Dear [REDACTED],

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act [Our file #ENV/003/2014]

On January 13, 2014, the Department of Environment and Conservation received your request for access to the following records:

"Journey authorization forms, itineraries, and original receipts and supporting records for the attached travel claims"

I am pleased to inform you that your request for access to these records has been granted in part. Access to specific text contained within the records, has been refused in accordance with the following exceptions to disclosure, as specified in the Access to Information and Protection of Privacy Act (the Act):

Section 30(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.”

In accordance with your request for a copy of the records, the appropriate copies have been enclosed.

Section 43 of the Act provides that you may ask the Information and Privacy Commissioner to review this partial refusal of access or you may appeal the refusal to the Supreme Court Trial Division. A request to the information and Privacy Commissioner shall be made in writing within 60 days of the date of this letter or within a longer period that may be allowed by the Commissioner.
The address and contact information of the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner  
34 Pippy Place  
P.O. Box 13004, Stn. A  
St. John’s, NL A1B 3V8  

Telephone: (709) 729-6309  
Facsimile: (709) 729-6500

In the event that you choose to appeal to the Trial Division, you must do so within 30 days of the date of this letter. Section 60 of the Act sets out the process to be followed when filing such an appeal.

Please be advised that responsive records will be published following a 72 hour period after the response is sent electronically to you or five days in the case where records are mailed to you. It is the goal to have the responsive records posted to the Office of Public Engagement's website within one business day following the applicable period of time. Please note that requests for personal information will not be posted online.

If you have any further questions, please feel free to contact the ATIPP Coordinator at telephone (709) 729-7393.

Sincerely,

JAMIE CHIPPETT  
Deputy Minister
**Government of Newfoundland and Labrador**

**Expense Claim: TCMS297137**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Shea, Hon Joan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expense Date:</td>
<td>23-Sep-13 - 23-Sep-13</td>
</tr>
<tr>
<td>Cost Center:</td>
<td>1401</td>
</tr>
<tr>
<td>Purpose:</td>
<td>Travel to Toronto to attend meetings</td>
</tr>
<tr>
<td>Report Submit Date:</td>
<td>02-Oct-13</td>
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<tr>
<td>Claim Authorization:</td>
<td>Journey Authorization</td>
</tr>
<tr>
<td>Fiscal Year:</td>
<td>2013-14</td>
</tr>
<tr>
<td>Acct Distribution:</td>
<td>01-1401-110-5000-0369-000000</td>
</tr>
</tbody>
</table>

**Receipt-Based Expenses**

<table>
<thead>
<tr>
<th>Date</th>
<th>Expense Type</th>
<th>Expense Details</th>
<th>Net of Tax Amount</th>
<th>Tax Amount</th>
<th>Reimbursable Amount (CAD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>23-Sep-13</td>
<td>Airfare</td>
<td>Airline Carrier: Air Canada; Class of Ticket: Economy; Ticket Number: 2125473039; Receipt Date: 30-Sep-13; Location From: St John's; Location To: Toronto</td>
<td>656.56</td>
<td>78.79</td>
<td>735.35</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Total</strong></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>656.56</td>
<td>78.79</td>
<td>735.35</td>
</tr>
</tbody>
</table>

**Time of Departure:** 13:00  
**Time of Return:** 12:30  
**Departure Date:** 23-Sep-13  
**Return Date:** 25-Sep-13  
**Exchange Rate:**  
**Currency:** CAD  
**Reimbursement Amount:** 735.35  
**Net of Tax Total:** 656.56  
**Tax Total:** 78.79  

**Oct 8/13**
Submission Instructions
* Attach Journey Authorization, Private Vehicle Usage Report or other applicable documentation as required. Additionally, attach all original itemized receipts showing proof of payment to this printed Expense Claim.
* Ensure that all smaller receipts are attached to an 8.5 x 11 sheet of paper, as per Financial Management Circular 2.040.
* Sign and date your Expense Claim and forward it to your Supervisor for approval.

Pre-Audit will process claims when submitted by claimant, signed and when the supporting documentation has been received. Upon processing, a notification will be sent to you via ECMS status update. The expense report will be paid after it has been processed.

Effective April 1, 2009, the tax amount on expense claims is automatically calculated in accordance with the provisions of sections 174 and 175 of the Excise Tax Act.

Explanations Related to Expense Items Claimed (if applicable):

I CERTIFY THAT THE WHOLE OF THE EXPENSES INCURRED BY ME WERE ON GOVERNMENT BUSINESS AND ARE IN ACCORDANCE WITH GOVERNMENT POLICY, PROCEDURE AND LEGISLATION.

Total Amount to Reimburse: $735.35

Claimant's Signature: [Signature] Date: Oct 3/13

CERTIFIED IN ACCORDANCE WITH SECTION 30(1) AND 31(1) OF THE FINANCIAL ADMINISTRATION ACT

Approved and Certified By: [Signature] Date: Oct 6, 2012

Supervisor/Divisional Head:

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes No

Transactional Review and Compliance: Date:
CARLSON WAGONLIT HARVEYS TRVL
65 MAIN ST
STEPHENVILLE, NL
A2N 1H3

Branch: 661023
Phone: [redacted]

Receipt Number: 62756
Date: September 30, 2013
Page: 1/1
Our Reference: ON60042069C
Agent: [redacted]

RECEIPT

Received From: JOAN SHEA
For
HON JOAN SHEA

The Sum Of Seven Hundred Thirty Five Dollars and Thirty Five Cents ($735.35)
Paid In CAD Funds By Cash

Itinerary
Monday, September 23, 2013
Air
AIR CANADA
From: ST JOHNS NF
To: TORONTO PEARSON
Stops: 0
Flight: 125  G CLASS
01:10 PM  Equipment: A320
03:15 PM
Mile(s) Flown: 1323

Wednesday, September 25, 2013
Air
AIR CANADA
From: TORONTO PEARSON
To: ST JOHNS NF
Stops: 0
Flight: 690  G CLASS
07:55 AM  Equipment: A320
12:23 PM
Mile(s) Flown: 1323

PAYMENT IN FULL
...NON REFUNDABLE $...............
CARLSON WAGONLIT HAREYS TRVL
65 MAIN ST
STEPHENVILLE, NL
A2N 1H3
GST Reg#: R 102293552
Branch: 661023
Agent: [Redacted]

To: GOVT NL-ADV EDUCATION & SKILLS
P.O. BOX 8700
A1B 4J6

INVOICE

Invoice Number: 49159
Date: September 13, 2013
Page: 1/2
Our Reference: ON60042069C 8BB981

For
HON JOAN SHEA

Monday, September 23, 2013
Air
AIR CANADA
From: ST JOHNS NF
To: TORONTO PEARSON
Stops: 0
Flight: 125 G CLASS
01:10 PM Equipment: A320
03:15 PM

Wednesday, September 25, 2013
Air
AIR CANADA
From: TORONTO PEARSON
To: ST JOHNS NF
Stops: 0
Flight: 690 G CLASS
07:55 AM Equipment: A320
12:23 PM

Cost:
AIR CANADA WEB 2125473039

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<th>Description</th>
<th>Amount</th>
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<td>HST</td>
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<td>Tax</td>
<td>59.25</td>
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<tr>
<td>Ticket Total</td>
<td>681.67</td>
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<tr>
<td>Service Fee Total</td>
<td>53.68</td>
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</table>

Service Fee HAR*61023-2125473039
To:    GOVT NL-ADV EDUCATION & SKILLS  
P.O. BOX 8700  
A1B 4J6  

Invoice Number:    49159  
Date:    September 13, 2013  
Page:    2/2  
Our Reference:    ON60042069C P8B98I  

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<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<td>Grand Total</td>
<td>735.35</td>
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<tr>
<td>Total GST/HST</td>
<td>84.60</td>
</tr>
<tr>
<td>Credit / Balance Due To This Invoice</td>
<td>735.35</td>
</tr>
<tr>
<td>Total Balance Due</td>
<td>735.35</td>
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</tbody>
</table>

BAGGAGE FEES/CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITE FOR DETAILS.
From: Air Canada <confirmation@aircanada.ca>
Sent: Friday, September 13, 2013 12:02 PM
To: Murphy, Marina
Subject: [Name] is sending you the itinerary for your next trip from YYT to YYZ.

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

AIR CANADA
Itinerary/Receipt

From: [Name]
Invoice will follow shortly. Thanks,

Section 30(1)

Booking Date: Sep 13, 2013 Passengers: Ms Joan Shea
Agent Name: [Name] Agent ID: [Name]

Section 30(1)

SAVE on car rentals, shows, activities and more.
Go to My Travel Planner

Need a car in Toronto? Great rates and additional Aeroplan Miles.
Looking for ground transportation or attractions?

Booking Information

Electronic Ticketing confirmed. This is your official itinerary/receipt.
Main Contact: CWT HARVEYS TRAVEL
Online Services

Select Seats
Maple Leaf Lounge | Meal Vouchers | On My Way
Alert me of flight status changes directly to my mobile phone or email.
Flight Arrivals & Departures - check online if my flight is on time.
Check-in online and print my boarding pass.

* Can my booking be changed online?

Flight Itinerary
Flight | From | To | Stops | Duration | Aircraft | Fare Type | Meal
--- | --- | --- | --- | --- | --- | --- | ---
AC125 | St Johns (YYT) Mon 23-Sep 2013 13:10 | Toronto, Pearson Int'l (YYZ) Mon 23-Sep 2013 15:15 - Terminal 1 | 0 | 3hr35 | 320 | Tango, G | YF

F: Food for purchase on board. All Onboard Café purchases made on board Air Canada flights are payable only with Visa, MasterCard and American Express credit cards.

**Passenger Information**

1: Ms Joan Shea : Adult (16+), Ticket Number: 0142125473039

- Frequent Flyer Prog : None
- Payment Card: N/A - Cash Payment
- Meal Preference: None
- Special Needs: None
- Seat Selection: None

**Fare Summary**

- Passenger Type: Adult
- Air Transportation Charges
  - Departing Flight - Tango: 259.00
  - Return Flight - Tango: 239.00
- Surcharges: 46.00
- Taxes, Fees and Charges
  - Canada Airport Improvement Fee: 45.00
  - Canada Harmonized Sales Tax (GST/HST #10009-2287 RT0001): 78.42
  - Air Travellers Security Charge (ATSC): 14.25
- Total airfare and taxes before options (per passenger): 681.67
- Number of passengers: 1

**Grand Total - Canadian dollars**: $681.67

**Payment Information**

- Cash Payment - Amount paid: $681.67

enRoute City Guide
OFFICIAL JOURNEY AUTHORIZATION

RECIPIENT ORGANIZATION INFORMATION

EMPLOYEE NAME: Joan Shea
DEPARTMENT: AES
POSITION TITLE: Minister

ADDRESS: P.O. Box 8700
St. John's, NL

POSTAL CODE: A1B 4J6

TO: Toronto, ON

FROM DATE: September 23, 2013
TO DATE: September 25, 2013

PURPOSE OF TRIP: To attend Forum of Labour Market Ministers Meeting in Toronto. September 23-24, 2013

PAYMENT METHOD: 

MODEL OF TRAVEL: 

THE ESTIMATED TOTAL TRIP COST MUST BE ENCUMBERED REGARDLESS OF IMPREST

EMPLOYEE'S SIGNATURE: 
DATE: 

SECURITY CERTIFICATION

I CERTIFY THAT THE ABOVE EMPLOYEE IS AUTHORIZED TO TRAVEL ON GOVERNMENT BUSINESS AS DESCRIBED AND SUFFICIENT FUNDS ARE AVAILABLE.

DIVISIONAL DIRECTOR/ ASSISTANT DEPUTY MINISTER
SIGNATURE: 
DATE: 

DIPLOMAT MINISTER
SIGNATURE: 
DATE: 

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

- TAXI, LIMOUSINE, OR BUS FARE TO AND FROM DEPARTURE POINT: $0.00
- TRANSPORTATION COST (IF TRAVEL DURING OFF-HOURS): $0.00
- ACCOMMODATIONS FOR NIGHTS MARCH 1-3: $0.00
- MEALS FOR DATES (MEALS PER diems): $0.00
- OTHER: $0.00

CASH ADVANCE REQUIRED: YES NO

TOTAL ANTICIPATED EXPENSES (ADVANCE REQUESTED): $0.00

AMOUNT ACCOUNTING DISTRIBUTION DEPARTMENTAL FINANCE DIVISION USE ONLY

01
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Government of Newfoundland and Labrador
Expense Claim: TCMS297142

Name: Shea, Hon Joan
Expense Date: 23-Sep-13 - 25-Sep-13
Cost Center: 1401
Purpose: Travel to Toronto to attend meetings
Report Submit Date: 02-Oct-13
Claim Authorization: Journey Authorization
Fiscal Year: 2013-14
Acct Distribution: 01-1401-110-5000-0369-000000
Related Claims: TCMS297137

Time of Departure: 13:00
Time of Return: 12:30
Departure Date: 23-Sep-13
Return Date: 25-Sep-13
Exchange Rate: 
Currency: CAD
Reimbursement Amount: 583.54
Net of Tax Total: 521.02
Tax Total: 62.52

Receipt-Based Expenses

<table>
<thead>
<tr>
<th>Date</th>
<th>Expense Type</th>
<th>Expense Details</th>
<th>Net of Tax Amount</th>
<th>Tax Amount</th>
<th>Reimbursable Amount (CAD)</th>
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<tbody>
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<td>23-Sep-13</td>
<td>Accommodations</td>
<td>Receipt Date: 25-Sep-13</td>
<td>462.09</td>
<td>55.45</td>
<td>517.54</td>
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<td>01-1401-110-5000-0365-000000</td>
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<td></td>
<td></td>
<td>462.09</td>
<td>55.45</td>
<td>517.54</td>
</tr>
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</table>

Per Diem Expenses

<table>
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<tr>
<th>Date</th>
<th>Expense Type</th>
<th>Expense Details</th>
<th>Days</th>
<th>Rate</th>
<th>Net of Tax Amount</th>
<th>Tax Amount</th>
<th>Reimbursable Amount (CAD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>23-Sep-13  to 23-Sep-13</td>
<td>Dinner (Canada)</td>
<td>01-1401-110-5000-0364-000000</td>
<td>1</td>
<td>27.50</td>
<td>24.55</td>
<td>2.95</td>
<td>27.50</td>
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<tr>
<td>24-Sep-13  to 24-Sep-13</td>
<td>Dinner (Canada)</td>
<td>01-1401-110-5000-0364-000000</td>
<td>1</td>
<td>27.50</td>
<td>24.55</td>
<td>2.95</td>
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<td>25-Sep-13  to 25-Sep-13</td>
<td>Breakfast (Canada)</td>
<td>01-1401-110-5000-0364-000000</td>
<td>1</td>
<td>11.00</td>
<td>9.82</td>
<td>1.18</td>
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<td>58.93</td>
<td>7.07</td>
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</table>
Submission Instructions
* Attach Journey Authorization, Private Vehicle Usage Report or other applicable documentation as required. Additionally, attach all original itemized receipts showing proof of payment to this printed Expense Claim.
* Ensure that all smaller receipts are attached to an 8.5 x 11 sheet of paper, as per Financial Management Circular 2.040.
* Sign and date your Expense Claim and forward it to your Supervisor for approval.

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Effective April 1, 2009, the tax amount on expense claims is automatically calculated in accordance with the provisions of sections 174 and 175 of the Excise Tax Act.

Explanations Related to Expense Items Claimed (if applicable):

I CERTIFY THAT THE WHOLE OF THE EXPENSES INCURRED BY ME WERE ON GOVERNMENT BUSINESS AND ARE IN ACCORDANCE WITH GOVERNMENT POLICY, PROCEDURE AND LEGISLATION.

Total Amount to Reimburse: 583.54

Claimant's Signature: [Signature] Date: Oct 3/13

CERTIFIED IN ACCORDANCE WITH SECTION 30(1) AND 31(1) OF THE FINANCIAL ADMINISTRATION ACT

Approved and Certified By:
Supervisor/Divisional Head: [Signature] Date: Oct 6, 2013

Office of the Comptroller General Purposes Only:
Selected for Regular Review: Yes [ ] No [ ]
Transactional Review and Compliance: [Signature] Date: [ ]
**INFORMATION INVOICE**
Membership No: [Blacked out]

**Group Name:** FLMM PT Ministers Meeting Toronto
**Company Name:** PT Deputy Ministers

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Charges</th>
<th>Payments</th>
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</thead>
<tbody>
<tr>
<td>09-23-13</td>
<td>Stay Rate</td>
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</tr>
<tr>
<td>09-24-13</td>
<td>13% HST - Room</td>
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<tr>
<td>09-24-13</td>
<td>Stay Rate</td>
<td>229.00</td>
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<tr>
<td>09-25-13</td>
<td>13% HST - Room</td>
<td>29.77</td>
<td></td>
</tr>
<tr>
<td></td>
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<td>517.54</td>
</tr>
</tbody>
</table>

Subtotal : 517.54
Total : 517.54

HST ID: 805815735 RT0001
HST Total : $59.54

Thank you for staying at The Omni King Edward Hotel.
OFFICIAL JOURNEY AUTHORIZATION

EMPLOYEE INFORMATION:

EMPLOYEE NAME: Joan Shea
DEPARTMENT: AES
POSITION: Minister

ADDRESS: P.O. Box 8700
St. John's, NL
POSTAL CODE: A1B 4J6

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

DATE OF TRIP: September 23, 2013
TO DATE: September 25, 2013

PURPOSE OF TRIP: To attend Forum of Labour Market Ministers Meeting in Toronto, September 23-24, 2013

PAYMENT METHOD:

MODE OF TRAVEL:

AMOUNT ACCOUNTING DISTRIBUTION

EMPLOYEE'S SIGNATURE: Joan Shea
DATE: September 2013

I CERTIFY THAT THE ABOVE EMPLOYEE IS AUTHORIZED TO TRAVEL ON GOVERNMENT BUSINESS AS DESCRIBED AND SUFFICIENT FUNDS ARE AVAILABLE.

DIVISIONAL DIRECTOR / SIGNATURE DATE
ASSISTANT DEPUTY MINISTER
DEPUTY MINISTER / SIGNATURE DATE
MINISTER / SIGNATURE DATE

SUMMARY OF ALL ANTICIPATED EXPENSES EQUAL TO THE AMOUNT OF THE ADVANCE REQUESTED (TRAVEL ADVANCE USE ONLY):

- TAXI, LIMOUSINE, OR BUS FARE TO AND FROM DEPARTURE POINT
- TRANSPORTATION COST OF TRAVEL (DOMESTIC/INTERNATIONAL)
- ACCOMMODATIONS FOR
- MEALS FOR
- OTHER

CASH ADVANCE REQUIRED: YES NO

TOTAL ANTICIPATED EXPENSES: $0.00

AMOUNT ACCOUNTING DISTRIBUTION DEPARTMENTAL FINANCE DIVISION USE ONLY

- 01
- 02
- 03
- 04
- 05

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- 0000
- 0000
- 0000

Hon. Joan Burke  
Minister  
Department of Advanced Education and Skills

Week **Sept 22 to Sept 28, 2013** - Toronto Trip

<table>
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<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
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<tr>
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<td>Lunch</td>
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