

CLAIRE TREVENA, MLA NORTH ISLAND CONSTITUENCY 908 ISLAND HWY CAMPBELL RIVER BC V9W 2C3 Ministry of Citizens' Services Queen's Printer Storefront Services 250-952-4435 Email: qpinvoices@gov.bc.ca



Page 1 of 1

Description			Quantity	85	Price/Unit	Amount	Tax
PIN, LAPEL, PROVINCIAL FLAG		1000	300 EA		1.60 /EA		PC
						480.00	
5.000	%		480.00			24.00	
7.000	%	12	480.00	394	2 <u>2222</u>	33.60	8
						537.60	
	PIN, LAPEL, PROVINCIAL FLAG 5.000	PIN, LAPEL, PROVINCIAL FLAG 5.000 %	PIN, LAPEL, PROVINCIAL FLAG 5.000 %	PIN, LAPEL, PROVINCIAL FLAG 300 EA 5.000 % 480.00	PIN, LAPEL, PROVINCIAL FLAG 300 EA 5.000 % 480.00	PIN, LAPEL, PROVINCIAL FLAG 300 EA 1.60 /EA 5.000 % 480.00	PIN, LAPEL, PROVINCIAL FLAG 300 EA 1.60 /EA 480.00 5.000 % 480.00 24.00 7.000 % 480.00 33.60

To our valued customer, if you would like to expedite payment, please pay by credit card. VISA, Master Card and AMEX are accepted. Please call 250-952-4435 or 778-678-2589.

> Please make cheques payable to MINISTER OF FINANCE and remit to: Queen's Printer, P.O. Box 9451 Stn Prov Govt, Victoria BC V8W 9V7 A \$30 SERVICE FEE WILL BE CHARGED FOR EACH DISHONOURED CHEQUE. NOTICE: TERMS NET 30 DAYS. INTEREST WILL BE CHARGED ON OVERDUE ACCOUNTS IN ACCORDANCE WITH GOVERNMENT REGULATIONS.

Village of Port Alice

INVOICE

1061 Marine Drive, PO Box 130 Port Alice, BC V0N 2N0 Phone (250) 284-3391

Fax (250) 284-3416

CLAIRE TREVENA, MLA 908 ISLAND HIGHWAY CAMPBELL RIVER, BC V9W 2C3

ACCO	UNTN	UMBER
INVO	ICE N	UMBER
	00420)9
INV	OICE	DATE
1	9/10/2	017

DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
Rumble Sheet Ad - September & October	2.000	6.000	, 12.00
	L.		
2 55		T ag	£
		3 2C	
	3 8	_	14/
	81		
¥		a	
	N 59	16	
*			
		SUBTOTAL	12.00
GST#	er e e	GST	0.60
		PST	0.00
		HST	0.00
Payment is due within 30 days of invoice date.		TOTAL	\$12.60

	ACCOUNTS PAST DUE MAY BE SUBJECT TO LATE PAYMENT PENALTIES	
×	×	
PLEASE RETURN	N THIS PORTION WITH YOUR PAYMENT	

Village of Port Alice Accounts Receivable 1061 Marine Drive PO Box 130 Port Alice, BC V0N 2N0

INVOICE NUMBER	DATE
004209	19/10/2017
ACC	COUNT
CLAIDE TD	TOT IT'S I A BAT A
CLAIRE IR	EVENA, MLA
AMOUNT DUE	AMOUNT PAID

Theatre Quadra

Date: November 1, 2017

To:
Claire Trevena, MLA
908 Island Hwy.
Campbell River, BC
V9W 2C3

From: Theatre Quadra PO Box 709 Quathiaski Cove BC VoP 1No

Item Description	Quantity	Price	Total
For program: Black and white (2" X 3")	1	\$100.	\$100.
		Total	\$100.00

Thank you for your support



BC OWNED & OPERATED DI ACK DDECC CDOUD LTD

ADVERTISING STATEMENT & INVOICE/AFFIDAVIT

TIMES RUN RATE

1

BLACK PRESS GROUP LTD	BILLING PERIOD ADVERTISER/CLIENT NAME
BOX 3600 ABBOTSFORD BC V2S 4P4	09/01/17 - 09/30/1 CLAIRE TREVENA, MLA
ACCOUNT NAME AND ADDRESS	INVOICE# TERMS OF PAYMENT PAGE#
	33277536 Net 30 days
CLAIRE TREVENA, MLA	ACCOUNT NUMBER BILLING DATE
908 ISLAND HWY	9/30/2017 *** Revised ****
CAMPBELL RIVER, BC V9W 2C3	Display Ad tearsheets and a list of publication codes at: http://etearsheets.blackpress.ca For account inquiries, please call 1-866-850-4463

08/31 BALANCE FORWARD 0.00

BILLED UNITS

3.5 X 3.2

11.38i

PUBLICATION:

INVOICE #

CAMPBELL RIVER MIRROR - News

DESCRIPTION - OTHER COMMENTS/CHARGES

AD CLASS:

Supplements

09/22 33277536 FORESTRY WEEK

PAGE: A 35 Forestry

3 Color Supplement

ePaper

09/30

DATE

BC GST

GST

0.00

165.53

2.25

8.39

NET AMOUNT

CURRENT NET AMOUNT DUE	30 DAYS	60 DAYS	OVER 90 DAYS	UNAPPLIED AMOUNT	TOTAL AMT DUE
					176.17

A FINANCE CHARGE OF 2% WHICH IS AN ANNUAL RATE OF 24% WILL BE ADDED TO ACCOUNTS OVER 30 DAYS

THE INVOICE/STATEMENT SHALL BE DEEMED CORRECT UNLESS ADVISED IN WRITING WITHIN 30 DAYS OF BILLING DATE

GST REGISTRATION No

PLEASE DETACH AND RETURN STUB WITH YOUR REMITTANCE



BC OWNED & OPERATED

	REMIT TO	
--	----------	--

BLACK PRESS GROUP LTD BOX #3600 ABBOTSFORD, BC. V2S 4P4 INVOICE# BILLING DATE TOTAL AMT DUE 33277536 9/30/2017 176.17 ACCOUNT NUMBER ADVERTISER/CLIENT NAME CLAIRE TREVENA, MLA

How to pay your bill:

- Pre-authorized Payment Plan from your Bank Account please call 1-866-850-4463 or email pad@blackpress.ca
- * PC or Telephone banking through your Financial Institution
- * By credit card, please call 1-866-850-4463
- *By cheque payable to Black Press Group Ltd.



ADVERTISING STATEMENT & INVOICE/AFFIDAVIT

Black Press Group Ltd. ADVERTISER/CLIENT NAME BILLING PERIOD Box #3600 09/01/17 - 09/30/17 CLAIRE TREVENA MLA Abbotsford, B.C. V2S 4P4 TERMS OF PAYMENT: ACCOUNT NAME AND ADDRESS INVOICE #:... 1 of 1 Net 30 days 33277391 ADVERTISER/CLIENT# BILLING DATE ACCOUNT NUMBER CLAIRE TREVENA MLA N.I. CONSTITUENCY 908 ISLAND HWY 09/30/17 View your account information and display ad tearsheets at: http://iservices.blackpress.ca/login CAMPBEL RIVER BC V9W 2C3 Account inquiries: 1-866-850-4463 or ar@blackpress.ca GST REGISTRATION No. TIMES RUN RATE SAU SIZE BILLED UNITS NET AMOUNT DESCRIPTION - OTHER COMMENTS/CHARGES DATE ... INVOICE# .00 BALANCE FORWARD 08/31 BL NORTH ISLAND GAZETTE - News PUBLICATION: AD CLASS: Supplements 1 99.50 **FALL FAIR** 09/06 33277391 PAGE: A 11 FallFair .00 3 Color Supplement 2.25 ePaper 1 79.50 FALL/WINTER REGISTRATION 09/13 33277391 PAGE: Z 9 Register .00 3 Color Supplement 2.25 ePaper 1 79.50 FORESTRY WEEK 09/20 33277391 PAGE: A 13 Forestry .00 3 Color Supplement 2.25 ePaper 28.150 inch Ad Class Totals: \$265.25 **Publication Totals:** \$265.25 13.27 BC GST 09/30 TOTAL AMOUNT DUE UNAPPLIED AMOUNT CURRENT NET AMOUNT DUE 30 DAYS 60 DAYS OVER 90 DAYS 278.52

Finance charge on accounts over 30 days is 2% monthly (24% annual) = Invoice/Statement shall be deemed correct unless advised in writing within 30 days of billing date We warrant that the information shown on this invoice correctly describes the advertisement that was inserted in the edition of the publication specified.

PLEASE DETACH AND RETURN STUB WITH YOUR REMITTANCE



278.52

33277391	09/30/17	\$ 278.52
ACCOUNT NUMBER	ADVERTISER (CLIENT NAME
	CLAIRE TREV	ENA MLA

How to pay your bill:

- m Online using iServices: http://iservices.blackpress.ca/login
- Pre-authorized Payment Plan from your Bank Account, please call 1-866-850-4463 or email pad@blackpress.ca
- PC or Telephone banking through your Financial Institution
 By credit card, please call 1-866-850-4463
- By cheque payable to Black Press Group Ltd.

REMIT TO

Black Press Group Ltd. Box #3600 Abbotsford, B.C. V2S 4P4



ADVERTISING STATEMENT & INVOICE/AFFIDAVIT

Box #3600	BILLING PERIOD ADVERTISER/GLIENT: NAME				
Abbotsford, B.C. V2S 4P4	11/01/17 - 11/3	30/17 CLAIRE T	REVENA, MLA		
ACCOUNT NAME AND ADDRESS:	INVOICE #	TERMS OF PAYMENT	PAGE#		
	33324199	Net 30 days	1 of 1		
	ACCOUNT NUMBER	BILLING DATE.	ADVERTISER/CLIENT:#		
CLAIRE TREVENA, MLA		11/30/17	(*		
908 ISLAND HWY CAMPBELL RIVER BC V9W 2C3	http://iserv	unt information and displa ices.blackpress.ca/logi s: 1-866-850-4463 or ar	in		
	GST REGISTRA	ATION No.			

DATE INVOICE#	DESCRIPTION - OTHER COMM	ENTS/GHARGES			TIMES RUN RATE	NET AMOUNT
10/31	BALANCE FORWAI	RD				176.17
11/08 1541	Payment on Accoun	t				- 176.17
			183		BL	
PUBLICATION:	CAMPBELL RIVER	MIRROR - N	lews			
AD CLASS:	Display Advertising					
11/10 33324199	Remembrance			1.7x3.1	1	109.00
	PAGE: C 7 Rememb	ora		5.27i		
	3 color		÷.			.00
	ePaper					2.25
	Ad Class Totals:	\$111.25			5.270 inch	
	Publication Totals:	\$111.25				
11/30	BC GST					5.56

CURRENT NET AMOUNT DUE 30 DAYS 60 DAYS OVER 90 DAYS UNAPPLIED AMOUNT TOTAL	AMOUNT DUE
116.81	116.81
tions about a 20 days is 20 monthly /24// except very large (Statement shall be deemed a good velocity of interest and in witing within 20 days of killing data	

Finance charge on accounts over 30 days is 2% monthly (24% annual) = Invoice/Statement shall be deemed correct unless advised in writing within 30 days of billing date. We warrant that the information shown on this invoice correctly describes the advertisement that was inserted in the edition of the publication specified.

PLEASE DETACH AND RETURN STUB WITH YOUR REMITTANCE



Black Press Group Lt	d.
Box #3600	
Abbotsford, B.C. V2S	4P4

33324199	11/30/17	\$	116.81
ACCOUNT NUMBER	ADVERTISER	CHENT NAME	
	CLAIRE TREV	ENA, MLA	

How to pay your bill:

- Online using iServices: http://iservices.blackpress.ca/login
 Pre-authorized Payment Plan from your Bank Account,
 please call 1-866-850-4463 or email pad@blackpress.ca
 PC or Telephone banking through your Financial Institution
 By credit card, please call 1-866-850-4463
 By cheque payable to Black Press Group Ltd.



ADVERTISING STATEMENT & INVOICE/AFFIDAVIT

Black Press Group Ltd. Box #3600	BILLING PERIOD ADVERTISER/CLIENT NAME
Abbotsford, B.C. V2S 4P4 ACCOUNT NAME AND ADDRESS	11/01/17 - 11/30/17 CLAIRE TREVENA MLA
	33324077 Net 30 days 1 of 1
	ACCOUNT NUMBER BILLING DATE ADVERTISER/CLIENT:#
CLAIRE TREVENA MLA	11/30/17
N.I. CONSTITUENCY 908 ISLAND HWY CAMPBEL RIVER BC V9W 2C3	View your account information and display ad tearsheets at: http://iservices.blackpress.ca/login Account inquiries: 1-866-850-4463 or ar@blackpress.ca

GST REGISTRATION No.

		GST REGISTRATION	NO.	
DATE: INVOICE#	DESCRIPTION OTHER COMMENTS/CHARGES	SAU SIZE BILLED UNITS	TIMES RUN RATE	NET AMOUNT
10/31	BALANCE FORWARD			278.52
11/03 1538	Payment on Account			- 278.52
			BL	
PUBLICATION:	NORTH ISLAND GAZETTE - N	Vews		
AD CLASS:	Supplements			
11/08 33324077	REMEMBRING	3.5x3.1	1	79.00
		10.85i		
	PAGE: A 9 Remembra	(4)		
	3 Color Supplement			.00
	ePaper			2.25
	Ad Class Totals: \$81.25		10.850 inch	
ž	Publication Totals: \$81.25			
11/30	BC GST		*	4.06

CURRENT NET AMOUNT DUE 30 DAYS	60 DAYS OVER 90 DAYS UNAPPLIED AMOUN	TOTAL AMOUNT DUE
85.31		85.31
L-		

Finance charge on accounts over 30 days is 2% monthly (24% annual) = Invoice/Statement shall be deemed correct unless advised in writing within 30 days of billing date. We warrant that the information shown on this invoice correctly describes the advertisement that was inserted in the edition of the publication specified.

PLEASE DETACH AND RETURN STUB WITH YOUR REMITTANCE



33324077	11/30/17	\$ 85.31
ACCOUNT NUMBER	ADVERTISER / C	CLIENT NAME
5 200	CLAIRE TREVE	NA MLA
How to pay you	r hill:	1989

- Online using iServices: http://iservices.blackpress.ca/login
 Pre-authorized Payment Plan from your Bank Account, please call 1-866-850-4463 or email pad@blackpress.ca
 PC or Telephone banking through your Financial Institution
 By credit card, please call 1-866-850-4463
 By cheque payable to Black Press Group Ltd.

REMIT TO

Black Press Group Ltd. Box #3600 Abbotsford, B.C. V2S 4P4

Village of Port Alice

1061 Marine Drive, PO Box 130 Port Alice, BC V0N 2N0 Phone (250) 284-3391

Fax (250) 284-3416

CLAIRE TREVENA, MLA 908 ISLAND HIGHWAY CAMPBELL RIVER, BC V9W 2C3

	ACCC	UNT	NU	MBER
16. N	INVO	ICE I	NUN	1BER
		0042	259	
	INV	OICI	DA	TÉ
	0	4/12/	201	7

INVOICE

DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
Rumble Sheet Ad - November & December	2.000	6.000	12.00
			gi
		a. ,	
	4		p
£			
h sec			
9			
		SUBTOTAL	12.00
GST #		GST	0.60
		PST	0.00
		HST	0.00
Payment is due within 30 days of invoice date.		TOTAL	\$12.60

ACCOUNTS PAST DUE MAY BE SUBJECT TO LATE PAYMENT PENALTIES

×	X
PLEASE RETURN THIS PORTION WITH YOUR PAYMENT	

Village of Port Alice Accounts Receivable 1061 Marine Drive PO Box 130 Port Alice, BC V0N 2N0

INVOICE NUMBER	DATE
004259	04/12/2017
ACC	COUNT
CLAIRE TR	EVENA, MLA
AMOUNT DUE	AMOUNT PAID



INVOICE

Box 29, 652 H'Kusam Way, Sayward, BC V0P 1R0

Invoice No. 17-15

Date: Dec 13, 2017

Claire Trevena 908 Island Hwy, Campbell River, B.C. V9W 2C3

Business Directory Ad – Sayward News For 2017 For 2018	ю	\$60.00 \$60.00
Total	GST	included \$120.00

Please make cheques payable to **Village of Sayward**Accounts are due and payable within 30 days of the date of this invoice

Office Use Only:

	DR	CR
01-03-00-0740	120.00	
01-01-03-0191		114.29
01-03-00-0742		5.71

Telephone: 250-282-5512 Fax: 250-282-5511 E-mail village@saywardvalley.ca



Nuu-chah-nulth Tribal Council PO BOX 1383

Port Alberni, BC V9Y 7M2

Telephone: (250) 724-5757

Fax: (250) 723-0463

INVOICE

NUMBER	PAGE
7461	1
DATE	A Property
11/24/2	017

TO

SOLD Claire Trevena

908 Island Highway

P.O. NO.	CUSTOMER	TERMS
		Due Upon Receipt

Campbell River, BC V9W 2C8

	DESCRIPTION		AMOUN
Ha-Shilth-Sa	Remembrance Day Issue: November 16, 2017; Page 17		
Advertising			\$110.00
Lag	 F	540	
2.			
	·		
		8	
		₩	
		9	4 4
OMMENTS: Please include	e invoice # on cheque	¥	
10			-
14.	GST Registration No:	TOTAL	\$110.0



Nuu-chah-nulth Tribal Council

Port Alberni, BC V9Y 7M2

Telephone: (250) 724-5757

Fax: (250) 723-0463

INVOICE

NUMBER	PAGE
7401	1
DATE	Carlo Salari
09/27/2	017

TO

SOLD

Claire Trevena 908 Island Highway

Campbell River, BC V9W 2C8

P.O. NO.	CUSTOMER	TERMS
		Due Upon Receipt

	DESCRIPTION			AMOUN'
Subscriptions	Ha-Shilth-Sa Newspaper One Year Subscription Term: 2017-2018	s s		\$35.00
25	tal.		53	
1		8		
*	*			
	34°		9	я
COMMENTS: Please include	invoice # on cheque			
	GST Registration No:		TOTAL	\$35.00

LEGISLATIVE ASSEMBLY OF B.C.

PARLIAMENT BUILDINGS, ROOM 149 VICTORIA, BC V8V 1X4 TEL# (250) 356-8295

THANK YOU FOR VISITING THE LEGISLATIVE ASSEMBLY OF B.C. WWW.LEG.BC.CA

INVOICE

Sold To

: CLAIRE TREVENA

OFFICE

MLA GIFT SHOP

Address

ROOM 201

City Postal Code VICTORIA, British Columbia

V8V1X4

Station Date/Time Invoice #

Home Phone Work Phone

Cashier

Nov-03-2017

49510

(250)

: 9

Stock # Description	Qty	Price	Discount	Sold Ext
1374 MLA CHRISTMAS CARD 2017 CUSTOM	34	16.74	-113.90	455.26
	*		SUBTOTAL:	455.26
9			GST:	22.76

PAYMENTS

TOTAL:

ACCOUNT: 509.89 CHANGE: 0.00

PST:

31.87

509.89

Total Savings: : \$ 113.90

Please submit your cheque made payable to the Legislative Assembly of British Columbia and remit

Parliamentary Education Office Room 149, Parliament Buildings Victoria, BC V8V 1X4

or Submit invoice to Financial Services to be processed



CLAIRE TREVENA, MLA NORTH ISLAND CONSTITUENCY 908 ISLAND HWY CAMPBELL RIVER BC V9W 2C3 Ministry of Citizens' Services BC Mail Plus PO Box 9453 Stn Prov Govt Victoria BC V8W 9V7 Ph:250-952-5102 F:250-952-5117 Email: BCMPACCT@Victoria1.gov.bc.ca



Page 1 of 1

Please keep the bottom portion for your records and return the top portion with your payment

-					1 7 min year payment		
	ShipTo	Invoice #	Bill To		Invoice Date 11/30/2017		
Product #	Description		Quar	ntity	Price/Unit	Amount	Tax
7777000100	Letters Mailed		16	EA	0.83 /EA	13.28	(
7777000300	Flats Mailed		1	EA	2.63 /EA	2.63	G
7777000100	(Oct/17)-Letters Mailed		2	EA	0.83 /EA	1.66	G
Subtotal						17.57	
GST/HST #		5.000 %		17.57		0.88	
Total (CAD)						18.45	

RATE INCREASES EFFECTIVE JANUARY 15, 2018 LETTERS= \$0.85; FLATS= \$2.68; PACKAGES= \$5.97

Please make cheques payable to MINISTER OF FINANCE and remit to: Queen's Printer, P.O. Box 9451 Stn Prov Govt, Victoria, BC, V8W 9V7 A \$30 SERVICE FEE WILL BE CHARGED FOR EACH DISHONOURED CHEQUE NOTICE TERMS NET 30 DAYS. INTEREST WILL BE CHARGED ON OVERDUE ACCOUNTS IN ACCORDANCE WITH GOVERNMENT REGULATIONS.

Monk Office

Statement

800 Viewfield Road Victoria, BC V9A 4V1

P: 250.384.0565 T: 800.735.3433

F: 250.384.2553 AR: 250.414.3359

NORTH ISLAND CONSTITUENCY CLAIRE TREVENA MLA 908 ISLAND HWY CAMPBELL RIVER BC V9W 2C3 CANADA

ACCOUNT NO. STATEMENT DATE 11/01/17

PAGE: 0001

Invoice #Charges Excl.GST/HST Date Code Order # P.O. # / References Current GST/HST Balance 10/23/17 IN 78140162-000 18415935 19.71 20.63 19.71 .92 20.63 CHARGES GST TOTAL 20.63 .00 .00 .00 .00 OVER 120

TERMS: Payable upon Receiptinance Charge of 2% per Month per Annum) Chargedn overdue accounts.

CURRENT OVER 30 OVER 60 OVER 90

Legend for Invoice

18 = Port Hardy 23 = Broad St 21 = Fort St 24 = Royal Oak 12 = Duncan 16 = Courtenay

18 = Fort St 17 = Campbell River22 = Oak St

25 =Tuscany Village

26 - Sidney 60 = Viewfield

GST #

Monk Office

Copies of invoices available online at http://www.monk.ca

REMITTANCE ADVICE Return this Portion with Your Payment for Proper Application

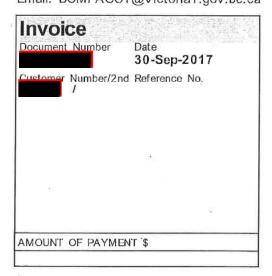
ACCOUNT NAME NORTH ISLAND CONSTITUENCY STATEMENT DATE ACCOUNT NO. 11/01/17

		CHECK IT	TEMS
Invoice # 0	ode!	Balance	
18415935	IN	20.63	
190		9	
TOTAL		20	. 63





CLAIRE TREVENA, MLA NORTH ISLAND CONSTITUENCY 908 ISLAND HWY CAMPBELL RIVER BC V9W 2C3 Ministry of Citizens' Services
BC Mail Plus
PO Box 9453 Stn Prov Govt
Victoria BC V8W 9V7
Ph:250-952-5102 F:250-952-5117
Email: BCMPACCT@Victoria1.gov.bc.ca



Page 1 of 1

Please keep the bottom portion for your records and return the top portion with your payment

	ShipTo	Invoice #			Bill To		Invoice Date 09/30/2017		
Product #	Description				Qua	ntity	Price/Unit	Amount	Tax
7777000100	Letters Mailed				8	B EA	0.83 /EA	6.64	G
7777000300	Flats Mailed			22		2 EA	2.63 /EA	5.26	G
7777000800	Packages Mailed					EA	5.85 /EA	5.85	G
Subtotal			947			80		17.75	
GST/HST #		5.000	%			17.75	(5)	0.89	
Total (CAD)		+3						18.64	

Monk Office

BILL TO:NORTH ISLAND CONSTITUENCY

CLAIRE TREVENA MLA

CAMPBELL RIVER, BC V9W 2C3

908 ISLAND HWY

INVOICE

Remit to:

Pay Online www.monk.ca 800 Viewfield Road, Victoria, B.C. V9A 4V1 250.384.0565 or TF 1.800.735.3433 Accounting 250.414.3359 F 250.384.2553 or TFX 1.888.835.3955

ROUTE: 9

MONK OFFICE #17

SHIP TO: NORTH ISLAND CONSTITUENCY

CLAIRE TREVENA MLA

908 ISLAND HWY

CAMPBELL RIVER, BC V9W 2C3

REPRINT: Y

CANADA

0001

ORDERED BY :

ACC #:

CANADA

2502875100

ATTENTION TO: Special Instructions:

rvoice No.	b. Invoice Date Purchase Order No. Cost Centre		Sales (Order	rder Order Date			Sales Rep			
7394018	9/26/17			1	7711592	1-000	9/26/1	7			Pag 1
Ordered	Shipped	B/O	Stock No.	/ Description	O. O.	Basi	cs No.		Price	U/M	Amount
1	- 1		BAS4996107			49961	1-07	*	17.47	PK	17.47
			FIG PAD BASIC	S LETTER CANARY		ľ					
	200		10/PACK PERF	ED						.]	
1	1		KMW56144	985	197	73211	1-00		76.99	EA	76.99
		jets.	FOOTREST KE	NS SOLEMATE W/GE	_	2					
8				02		1000				11	
			EL.								
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				*		82			\$7		tt :::::::::::::::::::::::::::::::::::
			1	10:					- P		36
Subtota	d: 94.46		Miscellane	eous: .00	GST:	4.72	PST	: 6	.61 To	tal:	105.79

\$

\$

GST REGISTRATION NUMBER #

.00

TERMS: NET 30 DAYS FROM INVOICE DATE.

INTEREST ON OVERDUE ACCOUNTS:

2% / MONTH AND 26.8% / ANNUM



CLAIRE TREVENA, MLA NORTH ISLAND CONSTITUENCY 908 ISLAND HWY CAMPBELL RIVER BC V9W 2C3 Ministry of Citizens' Services BC Mail Plus PO Box 9453 Stn Prov Govt Victoria BC V8W 9V7 Ph:250-952-5102 F:250-952-5117 Email: BCMPACCT@Victoria1.gov.bc.ca



Page 1 of 1

Please keep the bottom portion for your records and return the top portion with your payment

	ShipTo	Invoice #		Bill To		Invoice Date 10/31/2017		
Product #	Description			Quan	tity	Price/Unit	Amount	Tax
7777000100	Letters Mailed			8	EA	0.83 /EA	6.64	G
7777000600	Parcels Mailed Fuel Surcharge %			1	EA	12.25 /EA 4.00 %	12.25 0.49	G
Subtotal GST/HST #		5.000 %	6		19.38	8	19.38 0.97	
Total (CAD)						<u>√</u>	20.35	



Date: November 6, 2017

TO: Claire Trevena, MLA North Island Constituency 908 Island Hwy Campbell River, BC V9W 2C3

DESCRIPTION	HOURS	RATE	AMOUNT	
Cleaning – Port Hardy Community Office of Claire Trevena, MLA	1 hour	\$25/hour	\$25.00	
			39.	
9				
8	*			
			:185 	
		TOTAL	\$25.00	

Make all checks payable to



Campbell River Fire Safety Services Inc 1180 South Island Highway Campbell River, British Columbia V9W 1B3

Canada

INVOICE

Invoice No.:

13414

Date:

Sep 29, 2017

Ship Date:

Page:

1

Re: Order No.

Sold to:

North Island Constituency

908 Campbell River, B.C. Canada

Ship to:

North Island Constituency 908 Campbell River, B.C. Canada

Business No.:

RT0001

Item No.		Unit	Quantity	Description	Tax	Unit Price	Amount
CR8260 CR8180 CR8660	E	ach ach ach	1 1 1	Fire Extinguisher Inspections Emergency Light Inspection and Testing Truck Service Fee	G G G	6.75 12.95 12.95	6.75 12.95 12.95
	Su.			G - GST 5% GST/HST		8	1.64
						lg.	
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Shipped By:		Tracking	Number:		<u> </u>	Total Amount	34,29
Comment:	15th of	month followin	g 2% per month (2	26.8% per annum) service charge on overdue	9	Amount Pald	0.00
Sold By:	paymen	iio				Amount Owing	34.29

Claire Trevena, MLA North Island Constituency Office 908 Island Highway, Campbell River V9W 2C3

EXPENSE CLAIM FORM

(Rate for use of personal vehicle: 53c/km)

Date	Type of Expense	Notes	Sub- total	Total
Aug 4/17	food	Constituency Assistant MLA meeting.	5	46.20
Sept 22/17	cream	coffee cream for office		2.99
3				
				**
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\$11 (190)				2) E
	41	¥.		
S.			8	
	all.		TOTAL	49.19

Signature		
Name:	Date: _	Oct 6/17
MLA Approve	_Date: _	6/10/17