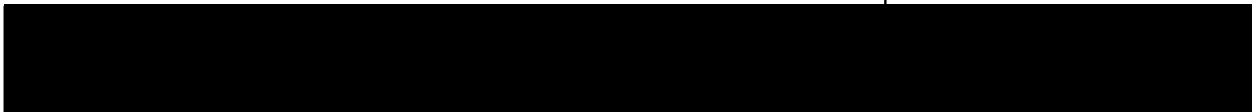
Date 22 Aug 2016

Signature _____

Reid
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

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



Date 8/23/16

Signature _____

Spending Authority Signature

PURCHASE



2016/08/19

Tsawwassen

To

Swartz Bay

AUTH ONLY

RESERVATION-

CONF: [REDACTED]

RES: [REDACTED]

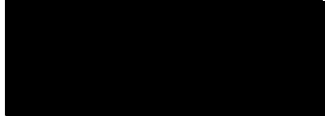
20	Undersize Vehi	56.45
4	Adult	68.80
1	Reservation Pr	18.50
	Fuel Rebate	3.65-

17.20

Total	140.10
Prepayment	18.50
MasterCard	121.60
***** (S)	
005/01-66223091	
0010550700	
Approved: 131142	
CHANGE DUE	0.00

88.50

LANE 44



105045

SEE REVERSE SIDE OF TICKET

PURCHASE



2016/08/21

Swartz Bay

To

Tsawwassen

AUTH ONLY

RESERVATION-

CONF: [REDACTED]

RES: [REDACTED]

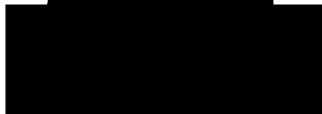
20	Undersize Vehi	56.45
1	Reservation Pr	18.50
3	Adult	51.60
	Fuel Rebate	3.15-

17.20

Total	123.40
Prepayment	18.50
MasterCard	104.90
***** (S)	
005/01-66223091	
0010434880	
Approved: 144625	
CHANGE DUE	0.00

89.00

LANE 04



SEE REVERSE SIDE OF TICKET



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

Claim Number: 37335
MLA Name: Reid, Linda VM089019 **Claim Date:** August 06, 2016
Constituency: Richmond East
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Richmond **Travel To:** Kelowna
Trip Details:

Date	Expenses	Amount
August 06, 2016	784(km)	\$415.52
August 06, 2016	Accommodation Expenses	\$365.70
August 06, 2016	MLA Per Diem	\$61.00
August 07, 2016	MLA Per Diem	\$61.00
August 08, 2016	MLA Per Diem	\$61.00
Total Payable		\$964.22

Date 19 Aug 2016

Signature

[REDACTED SIGNATURE]

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 Amount

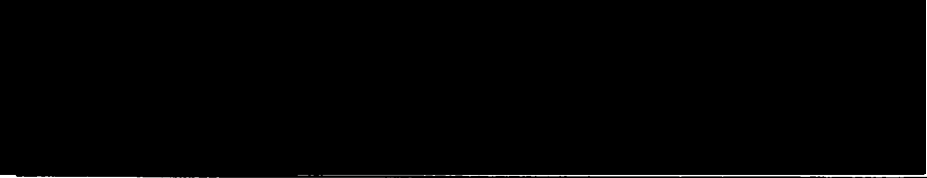
[REDACTED ACCOUNTS OFFICE SECTION]

Date 8/23/16

Signature

Spending A

[REDACTED SIGNATURE]



Mail To: Reid

Res. No. : [Redacted]
Arrive: 05/08/2016 [Redacted]
Depart: 08/08/2016 [Redacted]
Room: [Redacted]
Rate: 159.00

Group: Cuccione Foundation
Guest: Linda Reid
Bill To: Reid

Date	Description	Voucher	Amount
06/08/2016	Room Revenue	[Redacted]	159.00
06/08/2016	Provincial Room Tax	[Redacted]	15.90
06/08/2016	GST	[Redacted]	7.95
07/08/2016	Room Revenue	[Redacted]	159.00
07/08/2016	Provincial Room Tax	[Redacted]	15.90
07/08/2016	GST	[Redacted]	7.95
08/08/2016	Master Card	thank you	-365.70
Balance:			.00

Bill To: Reid

Total GST 15.90
GST .00
GST Registration # [Redacted]

*plus mileage
from 10331 Severn Dr. to
Mission Hills Winery.*



Signature





Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37340
MLA Name: Reid, Linda VM089019 **Claim Date:** August 22, 2016
Constituency: Richmond East
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Richmond **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
August 22, 2016	airfare - round trip Helijet \$318 to be invoiced	\$0.00
August 22, 2016	Conference Fees Expenses UBCM Registration	\$157.50 ✓
August 22, 2016	MLA Per Diem - Victoria	\$61.00 ✓
Total Payable		\$218.50

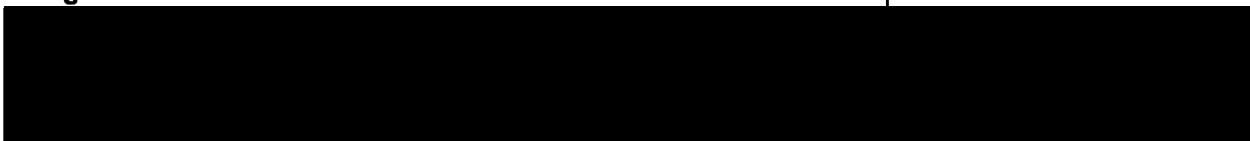
Date 22 Aug 2016

Signature [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

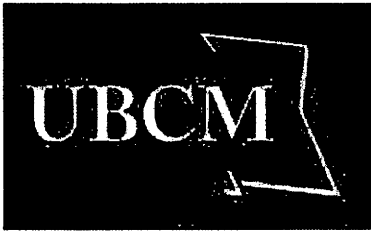
Organization Code	Account Code	STOB Code	Amount
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Date 8/23/16

Signature [REDACTED]

Spending Au [REDACTED]



Union of BC Municipalities

Your Order

[Print This Page](#)

Quantity	Item	Unit	Price
1	2016 UBCM Convention - Sept 26 - 30, 2016, Victoria, BC.	CAD 157.50	CAD 157.50
Total			CAD 157.50

This order is now complete. Transaction approved!

Here is your receipt:

```

===== TRANSACTION RECORD =====
UNION OF BC MUNICIPALITY
10551 SHELLBRIDGE WAY #60
RICHMOND, BC V6X2W9
Canada

TYPE: Purchase

ACCT: Mastercard $ 157.50 CAD

CARD NUMBER : #####
DATE/TIME : 10 Aug 16
REFERENCE # : 001 092417 M
AUTHOR. # : 172502
TRANS. REF. : UBCM2016

Approved - Thank You 000

Please retain this copy for your records.

Cardholder will pay above amount to card
issuer pursuant to cardholder agreement.
=====
    
```

[« Return to Union of BC Municipalities](#)

Secure Payment provided by [E-xact Transactions Ltd.](#)





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

Claim Number: 37416

MLA Name: Reid, Linda VM089019

Claim Date: September 13, 2016

Constituency: Richmond East

Type Of Trip: MLA Travel

Prepared By: [REDACTED]

Claimant Type: Member of Legislative Assembly

Travel From: Richmond

Travel To: Victoria

Trip Details:

Date	Expenses	Amount
September 09, 2016	Taxi Richmond Taxi Invoiced \$50	\$0.00
September 09, 2016	Taxi	\$45.70
September 13, 2016	Deduction Mtg in March paid twice	\$-53.43
September 13, 2016	MLA Per Diem - Victoria	\$61.00
September 13, 2016	Quick tickets [REDACTED] invoiced (\$279)	\$0.00
September 13, 2016	Quick tickets [REDACTED] invoiced (\$159)	\$0.00
Total Payable		\$53.27

Date 19 Sep 2016

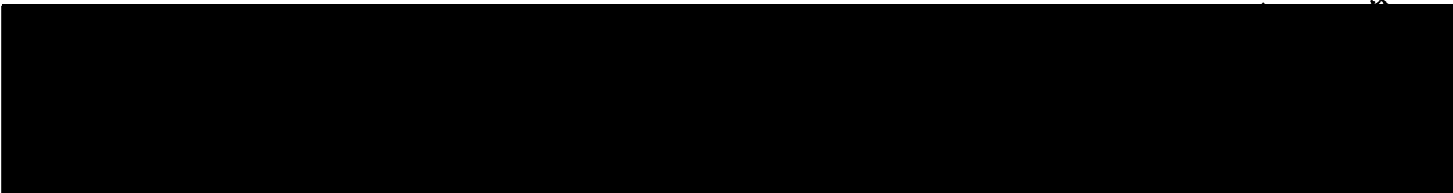
Signature _____

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 Amount



Date 9/19/16

Signature _____

Spending Authority Signature

From: [REDACTED]
Sent: September 13 2016 12:10 PM
To: [REDACTED]
Subject: Helijet Tickets
Attachments: 20160913120909195.pdf

Hi [REDACTED]

Please see attached tickets.
They are in pending as the tickets won't be processed until time of flight.

[REDACTED] = \$159.00
[REDACTED] = \$179.00

Thank you,

[REDACTED]
Coordinator Accounting and Administration HELIJET INTERNATIONAL INC.
(P) 604-273-4688 ext 524
(F) 604-273-5301
(e) smcfarlane@helijet.com

DUPLICATE

BLACKTOP & CHECKER
CABS #202
777 PACIFIC ST
VANCOUVER BC

DUPLICATE

CARD *****[REDACTED]
CARD TYPE MASTERCARD
DATE 2016/09/09
TIME 7032 [REDACTED]
CLERK ID 1
RECEIPT NUMBER
CBS011940-001-527-006-0

PURCHASE
AMOUNT \$40.70
TIP \$5.00
TOTAL
\$45.70

MasterCard
A0000000041010
776FD68CA388BEAA
0000008000-EB00
06261252EBAB6AA6

APPROVED

AUTH# 173948 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

DUPLICATE



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37447

MLA Name: Reid, Linda VM089019

Claim Date: September 21, 2016

Constituency: Richmond East

Type Of Trip: MLA Travel

Prepared By: [REDACTED]

Claimant Type: Member of Legislative Assembly

Travel From: Richmond

Travel To: Victoria

Trip Details: Skydance Studio Opening

Date	Expenses	Amount
September 13, 2016	Parking	\$3.00 ✓
September 13, 2016	Taxi	\$10.70 ✓
September 13, 2016	Taxi	\$30.50 ✓
September 13, 2016	Taxi	\$26.50 ✓
September 16, 2016	Taxi	\$18.60 ✓
September 17, 2016	Parking	\$15.75 ✓
September 21, 2016	Breakfast & Dinner Only	\$48.50
September 21, 2016	Quick tickets Helijet #s [REDACTED] prepaid	\$0.00
September 21, 2016	Taxi Richmond Taxi invoiced \$20	\$0.00
Total Payable		\$153.55

Date 21 Sep 2016

Signature

[REDACTED SIGNATURE]

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	Amount
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[REDACTED ACCOUNTS OFFICE USE ONLY SECTION]

Date 09/23/16

Signature

[REDACTED SIGNATURE]

Spending Authority Signature



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37449

MLA Name: Reid, Linda VM089019

Claim Date: September 14, 2016

Constituency: Richmond East

Type Of Trip: MLA Travel

Prepared By: [REDACTED]

Claimant Type: Member of Legislative Assembly

Travel From: Richmond

Travel To: Victoria

Trip Details:

Date	Expenses	Amount
September 14, 2016	Quick tickets Purchase of 10 Quick Tickets [REDACTED]	\$2310.00
Total Payable		\$2310.00

Date 21 Sep 2016

Signature [REDACTED]

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** **Amount**

[REDACTED]

Date 9/27/16

Signature [REDACTED]

Spending Authority Signature

HELIJET INTERNATIONAL

HELIJET

(800) 665-4354

GST: [REDACTED]

Station: Vancouver

Agent #: [REDACTED]

MERCHANT COPY

Invoice #: 98140

10.00 Qtkt Book - 220 X 10	\$2,200.00 CAD
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	
> Quick Ticket Prepaid	\$220.00 CAD
[REDACTED]	

GST	\$110.00 GST
-----	--------------

Grand Total	\$2,310.00 CAD
-------------	----------------

Payment Information:

Mastercard	\$2,310.00 CAD
------------	----------------

Date/Time	14/09/2016 [REDACTED]
Station	JYVRC003
Terminal ID	W66248351
Action	Purchase/Telephone
Card Type	M/C
Card Number	**** * [REDACTED]
Amount	\$2,310.00
Authorization	121124
Trace Number	0013920010
Response	01-005/APPROVED 121124

Passenger Signature



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37469

MLA Name: Reid, Linda VM089019

Claim Date: September 24, 2016

Constituency: Richmond East

Type Of Trip: MLA Travel

Prepared By: [REDACTED]

Claimant Type: Member of Legislative Assembly

Travel From: Richmond

Travel To: Victoria

Trip Details: Royal Welcome

Date	Expenses	Amount
September 24, 2016	52(km)	\$27.67
September 21, 2016	Taxi	\$28.00 ✓
September 21, 2016	Taxi	\$10.10 ✓
September 21, 2016	Taxi Richmond Taxi invoiced \$30	\$0.00
September 24, 2016	Ferry driver and vehicle	\$69.00 ✓
September 24, 2016	Ferry reservation fee	\$15.00 ✓
September 24, 2016	Lunch and Dinner Only-Victoria	\$48.50
September 24, 2016	Quick tickets [REDACTED]	\$0.00 ✓
September 24, 2016	Taxi Richmond Taxi invoiced \$52	\$0.00
Total Payable		\$198.27

Date 26 Sep 2016

Signature [REDACTED]

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	Amount
--------------------------	---------------------	------------------	---------------

[REDACTED]



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

Claim Number: 37469

MLA Name: Reid, Linda VM089019

Claim Date: September 24, 2016

Constituency: Richmond East

Type Of Trip: MLA Travel

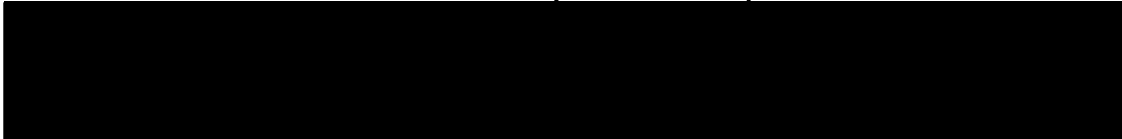
Organization Code	Account Code	STOB Code	Amount
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Date 09/29/16

Signature 
Spending Authority Signature

Prepaid



VANCOUVER TAXI
790 CLARK DR
VANCOUVER BC

BLUEBIRD CABS LTD.

CAB 59
2612 QUADRA ST, 2ND FLOOR
VICTORIA, BC V8T 4E4
250-382-2222



CARD *****
CARD TYPE MASTERCARD
DATE 2016/09/21
TIME 0206
CLERK ID 999
RECEIPT NUMBER
C85012075-001-705-002-0

TERM ID: BG342463 BATCH#: 193
SHIFT#: 002

Sale

INV#: 000000030
MCARD SEQ#: 1430010011550
Application Label: MasterCard
AID: A0000000041010
TVR: 00 00 00 00
TSI: E8 00

2016/09/24
Swartz Bay
To
Tsawwassen

AUTH ONLY

PURCHASE
AMOUNT \$23.00
TIP \$5.00
TOTAL

Amount: \$ 7.10
Tip: \$ 3.00

Total: CAD\$ 10.10

\$28.00

APPROVED 200013
001/00

21-Sep-16

CUSTOMER COPY
VICTORIA'S FIRST CHOICE
THANK YOU!

MasterCard
A0000000041010
33CB8F010B39659C
0000008000-E800
945C6217C0F8B9B3

APPROVED

AUTH# 213118 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

RES: 17.20
6 Adult 103.20
20' Undersize Vehi 56.45
1 Reservation Pr 15.00
Fuel Rebate 4.65

Total 170.00
Prepayment 15.00
CDN Cash 40.00
MasterCard 115.00
005/01-66223094
0010913810
Approved: 232736
CHANGE DUE 0.00

plus 2 adults 34-

LANE 03

SWB 24 Sep 2016

SEE REVERSE SIDE OF TICKET

56.45
17.20
(4.65)
69.00



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 37375

MLA Name: Reid, Linda VM089019

Claim Date: September 24, 2016

Constituency: Richmond East

Type Of Trip: Accompanying Person Travel

Prepared By: [Redacted]

Claimant Type: Accompanying Person (Family Member)

Travel From: Richmond

Travel To: Victoria

Trip Details: Royal Visit

Date	Expenses	Amount
September 24, 2016	52(km)	\$27.67
September 24, 2016	Ferry driver and vehicle	\$69.50 ✓
September 24, 2016	Ferry reservation fees	\$24.00 ✓
September 24, 2016	Ferry passenger	\$17.20 ✓
Total Payable		\$138.37

Date 26 Sep 2016

Signature [Redacted]

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	Amount
-------------------	--------------	-----------	--------

[Redacted Table Content]

Date 09/29/16

Signature [Redacted]

Spending Authority Signature

PURCHASE
BCFerries

2016/09/24
Tsawwassen
To
Swartz Bay
RESERVATION-
CONF: [REDACTED]
RES: [REDACTED]
20' Undersize Vehi (56.45)
[REDACTED]
Fuel Rebate 4.15-

Total
Prepayment [REDACTED]
CDN Cash [REDACTED]
CHANGE DUE [REDACTED]

*plus one
adult 17-*

LANE 44

TSA 24 Sep 2016

SEE REVERSE SIDE OF TICKET

PURCHASE
BCFerries

2016/09/24
Swartz Bay
To
Tsawwassen
AUTH ONLY
RESERVATION-
CONF: [REDACTED]
RES: [REDACTED]
Adult [REDACTED]
Fuel Rebate [REDACTED]

Total
Prepayment [REDACTED]
CDN Cash [REDACTED]
MasterCard
*****3729 (S)
005/01-66223094
0010913810
Approved: 232736
CHANGE DUE 0.00

plus 2 adults 34-

LANE 03

SWB 24 Sep 2016

SEE REVERSE SIDE OF TICKET

24

7.20

56.45
~~17.~~
17.20
<4.15>
69.50



INVOICE

Charge To: Office of the Speaker
Room 207, Parliament Buildings
Victoria BC V8V 1X4

Invoice No. INV00000000006616
Invoice Date 31/08/2016
Print Date 31/08/2016
Account No. 150104

Attention: [Redacted]

GST Reg. [Redacted]

For services provided from: 16/08/2016
To: 31/08/2016

Terms: Due and payable within 10 days of the invoice date.
A service charge of 2.00% per month will be charged on overdue accounts.

Document	Description	Passenger Name	Fare	GST	Total								
[Redacted]	YVR/YWH Aug 22 2016 FLT: [Redacted]	BSBINV: 91568 LINDA REID	\$151.42	\$7.58	\$159.00								
[Redacted]	YWH/YVR Aug 22 2016 FLT: [Redacted]	BSBINV: 91569 LINDA REID	\$151.42	\$7.58	\$159.00								
<p>SEP 1 2016</p> <p>claim 31340</p> <p>V000239</p> <p>Services rec'd Kamstrup</p>													
<p>CERTIFIED TO PAY:</p> <p>[Redacted]</p> <p>SIGNATURE _____</p> <table border="1"> <thead> <tr> <th>ORG</th> <th>ACCOUNT</th> <th>OBJECT</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td colspan="4">[Redacted]</td> </tr> </tbody> </table>						ORG	ACCOUNT	OBJECT	AMOUNT	[Redacted]			
ORG	ACCOUNT	OBJECT	AMOUNT										
[Redacted]													
Page Total			\$302.84	\$15.16	\$318.00								

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE

PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. RETD</i>	DATE <i>22 Aug 16</i>		
FROM <i>Vu</i>	FLIGHT NO.	CLASS Y	TIME
TO <i>he</i>	ACCOUNT NO.		
SIGN [REDACTED]	RESERVATION REFERENCE NO.		

VALID FOR REGULAR ECONOMY FARES ONLY

RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY

Helijet

GST # [REDACTED]

QUICK TICKET

SUBJECT TO TERMS AND CONDITIONS ON REVERSE

PASSENGER TO COMPLETE AREA WITHIN BORDER ONLY

PRINT PASSENGER NAME <i>L. RETD</i>	DATE <i>Aug 22/16</i>		
FROM <i>VIC</i>	FLIGHT NO.	CLASS Y	TIME
TO <i>UVA</i>	ACCOUNT NO.		
SIGN [REDACTED]	RESERVATION REFERENCE NO.		

VALID FOR REGULAR ECONOMY FARES ONLY

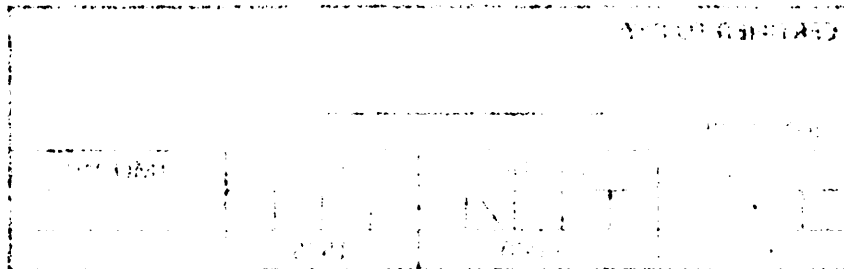
RESERVATIONS
1.800.665.4354

PLEASE CHECK-IN 20 MINUTES PRIOR TO DEPARTURE

ISSUED BY

Helijet

GST # [REDACTED]



Richmond Taxi Co. Ltd. (CCL)

2440 SHELL ROAD
RICHMOND, BC
V6X 2P1
HST: R139442636

Invoice

Date	Invoice #
7/31/2016	2016-07-102

Invoice To
[REDACTED] (L.Reid Office)
[REDACTED]

Terms	Account #
Net 30	[REDACTED]

SEP 19 2016

Description	HST	Amount																				
JULY 2016 GST On Sales		19.05 0.95																				
<i>V100669</i>																						
<i>JUL 6/16 HOME-HELJET</i>																						
<table border="1"> <tr> <td colspan="4">CERTIFIED TO PAY</td> </tr> <tr> <td colspan="4">[REDACTED]</td> </tr> <tr> <td colspan="4">SIGNATURE</td> </tr> <tr> <td>ORG</td> <td>ACCOUNT</td> <td>OBJECT</td> <td>AMOUNT</td> </tr> <tr> <td colspan="4">[REDACTED]</td> </tr> </table>			CERTIFIED TO PAY				[REDACTED]				SIGNATURE				ORG	ACCOUNT	OBJECT	AMOUNT	[REDACTED]			
CERTIFIED TO PAY																						
[REDACTED]																						
SIGNATURE																						
ORG	ACCOUNT	OBJECT	AMOUNT																			
[REDACTED]																						
		<i>signature received / carmichael</i>																				

-Please remember to include your account and invoice number on your cheque when mailing.

Total \$20.00

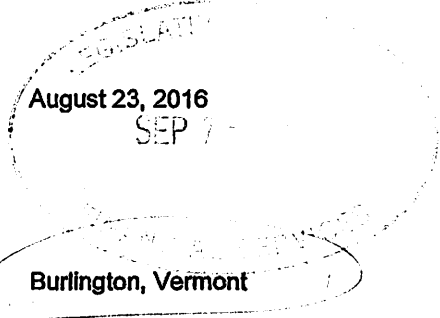
Balance Due \$20.00

Phone #	Fax #	E-mail	Web Site
604-276-2722	604-276-9444	[REDACTED]	www.richmondtaxi.ca



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

Claim Number: 37373
MLA Name: Reid, Linda VM089019 **Claim Date:** August 23, 2016
Constituency: Richmond East
Type Of Trip: Speaker Authorized Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Richmond **Travel To:** Burlington, Vermont
Trip Details: State Legislative Leaders Foundation



Date	Expenses	Amount
August 22, 2016	Taxi	\$9.00 ✓
August 23, 2016	Accommodation Expenses Accommodation may be covered by SLLF	\$0.00
August 23, 2016	Full Day Meals Per Diem Allow.	\$61.00
August 23, 2016	Taxi Richmond Taxi invoiced \$35	\$0.00
August 23, 2016	Taxi \$20 USD	\$26.50 ✗
August 27, 2016	US Exchange MLA Per Diem @ 1.2947 exchange rate	\$78.97
August 27, 2016	Airfare Cabin upgrade. Original flight claimed #36922	\$277.36 ✗
August 27, 2016	Taxi	\$27.60 ✗
August 27, 2016	Taxi \$22 USD	\$29.20 ✓
Total Payable		\$509.63

Date 02 Sep 2016

Signature [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



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

Claim Number: 37373

MLA Name: Reid, Linda VM089019

Claim Date: August 23, 2016

Constituency: Richmond East

Type Of Trip: Speaker Authorized Travel

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



Date Sep 7 / 16

Signature



9/9/16



BLURBIRD CABS LTD
2612 QUADRA ST
2ND FLOOR
VICTORIA, BC V8T 4E4
(250) 382-2222

TERM ID: CZ342463

BATCH#: 003
SHIFT#: 003

Sale

INVT#: 000000286

MCARD SEQ#: 003001001286

Application Label: MasterCard
AID: A000000041010
TVR: 00 00 00 00 00
TSI: E8 00

Total: CAD\$ 9.00

APPROVED 212034
001/00

22-Aug-16

CUSTOMER COPY
VICTORIA FIRST CHOICE
THANK YOU
CAB #7

YUR - 10531

BEL AIR TAXI
2121 HARTLEY AVENUE
COQUITLAM BC V3K 6Z3
6045241111

SALE

Server #: 009708

MID: 4298382

TID: A4298382

REF#: 00000005

Batch #: 109

SEQ: 109001001005

08/27/16

APPR CODE: 020223

MASTERCARD

AMOUNT \$24.00
TIP \$3.60
TOTAL \$27.60

00 - APPROVED - 001

MasterCard

AID: A000000041010

TVR: 00 00 00 00 00

TSI: E8 00

Thank You
Please Come Again
BEL AIR TAXI #105
COQUITLAM BC

CUSTOMER COPY

Date: 8/23/16

From: BTV

To: [REDACTED]

Driver: [REDACTED]

Amount: 29.60

BLAZER TRANSPORTATION

TAXI RECEIPT

(802)253.0013

FROM [REDACTED]

TO Airport

AMOUNT

22.00

DATE

8/27

DRIVER [REDACTED]

CAD \$29.20

Do not expose to excessive heat or direct sunlight.

STAPLE
HERE

REV. 11/72
CSN957
PRINTED IN U.S.A. BY MAGNETIC TICKET AND LABEL CORP., DALLAS, TX

UNITED



PASSENGER RECEIPT 1 OF 1
27AUG16
GO/DB7434 /BURLINGTON

**SPECIAL SERVICE
TICKET**

REID/LINDAMRS
NOT VALID FOR
TRANSPORTATION

PSGR TICKET 01421645139622

THIS IS YOUR RECEIPT

BTV UA ORD UA YVR

DHSPF1

FOR CONDITIONS OF
CONTRACT - SEE
PASSENGER TICKET AND
BAGGAGE CHECK

1 PREMIUM CABIN UPGRADE 209.00

NOT VALID FOR TRAVEL

USD 209.00 = \$277.36 MGXXXXXXXXXX [REDACTED]
CON

1 016 2923779719 1

USD 209.00

A STAR ALLIANCE MEMBER ☆

