April 30, 2019

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act, 2015 [File #: EC/16/2019]

On April 16, 2019, Executive Council received your request, via transfer from the Premier’s Office, for access to the following records/information:

“Any records -- electronic, written, or otherwise -- related to Premier Danny Williams’ travel any of the following cities: Montreal, Toronto, Vancouver between Jan. 1, 2008 and Dec. 31, 2008.”

Please be advised that a decision has been made by the Deputy Clerk of Executive Council to provide access to this information, with the exception of personal information, which has been removed in accordance with Section 40(1) of the Access to Information and Protection of Privacy Act, 2015 (the Act), which states:

40. (1) The head of a public body shall refuse to disclose personal information to an applicant where the disclosure would be an unreasonable invasion of a third party’s personal privacy.

You may ask the Information and Privacy Commissioner to review the processing of this request, as set out in section 42 of the Act (a copy of this section of the Act has been enclosed for your reference). A request to the Commissioner must be made in writing within 15 business days of the date of this letter or within a longer period that may be allowed by the Commissioner. Your appeal should identify your concerns with the response and why you are submitting the appeal.

Contact information for the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner
2 Canada Drive
P. O. Box 13004, Stn. A
St. John’s, NL. A1B 3V8

Telephone: (709) 729-6309
Toll-Free:1-877-729-6309
Facsimile: (709) 729-6500
You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive this response, pursuant to section 52 of the Act (a copy of this section of the Act has been enclosed for your reference).

This response will be published as outlined on the Completed Access to Information Requests website. (http://atipp-search.gov.nl.ca/). If you have any further questions, please feel free to contact me by telephone at (709)729-5691 or by e-mail at rachellecutler@gov.nl.ca.

Sincerely,

[Signature]

for

Rachelle Cutler
ATIPP Coordinator
Enclosure
Access or correction complaint

42.(1) A person who makes a request under this Act for access to a record or for correction of personal information may file a complaint with the commissioner respecting a decision, act or failure to act of the head of the public body that relates to the request.

(2) A complaint under subsection (1) shall be filed in writing not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16(2).

(3) A third party informed under section 19 of a decision of the head of a public body to grant access to a record or part of a record in response to a request may file a complaint with the commissioner respecting that decision.

(4) A complaint under subsection (3) shall be filed in writing not later than 15 business days after the third party is informed of the decision of the head of the public body.

(5) The commissioner may allow a longer time period for the filing of a complaint under this section.

(6) A person or third party who has appealed directly to the Trial Division under subsection 52(1) or 53(1) shall not file a complaint with the commissioner.

(7) The commissioner shall refuse to investigate a complaint where an appeal has been commenced in the Trial Division.

(8) A complaint shall not be filed under this section with respect to

(a) a request that is disregarded under section 21;

(b) a decision respecting an extension of time under section 23;

(c) a variation of a procedure under section 24; or

(d) an estimate of costs or a decision not to waive a cost under section 26.

(9) The commissioner shall provide a copy of the complaint to the head of the public body concerned.
Direct appeal to Trial Division by an applicant

52. (1) Where an applicant has made a request to a public body for access to a record or correction of personal information and has not filed a complaint with the commissioner under section 42, the applicant may appeal the decision, act or failure to act of the head of the public body that relates to the request directly to the Trial Division.

(2) An appeal shall be commenced under subsection (1) not later than 15 business days

(a) after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(b) after the date the head of the public body is considered to have refused the request under subsection 16(2).

(3) Where an applicant has filed a complaint with the commissioner under section 42 and the commissioner has refused to investigate the complaint, the applicant may commence an appeal in the Trial Division of the decision, act or failure to act of the head of the public body that relates to the request for access to a record or for correction of personal information.

(4) An appeal shall be commenced under subsection (3) not later than 15 business days after the applicant is notified of the commissioner’s refusal under subsection 45(2).
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<th>Invoice Number</th>
<th>Description</th>
<th>Accounting Date</th>
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**CLAIM TOTAL**: $7,673.63

**RECEIVED**: FEB 11, 2008

**CLAIM NUMBER**: TC-EXC-59067

**PURPOSE OF TRIP**: Travel to Vancouver, BC for COF meeting and COF Climate Adoption meeting.
**TRAVEL EXPENSE CLAIM**

**CLAIM NUMBER**

**FISCAL YEAR**
2007-08

**GOVERNMENT OF NEWFOUNDLAND AND LABRADOR**

**CLAIMANT**
Premier Danny Williams
Mailing Address:
Premier's Office
8th Floor, East Block, Confed. Bldg.
St. John's

**DEPARTMENT**
Executive Council

**DIVISION**
Financial Administration

**PURPOSE OF TRIP:**
Travel to Vancouver, BC for COF meeting and COF Climate Adaption meeting

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<th>DESCRIPTION</th>
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**CLAIM VERIFIED BY:**

[Signature]

[Date: Feb 6 08]
LeGrow's Travel
Atlantic Place - 50
215 Water Street
St. John's, NF A1C 6C9

Government of Newfoundland
Confederation Building, 5th Floor West Block
St. Johns NL A1B 1W3
Department: OPRM

Sale Invoice
Locator: XWNZJA
Date Issued: January 21, 2006
Agent: Heidi Pound

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Invoice Number 60042885:

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Exchange: 5684569316

2,096.00 268.54 26.17 2,390.71

Payments Applied:
on Invoice 50042885
CreditCard 21-Jan-2008 -2,334.21

on Invoice 50042902
CreditCard 25-Jan-2008 -56.50 -2,390.71

Invoice Total: 2,390.71
Payment Total: -2,390.71
Balance Due: 0.00

You have provided us your personal information in order to facilitate your current and future travel arrangements and allow us to provide travel services and products to you. We will remove your information from our records upon your request if you call, write or email any of us individually or email us centrally at privacyfeedback@maritimetravel.ca

HST/GST Number: 10352.4823
QST Number: 1145887525

January 30, 2008
LeGrow's Travel
Atlantic Place - 50
215 Water Street
St. John's, NF A1C 6C9

Government of Newfoundland
Confederation Building, 5th Floor West Block
St. Johns NL A1B 1W3
Department: OPRM

Sale Invoice No: 5004289C
Locator: KH9XMG
Date Issued: January 25, 2006
Agent: Heidi Pound

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Payments Applied to This Invoice
CreditCard 25-Jan-2008

-286.57

Invoice Total: 286.57
Payment Total: -286.57
Balance Due: 0.00

You have provided us your personal information in order to facilitate your current and future travel arrangements and allow us to provide travel services and products to you. We will remove your information from our records upon your request if you call, write or email any of us individually or email us centrally at privacyfeedback@maritimetravel.ca

HST/GST Number: 10352 4823
QST Number: 1148887525

January 30, 2008
LeGrow’s Travel
Atlantic Place - 50
215 Water Street
St. John’s, NF A1C 6C9

Government of Newfoundland
Confederation Building, 5th Floor West Block
St. John’s NL A1B 1W3
Department: OPRM

Sale Invoice
Locator: R3VG01
Date Issued: January 16, 2006
Agent: Heidi Pound

<table>
<thead>
<tr>
<th>TkU/Confirm No.</th>
<th>Depart</th>
<th>Return</th>
<th>Base Fare</th>
<th>HST/GST</th>
<th>Other Taxa</th>
<th>Total Fare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Williams/Daniel Mr</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 AC 102</td>
<td>YVR Vancouver</td>
<td>YYZ Toronto</td>
<td>01/29/2008</td>
<td>2:30P</td>
<td>208/01/29 Tue</td>
<td>2,265.20</td>
</tr>
<tr>
<td>2 AC 680</td>
<td>YZ Toronto</td>
<td>YYT St. John’s</td>
<td>208/01/30 Wed</td>
<td>7:25A</td>
<td>208/01/30 Wed</td>
<td>0</td>
</tr>
</tbody>
</table>

Hotel: Sheraton Gateway Tor C961383670
Terminal 3 P.O. Box 3000 Amf Charge: 259.00
Toronto ON L5P 1C4

| Williams/Daniel |
|-----------------|----------------|----------------|-----------|---------|------------|------------|
| Dom. Air        | Air Canada Web |                | 01/29/2008 | 115.00 | 5.80       | 121.80     |
| 1 AC 102        | YVR Vancouver  | YYZ Toronto    | 208/01/29 Tue | 2:30P | 208/01/29 Tue | 0         |
| 2 AC 682        | YZ Toronto     | YYT St. John’s | 208/01/30 Wed | 12:00P| 208/01/30 Wed | O         |

Hotel: Sheraton Gateway Tor C961383670
Terminal 3 P.O. Box 3000 Amf Charge: 259.00
Toronto ON L5P 1C4

Payments Applied:
on Invoice 50042491
CreditCard          16-Jan-2008       -2,265.20
on Invoice 50043057
CreditCard          30-Jan-2008       -121.80

Invoice Total: 2,387.00
Payment Total: -2,387.00
Balance Due: 0.00
## Guest Folio

<table>
<thead>
<tr>
<th>Date</th>
<th>Reference</th>
<th>Description</th>
<th>Charges/Credits</th>
<th>Balance</th>
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<tbody>
<tr>
<td>01/25</td>
<td>0933</td>
<td>Room Rate</td>
<td>364.00</td>
<td>364.00</td>
</tr>
<tr>
<td>01/25</td>
<td>0933</td>
<td>Room Tax Room Rate</td>
<td>36.40</td>
<td>400.40</td>
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<td>01/26</td>
<td>7853</td>
<td>Room GST Room Rate</td>
<td>18.20</td>
<td>418.60</td>
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<tr>
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<td>7853</td>
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<td>483.12</td>
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<tr>
<td>01/26</td>
<td>7867</td>
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<td>Room Rate</td>
<td>364.00</td>
<td>929.59</td>
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<td>Room Tax Room Rate</td>
<td>36.40</td>
<td>965.99</td>
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<td>01/26</td>
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<td>Room GST Room Rate</td>
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<td>984.19</td>
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<td>01/27</td>
<td>7947</td>
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<td>Room Rate</td>
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<td>1,407.24</td>
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<td>36.40</td>
<td>1,443.64</td>
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<td>01/27</td>
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<td>1,461.84</td>
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<td>1,520.89</td>
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<td>Fiji Water 1L</td>
<td>5.75</td>
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<td>1,526.93</td>
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<tr>
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<td></td>
<td>Fiji Water 500ml</td>
<td>3.75</td>
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<td></td>
<td>Room GST Room Rate</td>
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<td>2,297.24</td>
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</table>
Guest Folio

The Pan Pacific Hotel Vancouver, 01/29/08 11:52:18

<table>
<thead>
<tr>
<th>Date</th>
<th>Reference</th>
<th>Description</th>
<th>Charges/Credits</th>
<th>Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/29</td>
<td>8098</td>
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<td>2,352.55</td>
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<tr>
<td>01/29</td>
<td></td>
<td>American Express</td>
<td></td>
<td>0.00</td>
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Total: $ [Redacted] $ [Redacted]

Balance: $ 0.00

GST Summary
Room Charge(s) GST: 72.80

GST 86324 7854

I agree that I am personally liable for the following statement and if the person, company or association indicated by me is responsible for payment of the same, does not do so, that my liability for such payment shall be joint and several with such person, company or association.

Guest Service Agent

Guest Signature

PAN PACIFIC
Vancouver

AAA Five Diamond Award

300-999 Canada Place, Vancouver, British Columbia, Canada V6C 3B5
Tel 604.662.8111 Fax 604.685.8600
Room Reservations 604.662.3223
TOLL FREE: In Canada 1.800.663.1515 In USA 1.800.937.1515 In Mexico 001.800.514.9086
E-mail reservations@panpacific-hotel.com panpacific.com
Come back soon

Mr. Daniel Williams
Abc Corporate Services/tmc

Room 528
Rate 259.00
No. pers. 1
Folio 643518 EX-A
Page 1
Arrive 29-JAN-08 22:46
Depart 30-JAN-08
Payment VI

<table>
<thead>
<tr>
<th>DATE</th>
<th>REFERENCE</th>
<th>DESCRIPTION</th>
<th>CHARGES / CREDIT</th>
</tr>
</thead>
<tbody>
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<td>29-JAN-08</td>
<td>RT528</td>
<td>Room Charge - TMC / Consortia</td>
<td>259.00</td>
</tr>
<tr>
<td>29-JAN-08</td>
<td>RT528</td>
<td>Destination Marketing Fee</td>
<td>7.33</td>
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<tr>
<td>29-JAN-08</td>
<td>RT528</td>
<td>GST On DMF</td>
<td>0.44</td>
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<tr>
<td>29-JAN-08</td>
<td>RT528</td>
<td>Rooms GST</td>
<td>12.95</td>
</tr>
<tr>
<td>29-JAN-08</td>
<td>RT528</td>
<td>Rooms PST</td>
<td>12.95</td>
</tr>
<tr>
<td>30-JAN-08</td>
<td>VI</td>
<td>Visa</td>
<td>292.67</td>
</tr>
</tbody>
</table>

Balance Due 0.00

For your convenience, we have prepared this zero-balance folio indicating a $0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a $0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full.

EXPENSE REPORT SUMMARY

<table>
<thead>
<tr>
<th>Date</th>
<th>Room</th>
<th>Food/Bev</th>
<th>Phone</th>
<th>Taxes</th>
<th>Other</th>
<th>Total</th>
<th>Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>29-JAN-08</td>
<td>259.00</td>
<td>0.00</td>
<td>0.00</td>
<td>33.67</td>
<td>0.00</td>
<td>292.67</td>
<td>0.00</td>
</tr>
<tr>
<td>Total</td>
<td>259.00</td>
<td>0.00</td>
<td>0.00</td>
<td>33.67</td>
<td>0.00</td>
<td>292.67</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Thank you for choosing Starwood Hotels. We look forward to welcoming you back soon!

** continued on the next page **

I agree to remain personally liable for the payment of this account if the corporation or other third party billed fails to pay part or all of these charges.

Signature

Mr. Daniel Williams
FOLIO 643518 29-JAN-08

Member of Starwood Preferred Guest®
You're on your way

We'll have you checked out and on your way in no time. Simply choose from one of the Express Checkout options below and leave the rest to us.

Key Drop
Please drop your room keys at the front desk or drop your keys in the Key Drop box located in the main lobby.

Video
You may review your charges and checkout from the comfort of your guestroom. Please select the menu button on your television remote control and follow the instructions.

Kiosk
You may check out and obtain an updated or additional copy of your charges from our kiosk(s) located in the lobby. To access your account, please have your credit card ready, as it will be required identification. When your check out is complete, you may drop your room keys at the front desk or in the Key Drop box(es) located in the kiosk.
Come back soon

<table>
<thead>
<tr>
<th>GUEST</th>
<th>Room</th>
<th>Rate</th>
<th>No. pers.</th>
<th>Folio</th>
<th>Page</th>
<th>Arrive</th>
<th>Depart</th>
<th>Payment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr. Daniel Williams</td>
<td>528</td>
<td>259.00</td>
<td>1</td>
<td>643518</td>
<td>2</td>
<td>29-JAN-08</td>
<td>30-JAN-08</td>
<td>VI</td>
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</table>

GST Summary for your stay:

<table>
<thead>
<tr>
<th>Description</th>
<th>Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Room Revenue GST</td>
<td>12.95</td>
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<tr>
<td>Food &amp; Beverage GST</td>
<td>0.00</td>
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<tr>
<td>Photo/Fax/Copy Services GST</td>
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<tr>
<td>Other Revenue GST</td>
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<tr>
<td><strong>Total GST for your stay:</strong></td>
<td><strong>13.39</strong></td>
</tr>
</tbody>
</table>

Sheraton Gateway Hotel GST Vendor #: 140047879

I agree to remain personally liable for the payment of this account if the corporation or other third party billed fails to pay part or all of these charges.

Signature

Mr. Daniel Williams  
FOLIO 643518 29-JAN-08

Member of Starwood Preferred Guest®
You're on your way
We'll have you checked out and on your way in no time.
Simply choose from one of the Express Checkout options
below and leave the rest to us.

Key Drop
Please drop your room keys at the front desk or drop your keys in the
Key Drop box located in the main lobby.

Video
You may review your charges and checkout from the comfort of your
guestroom. Please select the menu button on your television remote
control and follow the instructions.

Kiosk
You may checkout and obtain an updated or additional copy of your
charges from our kiosk(s) located in the lobby. To access your account,
please have your credit card ready, as it will be required identification.
When your check out is complete, you may drop your room keys at the
front desk or in the Key Drop box(es) located in the kiosk.
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>In/Out</th>
<th>Receipt #</th>
<th>Amount</th>
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</thead>
<tbody>
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<td>17:25</td>
<td>In</td>
<td>311687</td>
<td>$44.24</td>
</tr>
<tr>
<td>01/30/08</td>
<td>17:25</td>
<td>Out</td>
<td>277270</td>
<td>$56.63</td>
</tr>
<tr>
<td>01/25/08</td>
<td>09:28</td>
<td>In</td>
<td>022232</td>
<td>$50.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$100.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$50.63</td>
</tr>
</tbody>
</table>

Welcome to our new parking area...
Bigger and better than ever!
Drive safely.

Questions? Call 709-737-8500
GST#: 0066023905
Enter Receipt Trailer.................6
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
OFFICIAL JOURNEY AUTHORIZATION

NAME: Premier Danny Williams
MAILING ADDRESS: Premier's Office
8th Floor, East Block, Confed Bldg
St. John's

DEPARTMENT: Executive Council
POSITION TITLE: Premier

TYPE OF IMPREST
TRIP ADVANCE
STANDING TRAVEL ADVANCE

PURPOSE OF TRIP: COF meeting and COF Climate Change Adaption meeting in Vancouver, BC

TRAVEL DETAILS:
FROM: St. John's, NL
TO: Vancouver, BC
DEPARTURE DATE: 25-Jan-2008
RETURN DATE: 30-Jan-2008

PAYMENT METHOD:
PERSONAL CREDIT CARD
GOVERNMENT CREDIT CARD

PAYMENT ORDER: TO

THE ESTIMATE OF TOTAL TRIP COST MUST BE ENCUMBERED REGARDLESS OF IMPREST

AMOUNT: 01 - - - - - 0000
ACCOUNTING DISTRIBUTION: 0000

I CERTIFY THAT THE ABOVE EMPLOYEE IS AUTHORIZED TO TRAVEL ON GOVERNMENT BUSINESS AS DESCRIBED.

DIVISIONAL DIRECTOR: Brian Mavety
DATE: Jan 23/08

TO BE COMPLETED IF AN ADVANCE IS REQUIRED

SUMMARY OF ANTICIPATED EXPENSES EQUAL TO THE AMOUNT OF THE ADVANCE REQUIRED (TRIP ADVANCE ONLY)

TAXI, LIMOUSINE, OR BUS FARE TO AND FROM DEPARTURE POINTS

TRANSPORTATION COST (If Travel Order not issued)

ACCOMMODATIONS FOR ___ NIGHTS (Hotel / Private)

MEALS FOR ___ DAYS (At approved rates)

OTHER EXPENSES (Specify):

Total Anticipated Expenses (Advance Required)

<table>
<thead>
<tr>
<th>AMOUNT</th>
<th>ACCOUNTING DISTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 -</td>
<td>- - - - - - - 0000</td>
</tr>
<tr>
<td>01 -</td>
<td>- - - - - - - 0000</td>
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</table>

PROCESSED BY: MASON SHAIN | 14
<table>
<thead>
<tr>
<th>Vendor Name</th>
<th>Vendor Address</th>
<th>Priority Code</th>
<th>Payment Priority</th>
<th>Invoice Date</th>
<th>Original Amount</th>
<th>Approved Date</th>
<th>Approved By</th>
</tr>
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<tbody>
<tr>
<td>WILLIAMS, HON D</td>
<td>8TH FLOOR</td>
<td></td>
<td>Hold/Department</td>
<td>07-MAR-08</td>
<td>1,038.34</td>
<td>10-MAR-08</td>
<td>ROHAYES</td>
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<td>01-0301-110-0800-0327-00000-0000</td>
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<td>03-EC</td>
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<td></td>
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<td>03-EC</td>
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</table>

Total for Vendor: $1,734.58
**GOVERNMENT OF NEWFOUNDLAND AND LABRADOR**

**TRAVEL EXPENSE CLAIM**

**CLAIM NUMBER** TC EXC52493

**DATE DD-MM-YYYY**

**PARTICULARS**

**DEPTN TIME**

**MEALS**

**ACCOMMODATIONS**

**TRAVEL**

**PRIVATE VEHICLE**

**OTHER**

**HST**

<table>
<thead>
<tr>
<th>DATE DD-MM-YYYY</th>
<th>PARTICULARS</th>
<th>DEPTN TIME</th>
<th>MEALS</th>
<th>ACCOMMODATIONS</th>
<th>TRAVEL</th>
<th>PRIVATE VEHICLE</th>
<th>OTHER</th>
<th>HST</th>
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<td>AC flight to Toronto and return on</td>
<td>5:10 PM</td>
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<td></td>
<td>998.34</td>
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<td>89.65</td>
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<td>March 6, 2008</td>
<td>LeGrow's Travel service charge</td>
<td>7:25 PM</td>
<td></td>
<td></td>
<td>40.00</td>
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<td>5.20</td>
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<tr>
<td>4-Mar-2008</td>
<td>The Westin Harbour Castle</td>
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<td></td>
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<td>323.49</td>
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<td>15.51</td>
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<td></td>
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<td></td>
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<td></td>
<td>8.02</td>
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<tr>
<td>5-Mar-2008</td>
<td>Dinner with 2 guests</td>
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<td></td>
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<td>237.99</td>
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<td></td>
<td>10.98</td>
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<tr>
<td></td>
<td>Incidental for one night</td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<td>4.76</td>
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</table>

**CLAIM TOTAL** $1,734.58

**COLUMN TOTALS** $237.99 | $323.49 | $1,038.34 | $12.78 | $121.98

**POST AUDIT**

**CLAIM TOTAL** $1,734.58

**COLUMN TOTALS** $237.99 | $323.49 | $1,038.34 | $12.78 | $121.98

**CONTINUE ON NEXT PAGE IF MORE THAN ONE PAGE IS REQUIRED TO COMPLETE CLAIM. ALL COLUMN TOTALS APPEAR ON THIS PAGE ONLY.**

**PAYMENT AMOUNT**

<table>
<thead>
<tr>
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<th>ACCOUNTING DISTRIBUTION</th>
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</tr>
<tr>
<td>01</td>
<td>- - - - - - - - 0000</td>
</tr>
</tbody>
</table>

**TOTAL PAYMENT AMOUNT** $1,734.58

**CLAIM VERIFIED BY:**

**SIGNATURE**

**DATE** March 10, 2008

**SIGNATURE**

**DATE** March 6, 2008
This is your itinerary and invoice. For airline tickets, this is your eticket.

<table>
<thead>
<tr>
<th>Airline</th>
<th>Flight #</th>
<th>Origin</th>
<th>Destination</th>
<th>Depart Date</th>
<th>Depart Time</th>
<th>Arrival Date</th>
<th>Arrival Time</th>
<th>Cabin Class</th>
<th>Flying Time</th>
<th>Seats</th>
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<tbody>
<tr>
<td>Air Canada</td>
<td>697</td>
<td>St. John’s Arpt</td>
<td>Lester B Pearson Intl</td>
<td>Tue Mar 4</td>
<td>5:10 PM</td>
<td>Tue Mar 4</td>
<td>7:28 PM</td>
<td>Economy (Latitude)</td>
<td>3:48</td>
<td>14F</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(ST. JOHN’S)</td>
<td>(TORONTO) Terminal 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Air Canada</td>
<td>1198</td>
<td>Lester B Pearson</td>
<td>St John’s Arpt</td>
<td>Wed Mar 5</td>
<td>7:25 PM</td>
<td>Wed Mar 5</td>
<td>11:50 PM</td>
<td>Economy (Latitude)</td>
<td>2:55</td>
<td>22F</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Intl (TORONTO)</td>
<td>(ST. JOHN’S) Terminal 1</td>
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**SEAT SELECTION: 14F**

**SEAT SELECTION: 22F**

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<tr>
<th>Airline</th>
<th>Reference Locator</th>
<th>Passenger</th>
<th>Airline</th>
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<th>Type</th>
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<tbody>
<tr>
<td>Air Canada</td>
<td>PHS235 - Web Check In</td>
<td>WILLIAMS/DANIEL MR</td>
<td>AC</td>
<td>0142155318388</td>
<td>ETicket</td>
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<tr>
<td>Air Canada</td>
<td>PHS235 - Web Check In</td>
<td>WILLIAMS/DANIEL MR</td>
<td>AC</td>
<td>0142155318502</td>
<td>ETicket</td>
</tr>
</tbody>
</table>

**THANK YOU FOR BOOKING WITH US**

- **AIRCANADA WEB AIRFARE-TKT 0142155318388** $454.00
- **TAX ON AIRFARE INCLUDES 64.67 HST** $107.24
- **TAX ON AIRFARE TOTAL** $561.24
- **AIRCANADA WEB AIRFARE-TKT 0142155318502** $454.00
- **TAX ON AIRFARE INCLUDES 64.67 GST** $72.75
- **TAX ON AIRFARE TOTAL** $526.75
- **LEGTVL NON-REFUNDABLE FEE-DOM AC TKT** $40.00
- **HST TAX ON FEE** $5.00
- **TOTAL DUE CAD** $1,133.19

**PYMT BY AX** $556.24
**PYMT BY AX** $526.75
**PYMT BY AX** $41.26
**TOTAL PAID CAD** $1,133.19

**BALANCE CAD** $0.00

For after hours emergency assistance call 1-888-551-1181
From outside North America call collect 001-802-423-3806
Westin Harbour Castle
1 Harbour Square
Toronto, ON M5J 1A6
416-869-1600

Williams, Daniel
C/o 215 Water St
St. John's, NF A1C 6C9

Page Number: 1  
Invoice Nbr: 1000001548

Guest Number: 457327  
Arrive Date: 03-04-2008

Folio: A  
Depart Date: 03-05-2008

No. Of Guests: 1, 0
Room Number: 2943, 2944

Club Account: [Redacted]

---

**Tax Invoice**

---

**Tax ID:** 861336693

**DATE** | **REFERENCE** | **DESCRIPTION** | **CHARGES** | **CREDITS**
---|---|---|---|---
03-04-2008 | RT2943 | Room Charge | $300.00 | 
03-04-2008 | RT2943 | DMF | $8.49 | 
03-04-2008 | RT2943 | GST Other DMF | $0.51 | 
03-04-2008 | RT2943 | Room GST 5% | $15.00 | 
03-04-2008 | RT2943 | Room PST 5% | $15.00 | 
03-04-2008 | 6915 | Telephone GST 5% | $0.40 | 
03-04-2008 | 6915 | [Redacted] | $8.02 | 
03-05-2008 | AX | American Express | $347.42 | $-347.42

**Total** | **Balance**
---|---
$347.42 | $-347.42

---

**Continued on next page**
Ruth's Chris Steak House  
Toronto, Ontario  
GST #89541 9968 RC  
22 LIDIA  

2/1  
CHK 1800  
GST 3  
05MAR'08 5:52PM  

| Item                  | Quantity | Price  
|-----------------------|----------|--------|  
| *Ribeye               | 1        | 45.95  
| 1 Acqua Panna         |          | 7.25   
|                       |          | 7.25   
|                       |          | 11.50  
|                       |          | 10.50  
| *Petit Filet          | 1        | 39.95  
| Stuffed Mushrooms     | 1        | 16.95  
| *Petit Filet          | 1        | 39.95  
| LOBSTER TAIL          | 1        | 35.00  
| *Baked Loaded         | 1        | 7.95   
| *Asparagus/Holla       | 1        | 9.95   
|                       |          | 12.00  
| *Mushrooms            | 1        | 7.95   
| *Shoestring           | 1        | 7.95   
| **Total**             |          | 268.05 |
| G.S. TAX (5%)         |          | 13.40  |
| P.S. TAX (8%)         |          | 22.41  |
| **Amount Due**        |          | 303.86 |

**Total** $268.05  

**Less** 48.50  

**Total** $219.55  

**GST** $10.98  

**PST** $18.44  

**Total** $248.97  

**OUR SIZZLING PRIME TIME MENU**  
3 COURSES FOR $54.00  
4:30 - 6:30 / 7 DAYS A WEEK  
ASK YOUR SERVER FOR DETAILS  

416-955-1455  
VISIT US-ON LINE @  
WWW.RUTHSCHRIS.CA
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

NAME
Premier Danny Williams
MAILING ADDRESS
8th Floor, East Block
Confederation Building
St. John’s
POSTAL CODE

DEPARTMENT
Executive Council
POSITION TITLE
Premier
VENDOR NUMBER

PURPOSE OF TRIP
Travel to Toronto to speak at TD Financial Group

TRAVEL DETAILS:
FROM: St. John’s, NL
TO: Toronto, ON
DEPARTURE DATE: 4-Mar-2008
RETURN DATE: 5-Mar-2008
PAYMENT METHOD:
☐ PERSONAL CREDIT CARD
☐ GOVERNMENT CREDIT CARD
☐ TRAVEL ORDER

MODE OF TRAVEL:
☐ AIR
☐ PERSONAL VEHICLE
☐ RENT-A-CAR

I CERTIFY THAT THE ABOVE EMPLOYEE IS AUTHORIZED TO TRAVEL ON GOVERNMENT BUSINESS AS DESCRIBED.

SUMMARY OF ANTICIPATED EXPENSES EQUAL TO THE AMOUNT OF THE ADVANCE REQUIRED (TRIP ADVANCE ONLY)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>TAXI, LIMOUSINE, OR BUS FARE TO AND FROM DEPARTURE POINTS</td>
<td>$</td>
</tr>
<tr>
<td>TRANSPORTATION COST (If Travel Order not issued)</td>
<td></td>
</tr>
<tr>
<td>ACCOMMODATIONS FOR ___ NIGHTS (Hotel / Private)</td>
<td></td>
</tr>
<tr>
<td>MEALS FOR ___ DAYS (At approved rates)</td>
<td></td>
</tr>
<tr>
<td>OTHER EXPENSES (Specify):</td>
<td></td>
</tr>
<tr>
<td>Total Anticipated Expenses (Advance Required)</td>
<td>$</td>
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ACCOUNTING DISTRIBUTION:

<table>
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<tr>
<th>AMOUNT</th>
<th>ACCOUNTING DISTRIBUTION</th>
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</thead>
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<td>- 0000</td>
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<tr>
<td>01</td>
<td>- 0000</td>
</tr>
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PROCESSED BY:

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Feb 29/08
<table>
<thead>
<tr>
<th>Expense Accounting Flex</th>
<th>Amount</th>
<th>Invoice Number</th>
<th>Description</th>
<th>Accounting Date</th>
<th>Pay Group</th>
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<tbody>
<tr>
<td>WILLIAMS, NON D STJ-8TH FLOOR 4004342F</td>
<td>01-0301-110-0800-0367-000000-0000</td>
<td>2,144.34</td>
<td>TCEXC53305</td>
<td>Travel to Toronto</td>
<td>18-APR-08</td>
</tr>
<tr>
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<td>01-0301-110-0800-0365-000000-0000</td>
<td>311.71</td>
<td>TCEXC53305</td>
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<td>18-APR-08</td>
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<td>TCEXC53305</td>
<td>Harmonized Sales T</td>
<td>18-APR-08</td>
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Total for Vendor: $2,765.40
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

FISCAL YEAR
2008-09

CLAIMANT
Premier Danny Williams
MAILING ADDRESS
8th Floor, East Block
Confederation Building
St. John's, NL

DEPARTMENT
Executive Council
POSITION TITLE
Premier
VENDOR NUMBER

PURPOSE OF TRIP:
Travel to Toronto to Co-Chair Public Policy Forum Dinner on April 10, 2008

<table>
<thead>
<tr>
<th>DATE</th>
<th>PARTICULARS</th>
<th>DEPARTURE TIME</th>
<th>MEALS</th>
<th>ACCOMMODATION</th>
<th>TRAVEL</th>
<th>PRIVATE VEHICLE</th>
<th>OTHER</th>
<th>GST</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-Apr-2008</td>
<td>AC flight from St. John's to Toronto and return on April 11, 2008</td>
<td>10:10 AM</td>
<td></td>
<td></td>
<td>2,144.34</td>
<td></td>
<td></td>
<td>222.95</td>
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<tr>
<td>10-Apr-2008</td>
<td>Hotel accommodations - Park Hyatt</td>
<td></td>
<td></td>
<td>311.71</td>
<td></td>
<td></td>
<td></td>
<td>14.85</td>
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<tr>
<td>11-Apr-2008</td>
<td>Breakfast</td>
<td></td>
<td></td>
<td>37.44</td>
<td></td>
<td></td>
<td></td>
<td>1.61</td>
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<tr>
<td>11-Apr-2008</td>
<td>Per Diem for Dinner</td>
<td></td>
<td></td>
<td>26.19</td>
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<td></td>
<td></td>
<td>1.31</td>
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</tbody>
</table>

Incidentals for one night

Financial Administration
Executive Council

NEW YEAR

APR 18 2008

CLAIM TOTAL $ 2,765.40

CONTINUE ON NEXT PAGE IF MORE THAN ONE PAGE IS REQUIRED TO COMPLETE CLAIM. ALL COLUMN TOTALS APPEAR ON THIS PAGE ONLY.

TOTAL AMOUNT OF CLAIM ▶ 01 2,765.40

STANDING TRAVEL ADVANCE (IF ANY)

LESS: AMOUNT OF CLAIM APPLIED TO STA ▶ 02

LESS: TRIP ADVANCE (IF ANY) ▶ 03

JA

AMOUNT PAYABLE TO CLAIMANT ▶ 04 2,765.40

AMOUNT PAYABLE DUE TO GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

EXPENSES NOT PAID BY CLAIMANT ▶ 05

REVENUE RECEIPT NUMBER

2,765.40 ▶ TOTAL PAYMENT AMOUNT

PAYMENT AMOUNT

ACCOUNTING DISTRIBUTION

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</table>

CLAIM VERIFIED BY:

CLM

APR 18 2008

2
## LeGrow’s Travel

**Atlantic Place - 50**  
215 Water Street  
St. John's, NF A1C 6C9

---

**Government of Newfoundland**  
Confederation Building, 5th Floor West Block  
St. Johns NL A1B 1W3  
Department: OPRM

**Invoice Number 50044815:**  
**Williams/Daniel Mr**

<table>
<thead>
<tr>
<th>Tkt/Confirm No</th>
<th>Depart</th>
<th>Return</th>
<th>Base Fare</th>
<th>HST/GST</th>
<th>Other Taxes</th>
<th>Total Fare</th>
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<tbody>
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<td>0142155978218</td>
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<td>04/11/2008</td>
<td>459.00</td>
<td>65.22</td>
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<td>YYZ Toronto 2008/04/09 Wed 7:18P</td>
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<td></td>
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</tr>
<tr>
<td>2 AC 692 YZS Toronto 2008/04/11 Fri 12:00P</td>
<td>YZS St. John's 2008/04/11 Fri 4:25P</td>
<td>O</td>
<td></td>
<td></td>
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<table>
<thead>
<tr>
<th>Tkt/Confirm No</th>
<th>Depart</th>
<th>Return</th>
<th>Base Fare</th>
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<th>Other Taxes</th>
<th>Total Fare</th>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 AC 692 YZS Toronto 2008/04/11 Fri 12:00P</td>
<td>YZS St. John's 2008/04/11 Fri 4:25P</td>
<td>O</td>
<td></td>
<td></td>
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**Service Fees**  
SF Domestic Air Canad 03/10/2008 40.00 5.20 8.20

**Invoice Number 50045778:**  
**Williams/Daniel Mr**

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<th>Return</th>
<th>Base Fare</th>
<th>HST/GST</th>
<th>Other Taxes</th>
<th>Total Fare</th>
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<td>04/11/2008</td>
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<td>1,022.85</td>
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<td>YZS Halifax 2008/04/10 Thu 11:20A</td>
<td>O</td>
<td></td>
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<tr>
<td>2 AC 611 YZS Halifax 2008/04/10 Thu 12:00P</td>
<td>YZS Toronto 2008/04/10 Thu 1:24P</td>
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<td></td>
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<tr>
<td>3 AC 692 YZS Toronto 2008/04/11 Fri 12:00P</td>
<td>YZS St. John's 2008/04/11 Fri 4:25P</td>
<td>O</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Hotel**  
Park Hyatt Toronto 4 Avenue Road  
Charge: 578.00  
Toronto ON M5R 2E8

**Invoice Number 50045931:**  
**Williams/Daniel Mr**

<table>
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<tr>
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<th>Depart</th>
<th>Return</th>
<th>Base Fare</th>
<th>HST/GST</th>
<th>Other Taxes</th>
<th>Total Fare</th>
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<tbody>
<tr>
<td>0142157147390</td>
<td>04/04/2008</td>
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<td>100.00</td>
<td>5.00</td>
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<td>105.00</td>
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<tr>
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<td>YZS Halifax 2008/04/10 Thu 11:20A</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 AC 611 YZS Halifax 2008/04/10 Thu 12:00P</td>
<td>YZS Toronto 2008/04/10 Thu 1:24P</td>
<td>O</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 AC 1198 YZS Toronto 2008/04/11 Fri 7:25P</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Hotel**  
Park Hyatt Toronto 4 Avenue Road  
Charge: 578.00  
Toronto ON M5R 2E8

---

April 11, 2008
LeGrow's Travel
Atlantic Place - 50
215 Water Street
St. John's, NF A1C 6C9

Payments Applied:
on Invoice 50044815
  CreditCard 10-Mar-2008 -566.89
  CreditCard 10-Mar-2008 -627.55
  CC Merchant 10-Mar-2008 -45.20
on Invoice 50045779
  CreditCard 09-Apr-2008 -1,022.85
on Invoice 50045931
  CreditCard 11-Apr-2008 -105.00

-2,367.29

Invoice Total: 2,367.29
Payment Total: -2,367.29
Balance Due: 0.00

You have provided us your personal information in order to facilitate your current and future travel arrangements and allow us to provide travel services and products to you. We will remove your information from our records upon your request if you call, write or email any of us individually or email us centrally at privacyfeedback@maritimetravel.ca

HST/GST Number: 10352 4823
QST Number: 1148887525

April 11, 2008
<table>
<thead>
<tr>
<th>DATE</th>
<th>DESCRIPTION</th>
<th>CHARGE/CREDIT</th>
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<tbody>
<tr>
<td>04/10</td>
<td>DISCOUNT ROOM</td>
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<tr>
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<td>*G.S.T RM TAX 5%</td>
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<tr>
<td>04/10</td>
<td>*P.S.T RM TAX 5%</td>
<td>14.45</td>
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<tr>
<td>04/10</td>
<td>DEST MRKTG FEE</td>
<td>8.25</td>
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<td>.40</td>
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<tr>
<td>04/11</td>
<td>BFAST</td>
<td>31.00</td>
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<tr>
<td>04/11</td>
<td>*P.S.T. F&amp;B</td>
<td>2.24</td>
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<tr>
<td>04/11</td>
<td>*IRD BFAST TIP</td>
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**SUMMARY OF G.S.T.#867257131 RT**

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<tr>
<td>Food &amp; Beverage</td>
<td>1.61</td>
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<tr>
<td>Other</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>16.46</strong></td>
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</tbody>
</table>

I agree that my liability for this bill is not waived and I agree to be held personally liable in event that the indicated person, company or association fails to pay for any part or the full amount of these charges.
For reservations, call your Travel Planner or Hyatt at 800-220-1084.
Consult Hyatt on the Internet at www.hyatt.com
Hyatt Hotels & Resorts encompasses hotels and resorts managed,
franchised, or operated by two separate groups of companies: Hyatt
Corporation and its affiliates and affiliates of Hyatt International Corporation.

PARK HYATT TORONTO®

HYATT HOTELS

ARIZONA
Hyatt Regency Phoenix
Hyatt at the Buttes
Hyatt Regency Scottsdale at Gainey Ranch
Hyatt Regency Glendale
Hyatt Regency Tucson

CALIFORNIA
Hyatt Regency Huntington Beach
Hyatt Regency Indian Wells
Hyatt Regency Long Beach
Hyatt Regency Los Angeles International Airport
Hyatt Regency San Francisco
Hyatt Regency San Francisco Airport
Hyatt Regency San Jose
Hyatt Regency Santa Clara
Hyatt Regency San Francisco
Hyatt Regency San Diego
Hyatt Regency San Francisco Airport
Hyatt Regency San Francisco Airport
Hyatt Regency Santa Monica

FLORIDA
Hyatt Regency Coconut Grove
Hyatt Regency Fort Lauderdale
Hyatt Regency Orlando
Hyatt Regency Orlando International Airport
Hyatt Regency Orlando

GEORGIA
Hyatt Regency Atlanta Midtown
Hyatt Regency Atlanta Downtown
Hyatt Regency Atlanta Perimeter North
Hyatt Regency Atlanta

ILLINOIS
Hyatt Regency Oak Brook
Hyatt Regency Glenview
Hyatt Regency O'Hare

NEW JERSEY
Hyatt Regency Princeton
Hyatt Regency Princeton at Forrestal Village

NEW YORK
Hyatt Regency Manhattan
Hyatt Regency New York
Hyatt Regency New York City Center
Hyatt Regency New York City Center
Hyatt Regency New York City Center
Hyatt Regency New York City Center
Hyatt Regency New York City Center
Hyatt Regency New York City Center
Hyatt Regency New York City Center
Hyatt Regency New York City Center

OHIO
Hyatt Regency Columbus
Hyatt Regency Cleveland
Hyatt Regency Cincinnati
Hyatt Regency Toledo
Hyatt Regency Columbus
Hyatt Regency Columbus
Hyatt Regency Columbus
Hyatt Regency Columbus
Hyatt Regency Columbus
Hyatt Regency Columbus

TENNESSEE
Hyatt Regency Memphis
Hyatt Regency Nashville

TEXAS
Hyatt Regency Austin
Hyatt Regency Dallas
Hyatt Regency Houston
Hyatt Regency Lubbock

FLORIDA
Hyatt Regency Fort Lauderdale
Hyatt Regency Orlando

CALIFORNIA
Hyatt Regency Huntington Beach
Hyatt Regency Orange County

ARIZONA
Hyatt Regency Phoenix

CALIFORNIA
Hyatt Regency Los Angeles

COLORADO
Hyatt Regency Denver

CONNECTICUT
Hyatt Regency Greenwich

DISTRICT OF COLUMBIA
Hyatt Regency Washington

PARK HYATT HOTELS

ARIZONA
Park Hyatt Arizona

CALIFORNIA
Park Hyatt Los Angeles
Park Hyatt Santa Barbara

FLORIDA
Park Hyatt West Palm Beach

GEORGIA
Park Hyatt Atlanta

ILLINOIS
Park Hyatt Chicago

NEW YORK
Park Hyatt New York

OHIO
Park Hyatt Columbus

TENNESSEE
Park Hyatt Nashville

TEXAS
Hyatt Regency Dallas

HYATT INTERNATIONAL HOTELS

AUSTRALIA
Hyatt Regency Adelaide
Hyatt Regency Melbourne
Hyatt Regency Perth
Hyatt Regency Sydney

BRITISH VIRGIN ISLANDS
Hyatt Regency Tortola

CANADA
Hyatt Regency Toronto

CHILE
Hyatt Regency Santiago

FRANCE
Hyatt Regency Paris

GERMANY
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INDIA
Hyatt Regency Mumbai

ITALY
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JAPAN
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KOREA
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MALAYSIA
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MEXICO
Hyatt Regency Mexico City

NETHERLANDS
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SPAIN
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TURKEY
Hyatt Regency Istanbul

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Hyatt Regency Dubai

UNITED KINGDOM
Hyatt Regency London

US
Hyatt Regency Atlanta

VENEZUELA
Hyatt Regency Caracas

HYATT RESORTS WORLDWIDE

AUSTRALIA
Hyatt Regency Scottsdale Resort

JAPAN
Park Hyatt Tokyo

KOREA
Park Hyatt Seoul

PARK HYATT HOTELS

ARIZONA
Park Hyatt Arizona

CALIFORNIA
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Hyatt Regency Caracas

HYATT RESORTS WORLDWIDE

AUSTRALIA
Hyatt Regency Scottsdale Resort

JAPAN
Park Hyatt Tokyo

KOREA
Park Hyatt Seoul

This is Hyatt's authorization to place charges incurred by
(NAME) on my credit card.

I will authorize: All Charges Room and Tax only Incidents only

Cardholder signature

EXPRESS CHECK OUT

☐ I will NOT require an itemized hotel statement.

☐ Please send a copy of my hotel account to:

Name

Company

Address

City State Zip Email Address: Signature

6/02
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

FISCAL YEAR
2008-09

OFFICIAL JOURNEY AUTHORIZATION

JA NUMBER

NAME
Premier Danny Williams

MAILING ADDRESS
8th Floor, East Block
Confederation Building
St. John's, NL

DEPARTMENT
Executive Council

POSITION TITLE
Premier

VENDOR NUMBER

MAIL CHEQUE

HOLD CHEQUE

PURPOSE OF TRIP
To Co-Chair a Public Policy Forum Dinner in Toronto, ON

TRAVEL DETAILS:

FROM: St. John's, NL
TO: Toronto, ON

DEPARTURE DATE: 10-Apr-2008
RETURN DATE: 11-Apr-2008

PAYMENT METHOD:
- PERSONAL CREDIT CARD
- GOVERNMENT CREDIT CARD

MODE OF TRAVEL:
- AIR
- RENT-A-CAR COMPANY
- PERSONAL VEHICLE
- GOVERNMENT VEHICLE
- OTHER (SPECIFY)

THE ESTIMATE OF TOTAL TRIP COST MUST BE ENCUMBERED REGARDLESS OF IMPREST

AMOUNT
01 - - - - - - - 0000

ACCOUNTING DISTRIBUTION

I CERTIFY THAT THE ABOVE EMPLOYEE IS AUTHORIZED TO TRAVEL ON GOVERNMENT BUSINESS AS DESCRIBED.

______________________________
DISSERIAL DIRECTOR

______________________________
DATE

TO BE COMPLETED IF AN ADVANCE IS REQUIRED

SUMMARY OF ANTICIPATED EXPENSES EQUAL TO THE AMOUNT OF THE ADVANCE REQUIRED (TRIP ADVANCE ONLY)

TAXI, LIMOUSINE, OR BUS FARE TO AND FROM DEPARTURE POINTS $ 

TRANSPORTATION COST (If Travel Order not issued) 

ACCOMMODATIONS FOR ___ NIGHTS (Hotel / Private) 

MEALS FOR ___ DAYS (AI approved rates) 

OTHER EXPENSES (Specify):

______________________________
______________________________

Total Anticipated Expenses (Advance Required) $ ________

______________________________
ACCOUNTS PAYABLE

______________________________
DATE

<table>
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<th>ACCOUNTING DISTRIBUTION</th>
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</tr>
<tr>
<td>Vendor Name</td>
<td>Vendor Address</td>
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<td>-------------</td>
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<th>Account Group</th>
<th>Pay Group</th>
<th>Expense Accounting Plan</th>
<th>Invoice Number</th>
<th>Description</th>
<th>Invoice Date</th>
<th>Amount</th>
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**Total for Vendor: $364.24**

<table>
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**Total: $364.24**
**Travel Expense Claim**

**Claimant:** Premier Danny Williams  
**Mailing Address:** 8th Floor, East Block  
**Confederation Building**  
**St. John’s**  
**Postal Code:**

**Department:** Executive Council  
**Position Title:** Premier  
**Vendor Number:**  
**Mail Cheque:**  
**Hold Cheque:**  
**Claimant’s Headquarters Address:** Financial Administration Executive Council

**Date:** 19-Oct-2008  
**Purpose of Trip:** To attend COF meeting in Montreal on October 20, 2008

<table>
<thead>
<tr>
<th>Date</th>
<th>Particulars</th>
<th>Meals</th>
<th>Accommodation</th>
<th>Travel</th>
<th>Private Vehicle</th>
<th>Other</th>
<th>HST</th>
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<tbody>
<tr>
<td>19-Oct-2008</td>
<td>Intercontinental Hotel, Montreal</td>
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<td></td>
<td></td>
<td>15.91</td>
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<tr>
<td></td>
<td>Incidental for one night</td>
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**Claim Total:** $364.24

**Accounting Distribution:**

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<tr>
<th>Payment Amount</th>
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<tbody>
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<td>16.15</td>
<td>- HST -</td>
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<td>90.31</td>
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**Reconciliation:**

<table>
<thead>
<tr>
<th>Description</th>
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<tbody>
<tr>
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<tr>
<td>STANDING TRAVEL ADVANCE</td>
<td>02</td>
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<td>LESS: AMOUNT OF CLAIM APPLIED TO STA</td>
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<tr>
<td>LESS: TRIP ADVANCE</td>
<td>04</td>
</tr>
<tr>
<td>AMOUNT PAYABLE TO CLAIMANT</td>
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<tr>
<td>AMOUNT PAYABLE DUE TO GOVERNMENT</td>
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</tr>
<tr>
<td>EXPENSES NOT PAID BY CLAIMANT</td>
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</tr>
<tr>
<td>REVENUE RECEIPT NUMBER</td>
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</tr>
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</table>

**Total Payment Amount:** $364.24

**Claim Verified by:**

- **Oct. 24/08**
- **Oct. 28/08**
<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Montant/Charges</th>
<th>Paiments/Payments</th>
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<tbody>
<tr>
<td>19-10-08</td>
<td>Room Charge - Automatic</td>
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<td>19-10-08</td>
<td>Occupancy Tax</td>
<td>9.27</td>
<td></td>
</tr>
<tr>
<td>19-10-08</td>
<td>GST on Room Revenue</td>
<td>15.91</td>
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<td>PST on Room Revenue</td>
<td>25.06</td>
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<tr>
<td>20-10-08</td>
<td>American Express</td>
<td></td>
<td>359.24</td>
</tr>
<tr>
<td>Date</td>
<td>Description</td>
<td>Montant/Charges</td>
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<td>19-10-08</td>
<td>Total:</td>
<td>359.24</td>
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<td></td>
<td>Solde / Balance:</td>
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<td>Montant Net / Net Amount:</td>
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<td>TPS: Revenus Chambre / GST on Room Revenue:</td>
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<tr>
<td></td>
<td>TVQ: Revenus Chambre / PST on Room Revenue:</td>
<td>25.06</td>
<td></td>
</tr>
<tr>
<td></td>
<td>TPS: Nourriture &amp; Boîssons / GST on F&amp;B:</td>
<td>0.00</td>
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<td>TPS: Telephone / GST on Telephone:</td>
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<td>TPS: Autres / GST on Others:</td>
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<tr>
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<td>TVQ: Autres / PST on Others:</td>
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</tr>
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</table>

Signature:

360, Rue Saint-Antoine Ouest, Montréal (Québec) Canada H2Y 3X4
Tel: (514) 987 9900 Fax: (514) 817 8530 montréal@hp.com www.montrealintercontinental.com
Mr Daniel Williams

CA

<table>
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<td>American Express</td>
<td></td>
<td>359.24</td>
</tr>
</tbody>
</table>
Mr Daniel Williams

CA

Alternative Date:

Arrival Date: 19-10-08
Departure Date: 20-10-08

Clients/Guests: 1

Tarif Journalier/ Daily Rate: 309

N° de Chambre/ Room Number: 1900

Page de Pages/ Page of Pages: 2 de 2

<table>
<thead>
<tr>
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</table>

Signature: __________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

EXECUTIVE COUNCIL

POSITION TITLE: Premier

NAME: Premier Danny Williams
MAILING ADDRESS: 8th Floor, East Block
Confederation Building
St. John’s

PURPOSE OF TRIP: To attend COF meeting in Montreal on Monday, Oct 20, 2008

TRAVEL DETAILS:

FROM: Deer Lake, NL
TO: Montreal, QC
DEPARTURE DATE: 19-Oct-2008
RETURN DATE: 20-Oct-2008

PAYMENT METHOD:
☐ PERSONAL CREDIT CARD
☐ GOVERNMENT CREDIT CARD

MODE OF TRAVEL:
☐ AIR
☐ RENT-A-CAR: COMPANY
☐ PERSONAL VEHICLE
☐ GOVERNMENT VEHICLE
☐ OTHER (SPECIFY)

THE ESTIMATE OF TOTAL TRIP COST MUST BE ENCUMBERED REGARDLESS OF IMPREST

<table>
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I CERTIFY THAT THE ABOVE EMPLOYEE IS AUTHORIZED TO TRAVEL ON GOVERNMENT BUSINESS AS DESCRIBED.

PREMIER

SUMMARY OF ANTICIPATED EXPENSES EQUAL TO THE AMOUNT OF THE ADVANCE REQUIRED (TRIP ADVANCE ONLY)

<table>
<thead>
<tr>
<th>TAXI, LIMOUSINE, OR BUS FARE TO AND FROM DEPARTURE POINTS</th>
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<tr>
<td>$$</td>
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<tr>
<td>TRANSPORTATION COST (If Travel Order not issued)</td>
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<tr>
<td>ACCOMMODATIONS FOR ___ NIGHTS (Hotel / Private)</td>
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<td>MEALS FOR ___ DAYS (At approved rates)</td>
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<td>OTHER EXPENSES (Specify):</td>
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Total Anticipated Expenses (Advance Required) $$

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PROCESSED BY:

ACCOUNTS DEPARTMENT DATE