Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act [JPS/33/2017]

Dear [Redacted]

On March 25, 2017, the Department of Justice and Public Safety received your request for access to the following records:

“All receipts, reimbursement records related to out of province trips by the minister in 2016.”

I am pleased to inform you that a decision has been made by the Deputy Minister for the Department of Justice and Public Safety to provide access to most of the requested records. Please note Access to the remaining records, and/or information 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):

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.

As required by 8(2) of the Act, we have severed information that is unable to be disclosed and have provided you with as much information as possible. Please note these records include four trips in total; pages 53 to 65, pages 66 to 67, and pages 68 to 70 references the same trip. Pages 66 to 67 include mileage while pages 68 to 70 include a parking receipt that was missed in the additional claim.

The Access to Information and Protection of Privacy Act (the Act) requires us to provide an advisory response within 10 days of receiving the request. As this request has been completed prior to day 10, this letter also serves as our Advisory Response.

Please be advised that you may ask the Information and Privacy Commissioner to review the processing of your access 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.

The appeal may be addressed to the Information and Privacy Commissioner as follows:

4th Floor, East Block, Confederation Building, P.O. Box 8700, St. John’s, NL, Canada A1B 4J6
Facsimile 729-2129
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 the decision of the public body, pursuant to section 52 of the Act (a copy of this section of the Act has been enclosed for your reference).

Please be advised that responsive records will be published following a 72 hour period after the response is sent electronically to you or five business 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.

If you have any questions, please feel free to contact me by telephone at 709-729-7906, or by email at ncroke@gov.nl.ca.

Sincerely,

Neil Croke
ATIPP Coordinator
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 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).
Government of Newfoundland and Labrador
Expense Claim: TCMS954858

Name: Parsons, Hon Andrew K
Expense Date: 19-Jan-16 - 21-Jan-16
Cost Center: 2101
Purpose: Attend Federal/Provincial/Territorial Meeting for Ministers Responsible for Justice and Public Safety
Report Submit Date: 28-Jan-16
Claim Authorization: Journey Authorization
Fiscal Year: 2015-16
Acct Distribution: 01-2101-110-6500-0369-000000

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>
<tr>
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<td>Description of Misc. Expense: Seat Selection required to</td>
<td>96.68</td>
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<td>3.03</td>
<td>28.25</td>
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<td>Airfare</td>
<td>Location From: St John's; Location To: Quebec City; Ticket Number: AC1612314414;</td>
<td>548.68</td>
<td>65.84</td>
<td>614.52</td>
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Total 958.21 114.99 1,073.20

Per Diem Expenses

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<th>Rate</th>
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<td>49.11</td>
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<tr>
<td>Date</td>
<td>Expense Type</td>
<td>Expense Details</td>
<td>Days</td>
<td>Rate</td>
<td>Net of Tax Amount</td>
<td>Tax Amount</td>
<td>Reimbursable Amount (CAD)</td>
</tr>
<tr>
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<td></td>
<td>98.21</td>
<td>11.79</td>
<td>110.00</td>
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</table>

**Total**
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 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.
* For Ministers who are also Members of the House of Assembly (HOA): The Expense Claim must be printed and the Claimant Section below must be signed and dated before being submitted, with the necessary supporting documentation, to the Corporate and Members’ Services Division (CMS) of the HOA.
* Claimants who are not Ministers and Members of the HOA are not required to print and submit a hard copy of their Expense Claim to Transactional Review and Compliance (TRC) for processing. These individuals are still able to print their Expense Claim but only for their own personal records.
* Upon processing, a notification will be sent via email and the claim’s status will be updated in ECMS. The Expense Claim 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 OR THE EXPENSES INCURRED BY ME WERE ON GOVERNMENT BUSINESS AND ARE IN ACCORDANCE WITH GOVERNMENT POLICY, PROCEDURE AND LEGISLATION.

Total Amount to Reimburse: $183.20

Claimant’s Signature: ___________________________ Date: June 28, 2016

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

Approved and Certified By:

Supervisor/Divisional Head: ___________________________ Date: Jan 29, 2016

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [] No []

Transactional Review and Compliance: ___________________________ Date: ___________________________
<table>
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<tr>
<th>EMPLOYEE NAME</th>
<th>Justice &amp; Public Safety</th>
<th>POSITION TITLE</th>
<th>Minister &amp; AG</th>
<th>SUPPLIER NUMBER</th>
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<tbody>
<tr>
<td>ADDRESS</td>
<td>PO Box 2263, Port aux Basques, NL</td>
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<tr>
<td>PORTAL CODE</td>
<td>AAM 1CD</td>
<td></td>
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</tbody>
</table>

**FROM:** St. John's, NL  
**TO:** Quebec City, Quebec  
**FROM DATE:** January 19, 2016  
**TO DATE:** January 21, 2016  
**PURPOSE OF TRAVEL:** Meeting of Federal- Provincial/ Territorial Ministers Responsible for Justice and Public Safety

**PAYMENT METHOD:**  
- [ ] PERSONAL CREDIT CARD  
- [ ] GOVERNMENT CREDIT CARD  
- [ ] TRAVEL ORDER

**MODE OF TRAVEL:**  
- [ ] AIR

**COMPANY:**  
- [ ] RENTAL CAR

**ORDER NUMBER:**

**ESTIMATED TOTAL TRAVEL COSTS BASED ON PLANNED TRAVEL WITHOUT DISCOUNTS OR DISCOUNTS:**

<table>
<thead>
<tr>
<th>AMOUNT</th>
<th>ACCOUNTING DISTRIBUTION</th>
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</thead>
<tbody>
<tr>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**EMPLOYEE SIGNATURE:**

**DIVISIONAL DIRECTOR:**  
**SIGNATURE:**

**SUBTOTAL:**

**CASH ADVANCE REQUESTED:**

**TOTAL ANTICIPATED EXPENSES:** $1,390.00

**AMOUNT**  
**ACCOUNTING DISTRIBUTION**  
**DEPARTMENTAL FINANCE OFFICER USE ONLY:**

**SIGNATURE**  
**DATE**
Carlson Wagonlit Travel

INVOICE

For
HON ANDREW PARSONS

Tuesday, January 19, 2016

Air
AIR CANADA
From: ST JOHNS NF
To: TORONTO PEARSON
Stops: 0
Flight: 667
Arrival: 19Jan16
12:45 PM
Equipment: A320
03:12 PM
Mile(s) Flown: 1335

Air
AIR CANADA
From: TORONTO PEARSON
To: QUEBEC QC
Stops: 0
Flight: 8918
Arrival: 19Jan16
04:10 PM
Equipment: DH4
05:47 PM
Mile(s) Flown: 472

Thursday, January 21, 2016

Air
AIR CANADA
From: QUEBEC QC
To: MONTREAL-TRUDEAU
Stops: 0
Flight: 8725
Arrival: 21Jan16
06:00 PM
Equipment: D8 (300 SERIES)
06:53 PM
Mile(s) Flown: 139

00949
January 11, 2016
1/2
INVOICE

Thursday, January 21, 2016

Air

AIR CANADA
From: MONTREAL-TRUDEAU
To: ST JOHNS NF
Stops: 0 Arrival: 21Jan16
AIR CANADA E

Cost:

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<tr>
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<th>Amount</th>
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<tbody>
<tr>
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<tr>
<td>HST</td>
<td>12.48</td>
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<tr>
<td>Ticket Total:</td>
<td>108.48</td>
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Total:

- Grand Total: 108.48
- Less Credit Card Payments: 108.48
- Total GST/HST: 12.48
- Credit / Balance Due To This Invoice: 0.00
- Total Previous Payments: 635.41
- Total Charges Previous Invoices: 635.41
- Total Balance Due: 0.00

PAYMENT FOR SEATS.

WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.
*BAGGAGE FEES: CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITES FOR DETAILS.
THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL.
Parsons, Andrew

From: Air Canada <confirmation@aircanada.ca>
Sent: Tuesday, January 19, 2016 8:25 AM
To: Parsons, Andrew
Subject: Air Canada - Receipt - Baggage Fee

Your fees have been successfully collected.

Departure Date: 2016-01-19
Passenger: ANDREW PARSONS
Departure city: ST JOHNS NL YYT
Destination city: QUEBEC YQB

Fee Breakdown:
Excess baggage fee (1 piece): 25.00 CAD
HST: 3.25 CAD
Total CAD: 28.25 CAD

Form of payment used: MasterCard XXXXXXXXXXXXX

Please Note: This fee is non refundable.

GST - HST: #100092287 RT0001

Fly through paying on your mobile device with Air Canada Mobile+
Air Canada mobile+ can remember your personal and payment information so you can fly through your mobile experience and pay for items like upgrades and flight changes quickly, easily and securely. Click the link below to Learn More, http://services.aircanada.com/portal-web/mobile/static/mobileplus.html

You can view all your available Air Canada mobile+ messages here:
http://mymessages.aircanada.com/en/kMVHUtXAXaEx5XZDmv8kKg

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Air Canada, PO Box 64239, RPO Thorncliffe, Calgary, Alberta, T2K 6J7

1
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For
HON ANDREW PARSONS

Tuesday, January 19, 2016

Air

AIR CANADA
Flight: 667  S CLASS
From: ST JOHNS NF  12:45 PM  Equipment: A320
To:  TORONTO PEARSON  03:12 PM
Stops:  0  Arrival:  19Jan16

Air

AIR CANADA
Flight: 8918  S CLASS
From: TORONTO PEARSON  04:10 PM  Equipment: DH4
To:  QUEBEC QC  05:47 PM
Stops:  0  Arrival:  19Jan16

Miscellaneous

AIR CANADA
From: *
To: *

Thursday, January 21, 2016
Thursday, January 21, 2016

Air

AIR CANADA
From: QUEBEC QC
To: MONTREAL-TRUDEAU
Stops: 0 Arrival: 21Jan16
AIR CANADA E

Flight: 8725 K CLASS
06:00 PM Equipment: D8 (300 SERIES)
06:53 PM Mile(s) Flown: 139

Air

AIR CANADA
From: MONTREAL-TRUDEAU
To: ST JOHNS NF
Stops: 0 Arrival: 21Jan16
AIR CANADA E

Flight: 8638 K CLASS
07:55 PM Equipment: CRA
11:55 PM Mile(s) Flown: 998

Cost:

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<td>614.52</td>
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<tr>
<td>E-TKT</td>
<td>614.52</td>
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</tbody>
</table>

Total:

| Grand Total: 635.41 |
| Less Credit Card Payments: 635.41 |
| Total GST/HST: 70.38 |
| Total QST: 3.29 |
| Credit / Balance Due To This Invoice: 0.00 |
| Total Balance Due: 0.00 |
INVIOCE

WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.

* BAGGAGE FEES/CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITES FOR DETAILS.

THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL.
ASSOCIATION COOPÉRATIVE

Date: 20 01 2016
Montant: 40

SIGNATURE DU CONDUCTEUR

SERVIE 7 JOURS / 24 HEURES

RECEIPT

Date: 20 01 2016
Fr: Con Ed. Blac
To: Home Port
Amt: 10 — Driver 50

TOM HOLLETT Driver

Home: 579-2727 Cell: 882-2222 Fax: 488-8998
Address: 122 Paneway Rd • PO Box 2222, St. Jolin’s, H2A, A1C 6E8
*MAJOR CREDIT CARDS ACCEPTED*
ANDREW PARSONS
DEPARTMENT OF JUSTICE CANADA
P.O. BOX 8700
St. John's, NL
A1B 4J6
CAN

Date: 21/01/16

Arrivée: 19/01/16
Départ: 21/01/16

No Facture: IN 667386

No Chambre: 406

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<td>Taxes Hébergement 3%</td>
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<td></td>
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<td>5.46</td>
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<td>TVQ Hébergement 9.75%</td>
<td>10.89</td>
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<td>20/01/16</td>
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<td>106.00</td>
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<tr>
<td>21/01/16</td>
<td>Master Card S40(1)</td>
<td>(251.06)</td>
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TOTAL 0.00

*** TAXES INCL ***
	taxe d'hébergement 6.36
	TPS RJ10143404 10.92
	TVQ 1000736691 21.78

Des taxes canadiennes

Conditions payables 30 jours sous de 2% par mois (24% par année) sur les comptes en souffrance.
Payable chez Desjardins et dans les institutions financières participants: SPC 10534.

1320, Place George-V Ouest, Québec, (Québec), Canada G1R 3B8, Télé: 418-522-8108 Téléc: 418-524-8768 Courriel lalaurier@vieuxquebec.com

X

Signature
Hôtel Château Laurier Québec
1220 Place George-V Ouest
Québec (Québec), Canada

Date 21/01/16 Hre: 10 20 46
No de référence: 587053
No Folio : 667388
Nom du folio: PARSONS ANDREW

Type paiement: paiement
No Compte: xxxxxxxxxxx
Code d'approb: 013605

Commiss: GMO

Montant: $ 251.06

Signature: ____________________________
Government of Newfoundland and Labrador
Expense Claim: TCMS958821

Name: Parsons, Hon Andrew K
Expense Date: 15-Feb-16 - 27-Feb-16
Cost Center: 2101
Purpose: Ministerial/Departmental Business & To Attend the 2nd Roundtable on Missing and Murdered Indigenous Women and Girls, in Winnipeg, Manitoba
Report Submit Date: 03-Mar-16
Claim Authorization: Journey Authorization
Fiscal Year: 2015-16
Acct Distribution: 01-2101-110-6500-0369-000000
Related Claims:

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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<td>41.78</td>
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<td>Airfare</td>
<td>Location From: Deer Lake; Location To: St John's; Justification of Ticket: Economy; Ticket Number: 9679901007672; Receipt Date: 10-Feb-16; Airline Carrier: Provincial Airlines; Class of Ticket: Economy</td>
<td>352.20</td>
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<td>466.25</td>
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### Expense Details

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### Per Diem Expenses

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### Mileage Expenses

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<td>Accumulated Mileage</td>
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<td>220 KM</td>
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<td>93.93</td>
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<td>105.20</td>
</tr>
<tr>
<td>20-Feb-16</td>
<td>01-2101-110-6500-0362-000000</td>
<td>From: Corner Brook; To: Channel-Port aux Basques</td>
<td>220 KM</td>
<td>.4782</td>
<td>93.93</td>
<td>11.27</td>
<td>105.20</td>
</tr>
<tr>
<td>21-Feb-16</td>
<td>Accumulated Mileage</td>
<td>From: Channel-Port Aux Basques; To: Deer Lake Airport</td>
<td>272 KM</td>
<td>.4762</td>
<td>116.13</td>
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<td>130.07</td>
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<td>01-2101-110-6500-0362-000000</td>
<td>From: Deer Lake Airport; To: Channel-Port aux Basques</td>
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<td>.4782</td>
<td>116.13</td>
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<td>From: Deer Lake Airport; To: Channel-Port aux Basques</td>
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<td>.4782</td>
<td>116.13</td>
<td>13.94</td>
<td>130.07</td>
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Total: 420.12 50.42 470.54
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 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.
* For Ministers who are also Members of the House of Assembly (HOA): The Expense Claim must be printed and the Claimant Section below must be signed and dated before being submitted, with the necessary supporting documentation, to the Corporate and Members' Services Division (CMS) of the HOA.
* Claimants who are not Ministers and Members of the HOA are not required to print and submit a hard copy of their Expense Claim to Transactional Review and Compliance (TRC) for processing. These individuals are still able to print their Expense Claim but only for their own personal records.
* Upon processing, a notification will be sent via email and the claim's status will be updated in ECMS. The Expense Claim 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, PROCE- DURE AND LEGISLATION.

Total Amount to Reimburse: $3,419.13

Claimant's Signature: ____________________________ Date: 11/13/16

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

Approved and Certified By:

Supervisor/Divisional Head: ____________________________ Date: 11/13/16

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: ____________________________ Date:
**OFFICIAL JOURNEY AUTHORIZATION**

**SECTION 1: CLAIMANT INFORMATION**

**EMPLOYEE NAME:** Hon. Andrew Parsons  
**DEPARTMENT:** Justice & Public Safety  
**ADDRESS:** PO Box 2263, Port aux Basques, NL  
**SUPPLIER NUMBER:** AOM 1C0

**SECTION 2: TRAVEL DETAILS**

**FROM:** Channel-Port aux Basques  
**TO:** Corner Brook  
**FROM DATE:** February 20, 2016  
**TO DATE:** February 21, 2016  
**PURPOSE OF TRIP:** Ministerial/Departmental Business

**PAYMENT METHOD**

- [ ] PERSONAL CREDIT CARD  
- [ ] GOVERNMENT CREDIT CARD  
- [ ] TRAVEL ORDER

**MODE OF TRAVEL**

- [ ] PERSONAL VEHICLE  
- [ ] AIR  
- [ ] GOVERNMENT VEHICLE  
- [ ] RENTAL CAR

**THE ESTIMATED TOTAL TRIP COST MUST BE ENCLOSED REGARDLESS OF IMPREST**

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</thead>
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<td>$0000</td>
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<td></td>
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</table>

**EMPLOYEE’S SIGNATURE:** Hon. Andrew Parsons  
**DATE:**

**SECTION 3: 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:**

**DEPUTY MINISTER**  
**SIGNATURE:**  
**DATE:**  
**MINISTER**  
**SIGNATURE:**  
**DATE:**

**SECTION 4: TO BE COMPLETED IF A TRAVEL ADVANCE IS REQUIRED**

**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 POINTS: | $ |
| TRANSPORTATION COST (IF TRAVEL ORDER IS NOT ISSUED): | $ |
| ACCOMMODATIONS FOR _______ NIGHTS (HOTEL/PRIVATE): | $ |
| MEALS FOR _______ DAYS (AT APPROVED RATES): | $ |
| OTHER: | $ |

**CASH ADVANCE REQUIRED:**

- [ ] YES  
- [ ] NO

**TOTAL ANTICIPATED EXPENSES (ADVANCE REQUIRED):** $0.00

**AMOUNT**  
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19
### Official Journey Authorization

**Fiscal Year:** 2015-2016

**Employee Name:** Hon. Andrew Parsons

**Department:** Justice & Public Safety

**Position Title:** Minister & AG

**Travel Authorization:**

**Travel Advance:**

**Address:**
PO Box 2263, Port aux Basques, NL

**Postal Code:** A0M 1C0

### Section 2: Claimant Information

**Employee Name:** Hon. Andrew Parsons

**Department:** Justice & Public Safety

**Type of Impeem (if applicable):**

- Travel Advance
- Standing Travel Advance

**Address:** PO Box 2263, Port aux Basques, NL

**Supplementary Number:** A0M 1C0

### Section 3: Travel Details

**From:** Deer Lake, NL

**To:** St. John's, NL

**From Date:** February 22, 2016

**To Date:** February 27, 2016

**Purpose of Trip:** Ministerial/Departmental Business

**Payment Method:**

- Personal Credit Card
- Government Credit Card
- Travel Order

**Mode of Travel:**

- Air
- Personal Vehicle
- Government Vehicle
- Rental Car

**Company:**

**Travel Agency:**

**Order Number:**

**Estimated Total Trip Cost:** $1,700.00

**Employee's Signature:** Hon. Andrew Parsons

**Date:**

**Section 3: 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:** Heather Jacobs

**Signature:**

**Date:**

**Deputy Minister:**

**Signature:**

**Date:**

**Minister:**

**Signature:**

**Date:**

### Section 4: To Be Completed If a Travel Advance Is Required

**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 points:
  - $0.00

- Transportation cost of travel order is not known:
  - $0.00

- Accommodations for _____ nights (hotel / private):
  - $0.00

- Meals for _____ days (at approved rates):
  - $0.00

- Other:
  - $0.00

**Cash Advance Required:**

- Yes
- No

**Total Anticipated Expenses (Advance Required):** $0.00

**Departmental Finance Division Use Only:**

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Official Journey Authorization

Fiscal Year 2015-2016

Section 1: Claimant Information
Employee Name: Hon. Andrew Parsons
Department: Justice & Public Safety
Address: PO Box 2263, Port aux Basques, NL
Position Title: Minister & AG
Supplier Number: A0M 1CO

Section 2: Travel Details
From: St. John's, NL
To: Winnipeg, MB
From Date: February 24, 2016
To Date: February 27, 2016
Purpose of Trip: To attend 2nd National Roundtable on Missing and Murdered Indigenous Women and Girls

Payment Method:
- Personal Credit Card
- Government Credit Card
- Travel Order

Mode of Travel:
Air

Travel Agency:
Order Number:

The estimated total trip cost must be encumbered regardless of imprest

Employee's Signature: Hon. Andrew Parsons
Date: 02/15/16

Section 3: 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: Kelyn Parsons
Date: Feb 15, 2016

Deputy Minister
Signature: Kelyn Parsons
Date: Feb 15, 2016

Section 4: To be completed if a travel advance is required
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 points: $100.00
- Transportation cost if travel order is not issued: $400.00
- Accommodations for 2 nights (hotel / private): $400.00
- Meals for 3 days [at approved rates]: $200.00
- Other:

Cash advance required: Yes

Total anticipated expenses (advance required): $2,100.00

Amount
Accounting Distribution
Departmental Finance Division Use Only:

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Signature
Date

Note: JA 348
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<th>Document</th>
<th>Airfare</th>
<th>Taxes and Carrier-Imposed fees</th>
<th>Total Airfare</th>
<th>Total Amount Charged</th>
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**Service Fee: 41.78**

**Service fee applied to booking, not per passenger/ticket**

Flight - WestJet (WS) - 247

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<tbody>
<tr>
<td>Depart:</td>
<td>St Johns Arpt (YYT)</td>
</tr>
<tr>
<td>STOPOVER AT HALIFAX INTL, HALIFAX</td>
<td>Lester B Pearson Intl (YYZ), Terminal 3</td>
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<tr>
<td>Arrive:</td>
<td>1 Stop</td>
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<td>Flight: 247</td>
<td>Economy/Coach Discounted (M)</td>
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Status: Confirmed (HK)
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<th>Flight - WestJet (WS) - 929</th>
<th>Wednesday, February 24, 2016</th>
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<td><strong>Flight Confirmation Number:</strong></td>
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<td>Depart:</td>
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<td>Arrive:</td>
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<td>Flight 929</td>
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<td><strong>Air Canada Confirmation Number:</strong></td>
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<tr>
<td>Depart:</td>
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<td>Arrive:</td>
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<td>Flight 288</td>
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<table>
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<td>Flight 698</td>
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<table>
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<th>Flight - Air Canada (AC) - 7791</th>
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<tr>
<td><strong>Flight Operated By:</strong></td>
<td>Air Canada Express - Exploits Valley Air Services</td>
</tr>
<tr>
<td><strong>Air Canada Confirmation Number:</strong></td>
<td>LV725Z</td>
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<tr>
<td>Depart:</td>
<td>11:20 AM</td>
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<tr>
<td>Arrive:</td>
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<tr>
<td>Flight 7791</td>
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<td>Class of Service:</td>
<td>Economy (G)</td>
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<table>
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Electronic Expense Receipt available until Saturday, December 17, 2016

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https://www.viewtrip.com/CWT/Expense.aspx

2/15/2016 23
Andrew Honourable Parsons  
P.O. Box 2263  
Port Aux Basques, NL  
Dept Justice & Pub Safety  
A0M 1C0

P.O. Box 2263  
Res. # 313411

Checked in: Sat Feb 20/16 - 4:21pm  
Checked out: Sun Feb 21/16 - 9:16am

Nights: 1  
Room Rate: 155.00  
Room: 103

Group: Cabinet Secretariat

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Reference</th>
<th>Reference</th>
<th>Charges</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb20</td>
<td>Provincial Government</td>
<td>031</td>
<td></td>
<td>155.00</td>
<td></td>
</tr>
<tr>
<td>Feb20</td>
<td>HST</td>
<td></td>
<td></td>
<td>20.15</td>
<td></td>
</tr>
<tr>
<td>Feb21</td>
<td>6 Master Card</td>
<td></td>
<td></td>
<td></td>
<td>175.15</td>
</tr>
</tbody>
</table>

Thank you for staying with us.  
To book your next reservation  
Call us at 1-800-563-4400 or  
visit our website at www.steelehotels.com

Our H.S.T. # is RT100325125

Charge Summary:

| Room - Provincial Government | 155.00 |
| HST                           | 20.15  |

Customer Code: 0241/16 611128

Pre-Auth Compl

| Pre-Auth Amount | $250.00 |
| Amount          | $175.15 |
| Total           |         |
# Budget Rent-A-Car Receipt

**Rental Agreement Number:** 942913354

**Your Vehicle Information**

- **Vehicle Number:** 32723519
- **Vehicle Group Rented:** Standard SUV-7 Pass
- **Vehicle Description:** SUV HYUNDAI
- **License Plate Number:** SH504A28
- **Odometer Out:** 0
- **Odometer In:** 0
- **Total Driven:** 633
- **Fuel Gauge Reading:** Full

**Your Receipt**

- **Pickup Date/Time:** FEB 22, 2016 00:15PM
- **Pickup Location:** 150 WORLD PARKWAY
  AIRPORT TERMINAL BUILDING
  5T, JOHN W, F, A, L, T, Z, CA
  708-747-1234

- **Return Date/Time:** FEB 24, 2016 00:00PM
- **Return Location:** 150 WORLD PARKWAY
  AIRPORT TERMINAL BUILDING
  5T, JOHN W, F, A, L, T, Z, CA
  708-747-1234

**Your Vehicle Charges:**

- **Unlimited Miles Fee:** $0.00
- **Weekly Rate:** $0.00
- **Weekly Mileage Rate:** $0.00

**Optional Services**

- **Optional Services Total:** $0.00

**Your Non-Taxable Products/Services**

**Your Total Charges paid:** $98.93

**Prepayment:** $0.00

**Net Charges:** $98.93

**Your Total Due:** $0.00

---

Thank you for renting with Budget.
For all other inquiries, please contact us at 1-800-222-6800 or www.budget.com

Your vehicle was returned by: 172323. Your vehicle was cracked in by: 112994.
DEER LAKE REGIONAL AIRPORT
1 AIRPORT RD SUITE 1
DEER LAKE NL

CARD
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2015/02/27
TIME 13:16:40
RECEIPT NUMBER C9503639-001-001-868-0

PURCHASE
TOTAL

$25.00

Interac
A0000002771010
B0000006000-6800
S3012A4688919

APPROVED
AUTH# 240111 00-001
THANK YOU

CARDHOLDER COPY
**Provincial Airlines Flight Itinerary**

**Confirmation #**

<table>
<thead>
<tr>
<th>CIBMMLB</th>
</tr>
</thead>
</table>

**Serial #**

| 907 | 9501007672 |

**Issued at**

| PR2 |

**Date Sold**

| 02/19/2016 |

**Origin/Dest**

| YDF YYT |

**Passenger Name**

| PARSONS/ANDREW HON |

**CONTACT INFO**

| Phone 1 |
| Phone 2 |
| Phone 3 |
| Email/Oth |

| andrewparsons@nov.ni.ca |

**Travel Agency**

| TA Locator Number |
| NA |

**FARE/CHARGES**

<table>
<thead>
<tr>
<th>Fare Basis</th>
<th>Fare Restrictions info: corporate travel</th>
</tr>
</thead>
</table>

| Serial | 967 |

| Issue al | PR2 |

| Date Sold | 02/19/2016 |

| Orig/Dest | YDF YYT |

**TAXES**

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
</table>

| Harmonized Sales | $36.99 |

| Goods & Services | $0.00 |

| Quebec Sales | $0.00 |

| Currency | CAD |

| Rate of exchange | $1.0900 |

**Total Value (Before Tax)**

| $224.54 |

**Total Value (Incl Tax)**

| $221.53 |

**Payment Information**

<table>
<thead>
<tr>
<th>Credit Card Payment</th>
</tr>
</thead>
</table>

| MASTERCAFE XXXX-XXXX-XXXX-XXXX |

**Total Paid**

| $321.53 |

**FLIGHT ARRANGEMENTS**

<table>
<thead>
<tr>
<th>Leg</th>
<th>On Flight PB</th>
<th>922</th>
</tr>
</thead>
</table>

| Departing From | Deer Lake, NL |
| Travelling To | St. John's, NL |

| Departure Date/Time (24HR) | 02/22/2016 20:05 |

| Arrival Date/Time (24HR) | 03/22/2016 21:05 |

**PLEASE RECONFIRM FLIGHT TIMES 24 HOURS PRIOR TO DEPARTURE**

Thank you for flying Provincial Airlines/Innu Mikun Operated by Provincial Airlines

For Reservations call 1-800-663-2800 or visit our website at www.provincialairlines.ca
**Guest Folio**

**Arrival Date:** 22 Feb 2016  
**Departure Date:** 24 Feb 2016  
**Folio:** 3038-0

<table>
<thead>
<tr>
<th>Date</th>
<th>Folio</th>
<th>Reference</th>
<th>Amount</th>
<th>Tax</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>22 Feb 2016</td>
<td>1</td>
<td>Room Charge</td>
<td>$159.00</td>
<td>$27.03</td>
<td>$186.03</td>
</tr>
<tr>
<td>23 Feb 2016</td>
<td>1</td>
<td>Room Charge</td>
<td>$159.00</td>
<td>$27.03</td>
<td>$186.03</td>
</tr>
<tr>
<td>24 Feb 2016</td>
<td>1</td>
<td>Payment:</td>
<td>$-372.06</td>
<td>$0.00</td>
<td>$-372.06</td>
</tr>
</tbody>
</table>

- **Room Charges:** $318.00, $54.08, $372.06
- **Other Charges:** $0.00, $0.00, $0.00
- **Credits:** $-372.06, $0.00, $-372.06

**Balance:** $0.00

**Accommodations Levy:** 4.00 %, $318.00, $12.72

**HST:** 13.00 %, $318.00, $41.34

**Signature**

---

3 Wadland Crescent, St. John's, NL A1A 2J5  
Tel: 709 754 9822  Fax: 709 754 9047

Feb 24, 2018 11:43  
For information or reservations visit homeporthotel.com or call 1 888 754 9822
Ultragar
279 Fortuga Cove Rd  HSI: 83586:131
PHONE 730 226
DATE: 2016-02-24 TIME: 11:59
STORE #: 10600  TRANS #: 935639
MERCHANT #: 42336335704

FUEL
(L) ($/L) ($)
Regular 5.433 0.849 4.61

Taxes on 5.433 Litres of Regular Fuel
HST: 13.000 = $0.53
Total Taxes = $0.53
#TAXES INCLUDED #TAXES EXCLUDED
TOTAL CAD $ 4.61

Interac
AID: ADD00022711010
PAYMENT FROM CHECKING ACCOUNT
TERMD: *06093DA
INVOICE NO: 00005786
REF: 37101010103 ACI/50 001/03
APPROVED 776801

Our Mission:
Delight more customers every day

Save with the
Ultragar MasterCard.
 Get a cashback
equivalent to up to
3 cents per liter!
For details, visit
nbc.ca/ultragarcard

115999
UNCHY TAXI 579
310 Noranda Pl.
Winnipeg MB R3C 0W3
1201 201 3139
Cell: 514

Sale

INV# 000000019

Amount: $40.1

Tax: $2.70

Total: CAD$ 20.70

APPROVED 2236239
G81-UG

24-Feb-16 21:35:29

CUSTOMER COPY

S40(1)
## Delta Winnipeg Hotel

**S40(1)**

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
<th>Price</th>
<th>Subtotal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coffee</td>
<td>1</td>
<td>$3.50</td>
<td>$3.50</td>
</tr>
<tr>
<td>Hot Tea</td>
<td>2</td>
<td>$6.50</td>
<td>$13.00</td>
</tr>
<tr>
<td>3 Bottles of Water</td>
<td>3</td>
<td>$9.00</td>
<td>$9.00</td>
</tr>
<tr>
<td>Soft Drink</td>
<td>2</td>
<td>$5.50</td>
<td>$11.00</td>
</tr>
<tr>
<td>Food</td>
<td></td>
<td></td>
<td>$24.50</td>
</tr>
<tr>
<td>PST Tax 0%</td>
<td></td>
<td></td>
<td>$1.96</td>
</tr>
<tr>
<td>GST Tax 5%</td>
<td></td>
<td></td>
<td>$1.23</td>
</tr>
</tbody>
</table>

**Total Due:** $27.69

Please complete for room charges.

Gratuity

Total

Room Number

Print Last Name

Signature
Sale

INV#: 0000000004

Amount % 15.32
Tax: 2.63

Total: CAD$ 19.43

APPROVED 155729
001 00
28-Feb-16 15:51:29

CUSTOMER COPY
Andrew Parsons  
P.O. BOX 2264  
Port Aux Basques  
A0M 1C0

Arrival Date: 26-FEB  
Departure Date: 27-FEB  
Folio:  
Room Type: 2BD  
Room: 3204  
CC Number: **********

Group/Corporation: 
Group Name

<table>
<thead>
<tr>
<th>Date</th>
<th>Reference</th>
<th>Amount</th>
<th>Tax</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>26-Feb-16</td>
<td>Room Charge</td>
<td>$169.00</td>
<td>$28.73</td>
<td>$197.73</td>
</tr>
</tbody>
</table>

Room Charges: $169.00  
Other Charges: $0.00  
Credit: $0.00  
Balance: $0.00

ACCOM 4%  
HST 13%

Thank You for staying with us! We look forward to welcoming you back in the near future!

HST# 83556 1200 RTD001

3 Wadland Crescent, St. John's, NL  A1A 2J5  
Tel: 709 754 9822  Fax 709 754 9047  
For information or reservations visit homeporthotel.com or call 1 888 754 9822
City Wide Taxi
722-7777
Major Credit Cards Accepted
Wake Up Calls
Bus Charters Available
Date: Feb 27/16
To: Home Part
From: Airport
Cost: $80
Account: $20
H.S.T. # 120330535T
Thank You & Have a nice day!
# PRIVATE VEHICLE USAGE REPORT

**Kewtoadland Labrador**

### Justice and Public Safety Department

**PRIVATE VEHICLE USAGE REPORT**

(to be attached to travel expense claim)

<table>
<thead>
<tr>
<th>Claimant</th>
<th>Justice and Public Safety Department</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hon. Andrew Parsons</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Details of Travel</th>
<th>Distance Travelled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb. 20</td>
<td>Channel-Port aux Basques to Corner Brook</td>
<td>220</td>
</tr>
<tr>
<td>Feb. 21</td>
<td>Corner Brook to Channel-Port aux Basques</td>
<td>220</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Date</strong></th>
<th><strong>Details of Travel</strong></th>
<th><strong>Distance Travelled</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb. 20</td>
<td>Channel-Port aux Basques to Corner Brook</td>
<td>220</td>
</tr>
<tr>
<td>Feb. 21</td>
<td>Corner Brook to Channel-Port aux Basques</td>
<td>220</td>
</tr>
</tbody>
</table>

- **Total Distance Travelled**: 440

Use additional sheets if necessary and carry forward totals - Space below this line to be completed on final sheet only.

Log for employees subject to two-tiered reimbursement - see Instructions

<table>
<thead>
<tr>
<th>Cumulative Distance Travelled since Jan 1 from Previous Claim</th>
<th>3996</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Distance Travelled this Claim</td>
<td>440</td>
</tr>
<tr>
<td>Cumulative Distance Travelled since Jan 1 Including this Claim</td>
<td>4436</td>
</tr>
</tbody>
</table>

**Claim Amount:**

- Total distance travelled 440 kilometres X 47.82 $ per km = $ 210.40
- Total distance travelled 440 kilometres X $ per km = $ 210.40
- Total $ 210.40

Transfer the amount claimed above to the Private Vehicle column on your TRAVEL EXPENSE CLAIM VOUCHER.

Certified Correct: [Signature]

Approved: [Signature]

Form OCG 128

[36]
**PRIVATE VEHICLE USAGE REPORT**
(to be attached to travel expense claim)

<table>
<thead>
<tr>
<th>Date</th>
<th>Details of Travel</th>
<th>Distance Travelled</th>
</tr>
</thead>
<tbody>
<tr>
<td>20.16</td>
<td>channel-Port aux Basques to Deer Lake Airport</td>
<td>272</td>
</tr>
</tbody>
</table>

**Reason for Travel**

**Date** 20.16  
**Details of Travel**  
Channel-Port aux Basques to Deer Lake Airport  
**Distance Travelled** 272

**Cumulative Distance Travelled since Jan 1 from Previous Claim** 4436
**Total Distance Travelled this Claim** 272
**Cumulative Distance Travelled since Jan 1 Including this Claim** 4708

**Claim Amount:** Total distance travelled 272 kilometres X 47.02 $ per km = $130.07

Transfer the amount claimed above to the Private Vehicle column on your TRAVEL EXPENSE CLAIM VOUCHER

Certified Correct:  
Approved:  

**Form OCG 128**
PRIVATE VEHICLE USAGE REPORT
(to be attached to travel expense claim)

<table>
<thead>
<tr>
<th>Hon. Andrew Parsons</th>
<th>Justice and Public Safety Department</th>
<th>Division</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reason for Travel</strong></td>
<td><strong>Details of Travel</strong></td>
<td><strong>Distance Travelled</strong></td>
</tr>
<tr>
<td><strong>Date</strong></td>
<td>Deer Lake Airport to Channel-Port aux Basques</td>
<td>272</td>
</tr>
<tr>
<td>20.06.20</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Distance Travelled 272

Use additional sheets if necessary and carry forward totals - Space below this line to be completed on final sheet only

Log for employees subject to two-tiered reimbursement - see instructions

| Cumulative Distance Travelled since Jan 1 from Previous Claim | 4746 |
| Total Distance Travelled this Claim | 272 |
| Cumulative Distance Travelled since Jan 1 Including this Claim | 5018 |

Claim Amount: Total distance travelled 272 kilometres \( \times \) 47.62 \( \times \) per km \( \rightarrow \) $130.07

Total distance travelled kilometres \( \times \) \( \times \) per km \( \rightarrow \) $130.07

Transfer the amount claimed above to the Private Vehicle column on your TRAVEL EXPENSE CLAIM VOUCHER

Certified Correct:

[Signature]

Approved:

[Signature]

Form OCG 128
Name: Parsons, Hon Andrew K
Expense Date: 25-May-16 - 08-Jun-16
Cost Center: 2101
Purpose: Ministerial/Departmental Business
Report Submit Date: 09-Jun-16
Claim Authorization: Journey Authorization
Fiscal Year: 2016-17
Acct Distribution: 01-2101-110-6500-0369-000000
Related Claims:

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>25-May-16</td>
<td>Travel Agency Fees</td>
<td>Receipt Date: 25-May-16</td>
<td>18.65</td>
<td>2.24</td>
<td>20.89</td>
</tr>
<tr>
<td>07-Jun-16</td>
<td>Airfare</td>
<td>Location From: St John's; Location To: Ottawa; Justification of Ticket: Economy; Ticket Number: AC9564914590; Receipt Date: 25-May-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>681.28</td>
<td>81.75</td>
<td>763.03</td>
</tr>
<tr>
<td>07-Jun-16</td>
<td>Airfare</td>
<td>Location From: St John's; Location To: Ottawa; Justification of Ticket: Economy; Ticket Number: AC9565018710; Receipt Date: 07-Jun-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>244.16</td>
<td>29.30</td>
<td>273.46</td>
</tr>
<tr>
<td>07-Jun-16</td>
<td>Travel Agency Fees</td>
<td>Receipt Date: 07-Jun-16</td>
<td>18.65</td>
<td>2.24</td>
<td>20.89</td>
</tr>
<tr>
<td>07-Jun-16</td>
<td>Accommodations</td>
<td>Receipt Date: 08-Jun-16</td>
<td>279.54</td>
<td>33.55</td>
<td>313.09</td>
</tr>
<tr>
<td>07-Jun-16</td>
<td>Airfare</td>
<td>Location From: St John's; Location To: Ottawa; Justification of Ticket: Economy; Ticket Number: AC9565018760; Receipt Date: 07-Jun-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>95.65</td>
<td>11.50</td>
<td>107.35</td>
</tr>
<tr>
<td>07-Jun-16</td>
<td>Travel Agency Fees</td>
<td>Receipt Date: 07-Jun-16</td>
<td>18.65</td>
<td>2.24</td>
<td>20.89</td>
</tr>
</tbody>
</table>

Total 1,358.78  162.82  1,519.60
### Per Diem Expenses

<table>
<thead>
<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>07-Jun-16</td>
<td>Dinner (Canada)</td>
<td></td>
<td>1</td>
<td>27.50</td>
<td>24.55</td>
<td>2.95</td>
<td>27.50</td>
</tr>
<tr>
<td>07-Jun-16</td>
<td>Breakfast (Canada)</td>
<td>01-2101-110-6500-0364-0000000</td>
<td>1</td>
<td>11.00</td>
<td>9.82</td>
<td>1.18</td>
<td>11.00</td>
</tr>
<tr>
<td>08-Jun-16</td>
<td>Lunch (Canada)</td>
<td>01-2101-110-6500-0364-0000000</td>
<td>1</td>
<td>16.50</td>
<td>14.73</td>
<td>1.77</td>
<td>16.50</td>
</tr>
<tr>
<td>08-Jun-16</td>
<td>Dinner (Canada)</td>
<td>01-2101-110-6500-0364-0000000</td>
<td>1</td>
<td>27.50</td>
<td>24.55</td>
<td>2.95</td>
<td>27.50</td>
</tr>
<tr>
<td>08-Jun-16</td>
<td>Breakfast (Canada)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total** 73.66 8.84 82.50
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 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.
- For Ministers who are also Members of the House of Assembly (HOA): The Expense Claim must be printed and the Claimant Section below must be signed and dated before being submitted, with the necessary supporting documentation, to the Corporate and Members' Services Division (CMS) of the HOA.
- Claimants who are not Ministers and Members of the HOA are not required to print and submit a hard copy of their Expense Claim to Transactional Review and Compliance (TRC) for processing. These individuals are still able to print their Expense Claim but only for their own personal records.
- Upon processing, a notification will be sent via email and the claim's status will be updated in ECMS. The Expense Claim 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: $1,608.10

Claimant's Signature: ____________________________ Date: ________________

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

Approved and Certified By:

Supervisor/Divisional Head: ____________________________ Date: ________________

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes ☐ No ☐

Transactional Review and Compliance: ____________________________ Date: ________________
## Section 1: Claimant Information

**Employee Name:** Hon. Andrew Parsons  
**Department:** Justice & Public Safety  
**Address:** PO Box 2263, Port aux Basques, NL

## Section 2: Travel Details

**From:** St. John's, NL  
**To:** Ottawa, ON  
**From Date:** June 7, 2016  
**To Date:** June 8, 2016

**Purpose of Trip:** Meet with Hon. Jody Wilson-Raybould, Justice Canada & Hon. Ralph Goodale, Public Safety Canada

## Payment Method

- Personal Credit Card
- Government Credit Card
- Travel Order

**Payment Method:**

- **Air:**
- **Government Vehicle:**
- **Personal Vehicle:**
- **Rental Car:**

**Travel Agency and Order Number:**

**Estimated Total Trip Cost:** $783.92

**Employee Signature:**

**Date:** May 30, 2016

## Section 3: 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:** May 30, 2016

**Deputy Minister Signature:**

**Date:**

## Section 4: To be Completed if Travel Advance is Required

**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 Points:** $100.00
- **Transportation Cost of Travel Where IS NOT Covered:** $783.92
- **Accommodations for 1 Night[s]:** $300.00
- **Meals for 5 Days [as Approved Rate]:** $100.00

**Cash Advance Required:**

- **Yes**

**Total Anticipated Expenses (Advance Required):** $1,283.92

**Amount:**

<table>
<thead>
<tr>
<th></th>
<th>Accounting Distribution</th>
<th>0000</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
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<tr>
<td>03</td>
<td></td>
<td>0000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Departmental Finance Division Use Only:**

- **Signature:**
- **Date:**

---

[42]
For
ANDREW PARSONS

Tuesday, June 7, 2016

Air

AIR CANADA
Flight: 673 G CLASS
From: ST JOHNS NF 06:15 PM Equipment: E90
To: OTTAWA ON 07:50 PM Mile(s) Flown: 1098
Stops: 0 Arrival: 07Jun16
Seat(s): 18C

Hotel

Check In: 07Jun2016
Check Out: 08Jun2016
OTTAWA ON
WESTIN
WESTIN OTTAWA
11 COLONEL BY DRIVE, OTTAWA
ON K1N 9H4
CA
Tel: 6135607000
Fax: 6132345396
Confirmation: 491770756

Wednesday, June 8, 2016
Wednesday, June 8, 2016

Air

AIR CANADA
From: OTTAWA ON
To: HALIFAX NS
Stops: 0 Arrival: 08Jun16
Seat(s): 1IC
Air Canada E

Flight: 8638  G CLASS
07:35 PM  Equipment: DH4
10:25 PM
Mile(s) Flown: 593

Air

AIR CANADA
From: OTTAWA ON
To: HALIFAX NS
Stops: 0 Arrival: 08Jun16
Seat(s): 1IC
Air Canada E

Flight: 8638  U CLASS
07:35 PM  Equipment: DH4
10:25 PM
Mile(s) Flown: 593

Air

AIR CANADA
From: HALIFAX NS
To: ST JOHNS NF
Stops: 0 Arrival: 09Jun16
Seat(s): 07C
Air Canada E

Flight: 8998  G CLASS
11:00 PM  Equipment: DH4
01:16 AM
Mile(s) Flown: 548

Air

AIR CANADA
From: HALIFAX NS
To: ST JOHNS NF
Stops: 0 Arrival: 09Jun16
Seat(s): 08D
Air Canada E

Flight: 8998  U CLASS
11:00 PM  Equipment: DH4
01:16 AM
Mile(s) Flown: 548

Friday, June 10, 2016
To: GNL-LEGISLATIVE
   HOA CLERK OF TH
   HOA HOUSE OF AS

Invoice Number: I0262
Date: May 25, 2016
Page: 3/4
Our Reference: S8Z0110697C Z1L6NC

INVOICE

Friday, June 10, 2016

Air

AIR CANADA
From: OTTAWA ON
To: MONTREAL-TRUDEAU
Stops: 0 Arrival: 10Jun16
Seat(s): 21C

Flight: 7586 U CLASS
06:25 PM Equipment: E75
07:07 PM Mile(s) Flown: 103

Air

AIR CANADA
From: MONTREAL-TRUDEAU
To: ST JOHNS NF
Stops: 0 Arrival: 10Jun16
Seat(s): 20C

Flight: 7588 U CLASS
08:05 PM Equipment: E75
11:59 PM Mile(s) Flown: 998

Cost:

TKT-AC9564914590 E-TKT

(CA************)

608.00

HST: 87.78

Tax: 67.25

Ticket Total: 763.03

Service Fee HAR*61011-9564914590

(CA************)

18.49

HST: 2.40

Service Fee Total: 20.89

Total:

Grand Total: 783.92
Less Credit Card Payments: 783.92
Total GST/HST: 90.18
Credit / Balance Due To This Invoice: 0.00
Total Balance Due: 0.00

WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.
To: GNL-LEGISLATIVE
   HOA CLERK OF TH
   HOA HOUSE OF AS

Invoice Number: 10262
Date: May 25, 2016
Page: 4/4
Our Reference: S8Z0110697C Z1L6NC

INVOICE

*BAGGAGE FEES/CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITES FOR DETAILS.
THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL

U85 LEGISLATIVE
U87 HOA CLERK OF THE HOUSE
U89 HOA HOUSE OF ASSEMBLY
For ANDREW PARSONS

Tuesday, June 7, 2016

Air

AIR CANADA
Flight: 673 G CLASS
From: ST JOHNS NF
06:15 PM  Equipment: E90
To: OTTAWA ON
07:50 PM
Stops: 0 Arrival: 07Jun16
Seat(s): 18C
Mile(s) Flown: 1098

Friday, June 10, 2016

Air

AIR CANADA
Flight: 7586 U CLASS
From: OTTAWA ON
06:25 PM  Equipment: E75
To: MONTREAL-TRUDEAU
07:07 PM
Stops: 0 Arrival: 10Jun16
Seat(s): 23C
Mile(s) Flown: 103

Air

AIR CANADA
Flight: 7588 U CLASS
From: MONTREAL-TRUDEAU
08:05 PM  Equipment: E75
To: ST JOHNS NF
11:59 PM
Stops: 0 Arrival: 10Jun16
Seat(s): 20C
Mile(s) Flown: 998
To: GNL-LEGISLATIVE  
HOA CLERK OF TH  
HOA HOUSE OF AS

Invoice Number: 11221  
Date: June 7, 2016  
Page: 2/2  
Our Reference: S8Z0110697C Z1L6NC

**INVOICE**

| Cost: TKT- AC9565018710 E-TKT EXCHANGED | (CA************) | 242.00 |
|                                          | HST:             | 31.46  |
|                                          | Ticket Total:    | 273.46 |
| Service Fee HAR°61011-9565018710        | (CA************) | 18.49  |
|                                          | HST:             | 2.40   |
|                                          | Service Fee Total: | 20.89 |

Total:

| Grand Total: | 294.35 |
| Less Credit Card Payments: | 294.35 |
| Total GST/HST: | 33.86 |
| Credit / Balance Due To This Invoice: | 0.00 |
| Total Balance Due: | 0.00 |

WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.

*BAGGAGE FEES/CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITES FOR DETAILS.

THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL

U85 LEGISLATIVE  
U87 HOA CLERK OF THE HOUSE  
U89 HOA HOUSE OF ASSEMBLY
For ANDREW PARSONS

Tuesday, June 7, 2016

Air

AIR CANADA
From: ST JOHNS NF
To: OTTAWA ON
Stops: 0
Seat(s): 18C

Flight: 673 G CLASS
06:15 PM Equipment: E90
07:50 PM
Mile(s) Flown: 1098

Wednesday, June 8, 2016

Air

AIR CANADA
From: OTTAWA ON
To: HALIFAX NS
Stops: 0
Seat(s): 11C

Flight: 8638 G CLASS
07:35 PM Equipment: DH4
10:25 PM
Mile(s) Flown: 593

Air

AIR CANADA
From: HALIFAX NS
To: ST JOHNS NF
Stops: 0
Seat(s): 87C

Flight: 8998 G CLASS
11:00 PM Equipment: DH4
01:16 AM
Mile(s) Flown: 548
To: GNL-LEGISLATIVE
HOA CLERK OF THE HOUSE
HOA HOUSE OF ASSEMBLY

Invoice Number: 11253
Date: June 7, 2016
Page: 2/2
Our Reference: SBZ0110697C Z1L6NC

INVOICE

Cost:

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<tr>
<th>Description</th>
<th>Amount</th>
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<tr>
<td>TKT-AC9565018760 E-TKT EXCHANGED</td>
<td>$95.00</td>
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<tr>
<td>Service Fee HAR*61011-9565018760</td>
<td>$18.49</td>
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Ticket Total: $107.35
Service Fee Total: $20.89

Total:

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<tr>
<td>Total Balance Due:</td>
<td>$0.00</td>
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</table>

WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.
*BAGGAGE FEES CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITES FOR DETAILS.

THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL

U85 LEGISLATIVE
U87 HOA CLERK OF THE HOUSE
U89 HOA HOUSE OF ASSEMBLY
The Westin Ottawa  
11 Colonel By Drive  
Ottawa, ON K1N 9H4  
Canada  
Tel. 613-550-7000 Fax. 613-234-5396

Andrew Parsons

<table>
<thead>
<tr>
<th>Date</th>
<th>Reference</th>
<th>Description</th>
<th>Charges (CAD)</th>
<th>Credits (CAD)</th>
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<td>07-JUN-16</td>
<td>RT2219</td>
<td>Room</td>
<td>269.00</td>
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<td>Tax-HST Rooms</td>
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<td>08-JUN-16</td>
<td>MC</td>
<td>MasterCard</td>
<td></td>
<td>-313.09</td>
</tr>
</tbody>
</table>

**Total** 313.09

**Balance** 0.00

Continued on the next page
The Westin Ottawa
11 Colonel By Drive
Ottawa, ON K1N 9H4
Canada
Tel 613-560-7000 Fax 613-234-5396

Andrew Parsons

Page Number: 2
Guest Number: 1178767
Folio ID: A
Arrive Date: 07-JUN-16 20:18
Depart Date: 08-JUN-16 09:00
No. Of Guest: 1
Room Number: 2219
Club Account:
Voucher Number: S40(1)

Amount (CAD)

0.00
0.00
0.00
0.00
0.00

REST EASY - Nothing recharges mind and body like sound sleep. Experience superior rest at home with the Westin Heavenly® Bed, a revitalizing retreat for the sleep of your dreams. Learn more at westin.com/store

Tell us about your stay: www.westin.com/reviews
**Government of Newfoundland and Labrador**  
**Expense Claim: TCMS983041**

Name: Parsons, Hon Andrew K  
Expense Date: 11-Oct-16 - 14-Oct-16  
Cost Center: 2101  
Purpose: To attend Federal-Provincial-Territorial Meeting of Ministers responsible for Justice and Public Safety  
Report Submit Date: 14-Oct-16  
Claim Authorization: Journey Authorization  
Fiscal Year: 2016-17  
Acct Dlstnbution: 01-2101-110-6500-0369-000000  
Related Claims:

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<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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</thead>
<tbody>
<tr>
<td>11-Oct-16</td>
<td>Miscellaneous Travel</td>
<td>Description of Misc. Expense: Ticket change expense; Receipt Date: 14-Oct-16</td>
<td>132.15</td>
<td>16.50</td>
<td>150.65</td>
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<tr>
<td>11-Oct-16</td>
<td>Travel Agency Fees</td>
<td>Receipt Date: 14-Oct-16</td>
<td>18.75</td>
<td>2.62</td>
<td>21.37</td>
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<td>11-Oct-16</td>
<td>Miscellaneous Travel</td>
<td>Description of Misc. Expense: Ticket changed to travel from St. John's to Halifax; Receipt Date: 06-Oct-16</td>
<td>209.82</td>
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<td>11-Oct-16</td>
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<td>18.75</td>
<td>2.62</td>
<td>21.37</td>
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<tr>
<td>11-Oct-16</td>
<td>Airfare</td>
<td>Location From: St John's; Location To: Deer Lake; Ticket Number: P33550933465; Receipt Date: 14-Oct-16; Airline Carrier: Provincial Airlines; Class of Ticket: Economy</td>
<td>297.12</td>
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<td>Accommodations</td>
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<td>472.29</td>
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<td>21.37</td>
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<td>11-Oct-16</td>
<td>Airfare</td>
<td>Location From: Deer Lake; Location To: Halifax; Ticket Number: M020117849CVF8LLM; Receipt Date: 23-Sep-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>164.43</td>
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<td>187.45</td>
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**Total**  
1,350.81  
189.10  
1,539.91
### Per Diem Expenses

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<td>Incidental Expenses</td>
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<td>3</td>
<td>5.00</td>
<td>13.16</td>
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<td>Per Diem (Canada)</td>
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<td>Breakfast (Canada)</td>
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<td>11.00</td>
<td>9.65</td>
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<td>11.00</td>
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<td>14-Oct-16</td>
<td>Lunch (Canada)</td>
<td>01-2101-110-6500-0364-000000</td>
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<td>16.50</td>
<td>14.47</td>
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<td>14-Oct-16</td>
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### Mileage Expenses

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<tr>
<td>14-Oct-16</td>
<td>Mileage</td>
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<td>266 KM</td>
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<td>85.24</td>
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<td>14-Oct-16</td>
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<td>01-2101-110-6500-0362-000000</td>
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<td></td>
<td></td>
<td>85.24</td>
<td>11.93</td>
<td>97.17</td>
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</tbody>
</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 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.
* For Ministers who are also Members of the House of Assembly (HOA): The Expense Claim must be printed and the Claimant Section below must be signed and dated before being submitted, with the necessary supporting documentation, to the Corporate and Members' Services Division (CMS) of the HOA.
* Claimants who are not Ministers and Members of the HOA are not required to print and submit a hard copy of their Expense Claim to Transactional Review and Compliance (TRC) for processing. These individuals are still able to print their Expense Claim but only for their own personal records.
* Upon processing, a notification will be sent via email and the claim's status will be updated in ECMS. The Expense Claim 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: $1,869.56

Claimant's Signature: _____________________________ Date: 7/14/16

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

Approved and Certified By: _____________________________ Date: 10/14/16

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes __ No __

Transactional Review and Compliance: _____________________________ Date: 

55
For
Mr ANDREW KELVIN PARSONS

Tuesday, October 11, 2016

Air
AIR CANADA
From: DEER LAKE NL
To: HALIFAX NS
Stops: 0 Arrival: 11Oct16
Seat(s): 09D
Air CANADA

Flight: 8881 G CLASS
09:55 AM Equipment: CRJ 705
10:43 AM Mile(s) Flown: 414

Air
AIR CANADA
From: ST JOHN'S NF
To: HALIFAX NS
Stops: 0 Arrival: 11Oct16
Seat(s): 14C
Air CANADA

Flight: 8995 H CLASS
02:20 PM Equipment: DLH 1
03:59 PM Mile(s) Flown: 548

Friday, October 14, 2016

Air
AIR CANADA
From: HALIFAX NS
To: ST JOHN'S NF
Stops: 0 Arrival: 14Oct16
Air CANADA

Flight: 8992 V CLASS
11:35 AM Equipment: DLH 1
01:50 PM Mile(s) Flown: 548
To: GNL-JUSTICE AND PUBLIC SAFETY  
JPS MINISTERS O  
JPS CORPORATE S  

Invoice Number: 19061  
Date: September 23, 2016  
Page: 2/3  
Our Reference: M0Z0117849C VF6LLM

**INVOICE**

Friday, October 14, 2016

**Air**

PROVINCIAL AIRLINES  
From: ST JOHN'S NF  
To: DILLR LAKE, NF  
Stops: 0  Arrival: 14Oct16

Flight: 927  
ECONOMY CLASS  
05:30 PM  Equipment: DH1  
06:40 PM  Mile(s) Flown: 239

**Air**

AIR CANADA  
From: HALIFAX NS  
To: DILLR LAKE, NF  
Stops: 0  Arrival: 14Oct16  
Sent(s): (0J)  
Air CANADA E

Flight: 8882  
CLASS  
06:45 PM  Equipment: CRJ11  
08:25 PM  Mile(s) Flown: 414

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**Cost:**

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<td>HST:</td>
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<td>Less Credit Card Payments:</td>
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<tr>
<td>Total GST/HST:</td>
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<td>Credit / Balance Due To This Invoice:</td>
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<td>Total Balance Due:</td>
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</tbody>
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WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.  
*BAGGAGE LUGGAGE ALLOWANCES WILL VARY, REFER TO AIRLINES WEBSITES FOR DETAILS.*
To: GNL-JUSTICE AND PUBLIC SAFETY
   JPS MINISTERS O
   JPS CORPORATE S

INVOICE

Invoice Number: 19064
Date: September 23, 2016
Page: 3/3
Our Reference: M6Z0117849C VF6LLM

THANK YOU FOR BOOKING WITH CW1 HARVEYS TRAVEL.

1185 JUSTICE AND PUBLIC SAFETY
1187 JPS MINISTERS OFFICE
1189 JPS CORPORATE SERVICE
**HARVEYS TRAVEL LTD.**  
921 LIZABETH AVENUE,  
ST. JOHN'S NL.  
A1A 1W7  
GST Reg#: R 102293552  
Branch: 66011  
Agent: LINDA MORRISSEY  
Tel: 709-726-2000  

To: GNL-JUSTICE AND PUBLIC SAFETY  
JPS MINISTERS O  
JPS CORPORATE S  

---

**INVOICE**

For  
HON ANDREW KENNEDY PARSONS  

**Tuesday, October 11, 2016**  

**Air**  

**AIR CANADA**  

**Flight:** 8995  
**Class:**  
**Time:** 02:20 PM  
**Equipment:**  
**Mile(s) Flown:** 548  

**From:** St. John's, NF  
**To:** Halifax, NF  
**Stops:** 0  
**Arrival:** 11Oct16  
**Sent(s):** 1-C  
**Air Canada:**  

**Friday, October 14, 2016**  

**Air**  

**AIR CANADA**  

**Flight:** 8882  
**Class:**  
**Time:** 06:45 AM  
**Equipment:**  
**Mile(s) Flown:** 414  

**From:** Halifax, NF  
**To:** St. John's, NF  
**Stops:** 0  
**Arrival:** 14Oct16  
**Sent(s):** 19D  
**Air Canada:**  

**Cost:**  
1K1-AC9565932869  E-1K1 EXCHANGE  

**Service Fee:** HAR*4011-9565932869  

**Ticket Total:** 239.20  
**HST:** 31.20  
**Service Fee Total:** 21.37  

---
To: GNL-JUSTICE AND PUBLIC SAFETY
JPS MINISTERS OFFICE
JPS CORPORATE SERVICES

Invoice Number: 20140
Date: October 6, 2016
Page: 2/2
Our Reference: M6ZG17849C VF6LLM

INVOICE

Total:

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<tr>
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<tr>
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<tr>
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<td>Total GST/PIST</td>
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<td>Total Charges Previous Invoices</td>
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<tr>
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</tr>
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</table>

WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.
*BAGGAGE FEES/CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITES FOR DETAILS.
THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL.

URS JUSTICE AND PUBLIC SAFETY
1985 JPS MINISTERS OFFICE
1889 JPS CORPORATE SERVICE
INVOICE

For

HON ANDREW VIN PARSONS

Tuesday, October 11, 2016

Air

AIR CANADA
From: DULY LAKE, NF
To: HALIFAX, NS
Stops: 0
Arrival: 10 Oct 16
Depart(s): 09:55 AM
Air Canada

Flight: 8881
G Class
Equipment: CRJ-111
10:43 AM
Mile(s) Flown: 414

Air

AIR CANADA
From: ST JOHNS, NF
To: HALIFAX, NS
Stops: 0
Arrival: 10 Oct 16
Depart(s): 02:20 PM
Air Canada

Flight: 8995
H Class
Equipment: DH4
03:59 PM
Mile(s) Flown: 548

Friday, October 14, 2016

Air

AIR CANADA
From: HALIFAX, NS
To: ST JOHNS, NF
Stops: 0
Arrival: 10 Oct 16
Depart(s): 11:35 AM
Air Canada

Flight: 8992
V Class
Equipment: DH4
01:50 PM
Mile(s) Flown: 548
Friday, October 14, 2016

Air

AIR CANADA
From: HALILAX NS
To: DURRIAKI NF
Stops: 0 Arrival: 14Oct16
Seat(s): 09D

Cost:
1K1- AC9565933464 E-1K1 EXCHANGED

Service Inc. HAR*61011-9565933464

1K1- P99565933465 E-1K1

Service Inc. HAR*61011-9565933465

Total:

<table>
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<tr>
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<tbody>
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<td>592.52</td>
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Less Credit Card Payments: 532.11

Total GST/HST: 60.41

Credit / Balance Due To This Invoice: 0.00

Total Previous Payments: 469.39

Total Charges Previous Invoices: 469.39

Total Balance Due: 0.00

WHEN PAYING THIS INVOICE PLEASE QUOTE THE ABOVE INVOICE AND REFERENCE NUMBER ON YOUR CHEQUE STUB.
INVOICE

*Baggage fees/check baggage allowances will vary. Refer to airline websites for details.
Thank you for booking with CWT Harveys Travel.

GNL JUSTICE AND PUBLIC SAFETY
JPS MINISTERS OFFICE
JPS CORPORATE SERVICE

Invoice Number: 20642
Date: October 14, 2016
Page: 3/3
Our Reference: M6Z0117849CF63LMM
### Section 1: Claimant Information

**Claimant:** Hon. Andrew Parsons  
**Minister & AG:** Justice & Public Safety  
**Address:** PO Box 2263, Port aux Basques, NL A0M 1C0

### Section 2: Travel Details

**From:** Deer Lake, NL  
**To:** Halifax, NS  
**Date:** October 11, 2016 to October 14, 2016

**Purpose of Trip:** Business  
**Mode of Travel:** Air  
**Employee's Signature:** [signature]  
**Date:** Sept 27, 2016

**Estimated Total Trip Cost:** [amount] (irrespective of purpose)

**Employee's Signature:** [signature]  
**Date:** [date]

### Section 4: To be completed if a travel advance is required

- **Taxi, Limousine, or Business Trip and from departure points:** $100.00
- **Transportation Cost of Travel by Personal Car:** $300.00
- **Accommodations for 2 nights:** $538.41
- **Meals for 3 days:** $200.00
- **Other:** $0.00

**Cash Advance Required:** Yes

**Total Anticipated Expenses:** $1,138.41

**Accounting Distribution:**

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<tr>
<td>$200.00</td>
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**Departmental Finance Division Use Only:**

[Signature]  
**Date:** [date]
**Group:** Dept of Justice Canada Deputy Ministers

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<th>Date</th>
<th>Description</th>
<th>Additional Information</th>
<th>Charges</th>
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<td>10-11-16</td>
<td>Municipal Mkg Levy 2%</td>
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<td>Room HST</td>
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<td>10-13-16</td>
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**HST Summary**

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<td>Room</td>
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<tr>
<td>F&amp;B</td>
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<tr>
<td>Other</td>
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<td>Total</td>
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**Total**

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<tr>
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**Balance Due**

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<tr>
<td>Balance Due</td>
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</tbody>
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**Reg No:** 807372776 RT0001

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company, or association fails to pay for any part of or the full amount of these charges.
Name: Parsons, Hon Andrew K
Expense Date: 11-Oct-16 - 14-Oct-16
Cost Center: 2101
Purpose: To attend Federal-Provincial-Territorial Meeting of Ministers responsible for Justice and Public Safety
Report Submit Date: 17-Oct-16
Claim Authorization: Journey Authorization
Fiscal Year: 2016-17
Acct Distribution: 01-2101-110-6500-0369-000000

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>11-Oct-16</td>
<td>Airfare</td>
<td>Location From: Halifax; Location To: Deer Lake; Ticket Number: PB8565933465; Receipt Date: 14-Oct-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>132.15</td>
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<td>11-Oct-16</td>
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<td>Airfare</td>
<td>Location From: St John's; Location To: Halifax; Ticket Number: AC9565932869; Receipt Date: 06-Oct-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
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<td>21.37</td>
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<td>11-Oct-16</td>
<td>Airfare</td>
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Total 1,350.81 189.10 1,539.91
### Per Diem Expenses

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<td>11-Oct-16</td>
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<td>Per Diem (Canada)</td>
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<td>14-Oct-16</td>
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<td>2.03</td>
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### Mileage Expenses

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<td></td>
<td>85.24</td>
<td>11.93</td>
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<td>97.17</td>
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**Government of Newfoundland and Labrador**  
**Expense Claim: TCMS983545**

Name: Parsons, Hon Andrew K  
Expense Date: 10-Oct-16 - 10-Oct-16  
Cost Center: 2101  
Purpose: To attend federal-provincial-territorial meetings for Ministers of Justice and Public Safety  
Report Submit Date: 19-Oct-16  
Claim Authorization: Journey Authorization  
Fiscal Year: 2016-17  
Acct Distribution: 01-2101-110-6500-0369-000000  
Related Claims: TCMS983641

### Receipt-Based Expenses

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<td>Parking</td>
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Total 17.54 2.46 20.00

Net of Tax Total: 17.54  
Tax Total: 2.46
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 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.
* For Ministers who are also Members of the House of Assembly (HOA): The Expense Claim must be printed and the Claimant Section below must be signed and dated before being submitted, with the necessary supporting documentation, to the Corporate and Members’ Services Division (CMS) of the HOA.
* Claimants who are not Ministers and Members of the HOA are not required to print and submit a hard copy of their Expense Claim to Transactional Review and Compliance (TRC) for processing. These individuals are still able to print their Expense Claim but only for their own personal records.
* Upon processing, a notification will be sent via email and the claim’s status will be updated in ECMS. The Expense Claim 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: 20.00

Claimant’s Signature: ____________________________ Date: __________

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

Approved and Certified By:

Supervisor/Divisional Head: ____________________________ Date: __________

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes ___ No ___

Transactional Review and Compliance: ____________________________ Date: __________
Deer Lake Regional Airport
1 Airport Rd, Suite 1
Deer Lake, NL
A8A 1A3
Long Term Parking
HST#891868648

Transaction ID 76203-10677
Ticket #1 0050714

In 10/14/2016 20:52
Out 10/14/2016 18:55
Lane 1
LOT# 100
Duration 3,2263
ID RNault

Transient Parking $20.00
HST $2.30
Balance Due: $20.00
Cash $20.00
Change $0.00

DEER LAKE REGIONAL AIRPORT
1 AIRPORT RD SUITE 1
DEER LAKE NL

CARD
CARD TYPE INTERAC
ACCOUNT TYPE CHEQUING
DATE 2016/10/14
TIME 06:30 18:55 47
RECEIPT NUMBER C85028666 001 001-302-0

PURCHASE
TOTAL $20.00

Interac
A000000027/1016
6A8A8A8381456936
8000000000-6800
5D7E123F1039A3DB

APPROVED
AUTH# 182418 00-001
THANK YOU

CARDHOLDER COPY