Dear [Redacted]

RE: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act (Our File TW/084/2017)

On July 4, 2017, the Department of Transportation and Works received your request for access to the following records/information:

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

I am pleased to inform you that a decision has been made by the Deputy Minister of Transportation and Works to provide some access to the requested information.

Please note that the Ministerial Expense Reports page of the Cabinet Secretariat website contains reports which are released twice per year (June and December) and contain expenses for which ministers have received reimbursement. Expenses covered include those pertaining to such items as accommodations, automobile use, meals, travel and living expenses. The link is as follows:

Access to the remaining 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.

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 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 address and contact information of the Information and Privacy Commissioner is as follows:

Office of the Information and Privacy Commissioner
2 Canada Drive
P. O. Box 13004, Stn. A
St. John’s, NL. A1B 3V8
Telephone: (709) 729-6309
Toll-Free: 1-877-729-6309
Facsimile: (709) 729-6500

You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive the decision of the public body, pursuant to section 52 of the Act.

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 Completed Access to Information Requests 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 me by telephone at 709-729-5303 or by e-mail at MichaelCook@gov.nl.ca.

Sincerely,

Michael Cook
ATIPP Coordinator
Department of Transportation and Works
Enclosures
Disclosure harmful to personal privacy

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.

(2) A disclosure of personal information is not an unreasonable invasion of a third party's personal privacy where

(a) the applicant is the individual to whom the information relates;

(b) the third party to whom the information relates has, in writing, consented to or requested the disclosure;

(c) there are compelling circumstances affecting a person’s health or safety and notice of disclosure is given in the form appropriate in the circumstances to the third party to whom the information relates;

(d) an Act or regulation of the province or of Canada authorizes the disclosure;

(e) the disclosure is for a research or statistical purpose and is in accordance with section 70;

(f) the information is about a third party's position, functions or remuneration as an officer, employee or member of a public body or as a member of a minister's staff;

(g) the disclosure reveals financial and other details of a contract to supply goods or services to a public body;

(h) the disclosure reveals the opinions or views of a third party given in the course of performing services for a public body, except where they are given in respect of another individual;

(i) public access to the information is provided under the Financial Administration Act;

(j) the information is about expenses incurred by a third party while travelling at the expense of a public body;

(k) the disclosure reveals details of a licence, permit or a similar discretionary benefit granted to a third party by a public body, not including personal information supplied in support of the application for the benefit;

(l) the disclosure reveals details of a discretionary benefit of a financial nature granted to a third party by a public body, not including
(i) personal information that is supplied in support of the application for the benefit, or

(ii) personal information that relates to eligibility for income and employment support under the Income and Employment Support Act or to the determination of income or employment support levels; or

(m) the disclosure is not contrary to the public interest as described in subsection (3) and reveals only the following personal information about a third party:

(i) attendance at or participation in a public event or activity related to a public body, including a graduation ceremony, sporting event, cultural program or club, or field trip, or

(ii) receipt of an honour or award granted by or through a public body.

(3) The disclosure of personal information under paragraph (2)(m) is an unreasonable invasion of personal privacy where the third party whom the information is about has requested that the information not be disclosed.

(4) A disclosure of personal information is presumed to be an unreasonable invasion of a third party's personal privacy where

(a) the personal information relates to a medical, psychiatric or psychological history, diagnosis, condition, treatment or evaluation;

(b) the personal information is an identifiable part of a law enforcement record, except to the extent that the disclosure is necessary to dispose of the law enforcement matter or to continue an investigation;

(c) the personal information relates to employment or educational history;

(d) the personal information was collected on a tax return or gathered for the purpose of collecting a tax;

(e) the personal information consists of an individual's bank account information or credit card information;

(f) the personal information consists of personal recommendations or evaluations, character references or personnel evaluations;

(g) the personal information consists of the third party's name where

(i) it appears with other personal information about the third party, or
(ii) the disclosure of the name itself would reveal personal information about the third party; or

(h) the personal information indicates the third party's racial or ethnic origin or religious or political beliefs or associations.

(5) In determining under subsections (1) and (4) whether a disclosure of personal information constitutes an unreasonable invasion of a third party's personal privacy, the head of a public body shall consider all the relevant circumstances, including whether

(a) the disclosure is desirable for the purpose of subjecting the activities of the province or a public body to public scrutiny;

(b) the disclosure is likely to promote public health and safety or the protection of the environment;

(c) the personal information is relevant to a fair determination of the applicant's rights;

(d) the disclosure will assist in researching or validating the claims, disputes or grievances of aboriginal people;

(e) the third party will be exposed unfairly to financial or other harm;

(f) the personal information has been supplied in confidence;

(g) the personal information is likely to be inaccurate or unreliable;

(h) the disclosure may unfairly damage the reputation of a person referred to in the record requested by the applicant;

(i) the personal information was originally provided to the applicant; and

(j) the information is about a deceased person and, if so, whether the length of time the person has been deceased indicates the disclosure is not an unreasonable invasion of the deceased person’s personal privacy.
Access or correction complaint

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(4) An appeal shall be commenced under subsection (3) not later than 15 business days after the applicant is notified of the commissioner’s refusal under subsection 45(2).
<table>
<thead>
<tr>
<th>TCMS</th>
<th>Travel Date</th>
<th>Description</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>TCMS954012</td>
<td>January 19, 2016</td>
<td>Travel to Halifax to meet with Minister of Infrastructure</td>
<td>$852.06</td>
</tr>
<tr>
<td>TCMS954133</td>
<td>January 27, 2016</td>
<td>Registration for Premier’s Luncheon at the Northern Lights Conference, Ottawa</td>
<td>$113.00</td>
</tr>
<tr>
<td>TCMS954208</td>
<td>January 27, 2016</td>
<td>Travel to Ottawa at attend FPT meetings and Northern Lights Conference</td>
<td>$1,930.16</td>
</tr>
<tr>
<td>TCMS972585</td>
<td>July 6, 2017</td>
<td>To attend Atlantic Transportation Minister Meetings at PEI (Trip canceled; Credit used for future travel to Edmonton at a later date. See TCMS979548.)</td>
<td>$680.45</td>
</tr>
<tr>
<td>TCMS979548</td>
<td>September 5, 2016</td>
<td>To attend Federal infrastructure meetings with Hon. Amarjeet Sohi at Edmonton</td>
<td>$1,754.48</td>
</tr>
<tr>
<td>TCMS980810</td>
<td>September 26, 2016</td>
<td>To attend FPT Council of Minister’s Responsible for Transportation Meetings in Toronto</td>
<td>$1,963.79</td>
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<tr>
<td>TCMS986024</td>
<td>November 10, 2016</td>
<td>Travel back to Grand Falls–Windsor from HQ, and then to Toronto for P3 Seminar</td>
<td>$2,231.69</td>
</tr>
<tr>
<td>TCMS987091</td>
<td>November 10, 2016</td>
<td>Travel to Toronto for P3 Conference</td>
<td>$17.25</td>
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</tbody>
</table>
**Expense Claim: TCMS954012**

- **Name:** Hawkins, Hon Allan
- **Expense Date:** 12-Jan-16 - 20-Jan-16
- **Cost Center:** 3001
- **Purpose:** Travel to Halifax to meet with the Minister of Infrastructure
- **Report Submit Date:** 21-Jan-16
- **Claim Authorization:** Journey Authorization
- **Fiscal Year:** 2015-16
- **Acct Distribution:** 01-3001-110-1700-0369-000000

### 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>
<td>12-Jan-16</td>
<td>Travel Agency Fees</td>
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<td>37.30</td>
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<td>19-Jan-16</td>
<td>Airfare</td>
<td>Location From: St John's; Location To: Halifax; Ticket Number: 01416124777330; Receipt Date: 12-Jan-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>280.61</td>
<td>33.67</td>
<td>314.28</td>
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<tr>
<td>19-Jan-16</td>
<td>Parking</td>
<td>Receipt Date: 20-Jan-16</td>
<td>12.50</td>
<td>1.50</td>
<td>14.00</td>
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<td>19-Jan-16</td>
<td>Accommodations</td>
<td>Receipt Date: 20-Jan-16</td>
<td>125.68</td>
<td>15.08</td>
<td>140.76</td>
</tr>
<tr>
<td>20-Jan-16</td>
<td>Airfare</td>
<td>Location From: Halifax; Location To: St John's; Ticket Number: 45116124777331; Receipt Date: 12-Jan-16; Airline Carrier: Porter Airlines; Class of Ticket: Economy</td>
<td>260.93</td>
<td>31.31</td>
<td>292.24</td>
</tr>
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</table>

**Total** 717.02 86.04 803.06

### 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>19-Jan-16 to Dinner (Canada)</td>
<td></td>
<td></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>19-Jan-16</td>
<td>Incidental Expenses</td>
<td></td>
<td>1</td>
<td>5.00</td>
<td>4.46</td>
<td>0.54</td>
<td>5.00</td>
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<tr>
<td>19-Jan-16</td>
<td>Lunch (Canada)</td>
<td></td>
<td>1</td>
<td>16.50</td>
<td>14.73</td>
<td>1.77</td>
<td>16.50</td>
</tr>
</tbody>
</table>

**Total** 43.75 5.25 49.00
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: $852.06

Claimant's Signature: ___________________________ Date: Jan 21, 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 21, 2016

Selected for Regular Review: Yes ☐ No ☐

Transactional Review and Compliance: ___________________________ Date:
Trip on Jan 19, 2016  
Locator: SQTPZM  
Date: Jan 12, 2016

Traveler: MR ALLAN HAWKINS  
Agent: TR

**Tuesday, January 19, 2016**

**Flight Air Canada 8997**  
DEPARTURE  
YYT - St Johns, Newfoundland  
6:35 PM, Jan 19, 2016  
ARRIVAL  
YHZ - Halifax, Nova Scotia Canada  
7:51 PM, Jan 19, 2016

Status: Confirmed  
Class: Coach Class - W  
Duration: 01:46 (Non-stop)  
Equipment: CRA  
Meal Service: None  
Reserved Seats: 26A  
Frequent Flyer: OPERATED BY AIR CANADA EXPRESS - JAZZ  
Notes:

**Tuesday, January 19, 2016**

**Hotel HOLLIS HALIFAX-A DBLTREE SUITES**  
LOCATION  
1649 Hollis Street  
Halifax, NS CA B3J 1V8

Reserved For: MR ALLAN HAWKINS  
Status: Confirmed  
Check-In: Jan 19, 2016  
Check-Out: Jan 20, 2016  
Number of Rooms: 1  
Rate: CAD 120.00/night  
Notes: CANCEL HOTEL RESERVATION BY 4PM DAY OF ARRIVAL TO AVOID ROOM CHARGES. PLEASE OBTAIN CANCELLATION NUMBER. LOWEST HOTEL RATE HAS BEEN APPLIED. A LOWER RATE MAY BECOME AVAILABLE. PLS VERIFY AT CHECK-IN.

**Wednesday, January 20, 2016**

**Flight Porter Airlines 247**  
DEPARTURE  
YHZ - Halifax, Nova Scotia Canada  
1:25 PM, Jan 20, 2016  
ARRIVAL  
YYT - St Johns, Newfoundland  
3:35 PM, Jan 20, 2016

Status: Confirmed  
Class: Coach Class - K  
Duration: 01:40 (Non-stop)  
Equipment: DH4  
Meal Service: None  
Notes: SEAT 5D

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<tr>
<th>Name</th>
<th>Invoice / Ticket / Date</th>
<th>Base</th>
<th>Tax 1</th>
<th>Tax 2</th>
<th>Tax 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>HAWKINS/ALLAN</td>
<td>4511612477331/1231AN16</td>
<td>CAD 204.00</td>
<td>38.12RC</td>
<td>7.12CA</td>
<td>43.00XT</td>
<td>292.24</td>
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<tr>
<td>HAWKINS/ALLAN</td>
<td>014161247730/1231AN16</td>
<td>CAD 241.00</td>
<td>36.16RC</td>
<td>7.12CA</td>
<td>30.00SQ</td>
<td>314.28</td>
</tr>
</tbody>
</table>

**Total Amount**: 606.52
GENERAL INFORMATION
EMERGENCIES/ENROUTE CHANGES AFTER BUSINESS HOURS
1-866-464-4400 TOLLFREE. OUTSIDE NORTH AMERICA CALL COLLECT 314-513-0807. ADDITIONAL FEES WILL APPLY
YOUR EMERGENCY ID CODE IS G/286-T-GOV'T
RECOMMENDED CHECK-IN FOR DOMESTIC FLIGHTS-MINIMUM 1 HOUR PRIOR.
BEST AVAILABLE SEATING WAS CONFIRMED AT TIME OF BOOKING.
TICKET IS NONREFUNDABLE-UNDER CERTAIN CONDITIONS VALUE MAY BE APPLIED FOR FUTURE TRAVEL
**** ATTENTION E-TICKET TRAVELLERS ****
E-TICKET TRAVELLER WILL BE REQUIRED TO SHOW GOVERNMENT ISSUED PHOTO.
I.D. OR PURCHASING CREDIT CARD
E-TICKETS WILL NOT BE ACCEPTED BY OTHER CARRIERS,
CWT STRONGLY RECOMMENDS THAT YOU PURCHASE EMERGENCY TRAVEL AND MEDICAL INSURANCE FOR YOUR PROTECTION AGAINST HIGH COSTS OF AN UNEXPECTED TRAVEL OR MEDICAL EMERGENCY DURING YOUR TRIP; PLEASE NOTE UNLESS IT IS NOTED OTHERWISE ON THIS ITINERARY YOU DECLINED TRAVEL INSURANCE COVERAGE AND THEREFORE IS NOT INCLUDED WITH YOUR TRAVEL ARRANGEMENTS.

THANK YOU FOR CHOOSING THE SERVICES OF HARVEYS TRAVEL
** PLEASE REVIEW THESE RESERVATIONS THOROUGHLY
** IF A DISCREPANCY EXISTS CALL OUR OFFICE IMMEDIATELY

VIEW WWW.CARLSONWAGONLIT.CA FOR GREAT VACATION IDEAS

BY MAKING THIS RESERVATION WITH CWT YOU ARE ACKNOWLEDGING THE DATA PRIVACY POLICY AN CONSENT TO THE DATA PROTECTION STATEMENT BOTH FOUND AT WWW.CWTCORPORATE.CA/PRIVACY.HTML
TO WITHDRAW YOUR CONSENT PLEASE CONTACT YOUR CONSULTANT.

Agency Information
Carlson Wagonlit/Harvey's Travel
92 Elizabeth Ave
St. John's, NF
A1A 4W7
Reservations: 877 726-1881
Facsimile: 709-726-0317

Consultant: 
Form of Payment: 
Ticket Total 606.52
Service Fee 41.78
Invoice Total 606.52

The above Service Fee has been applied to your credit card.
Note: The fare quoted is not valid until time of ticket issuance.

Ticket Total 606.52
Service Fee 41.78
Invoice Total 606.52

The above Service Fee has been applied to your credit card.
Note: The fare quoted is not valid until time of ticket issuance.
<table>
<thead>
<tr>
<th>Date</th>
<th>Form of Payment</th>
<th>Document</th>
<th>Airfare:</th>
<th>Taxes and Carrier-Imposed fees:</th>
<th>Total Airfare:</th>
<th>Total Amount Charged:</th>
<th><strong>Service Fee:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Jan 2016</td>
<td>s. 40 (1)</td>
<td>eTicket 0141612477330 AC</td>
<td>241.00</td>
<td>73.28</td>
<td>314.28</td>
<td>Unavailable</td>
<td>73.28</td>
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<tr>
<td>12 Jan 2016</td>
<td>s. 40 (1)</td>
<td>eTicket 4511612477331 R9</td>
<td>204.00</td>
<td>88.24</td>
<td>292.24</td>
<td>Unavailable</td>
<td>41.78</td>
</tr>
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</table>

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

---

<table>
<thead>
<tr>
<th>Flight - Air Canada (AC) - 8997</th>
<th>Tuesday, January 19, 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flight Operated By:</td>
<td>Air Canada Express - Jazz</td>
</tr>
<tr>
<td>Air Canada Confirmation Numbers:</td>
<td>PYZ64V</td>
</tr>
<tr>
<td>Depart:</td>
<td>St Johns Arpt (YYT)</td>
</tr>
<tr>
<td>Arrive:</td>
<td>Halifax Intl (YHZ)</td>
</tr>
<tr>
<td>Flight: 8997</td>
<td>Non-stop</td>
</tr>
<tr>
<td>Class of Service:</td>
<td>Economy (W)</td>
</tr>
<tr>
<td>Seat:</td>
<td>Passenger</td>
</tr>
<tr>
<td>26A (Non-smoking)</td>
<td>Confirmed</td>
</tr>
</tbody>
</table>

Status: Confirmed (HK)
## Hotel Receipt

**Hotel:** Doubletree By Hilton Hollis Halifax-A Dbltree Suites  
**Confirmation Number:** 85386873  
**Check In:** Tuesday, January 19, 2016  
**Check Out:** Wednesday, January 20, 2016  
**Pricing:**  
- **Estimated Hotel Rate:** CAD 120.00 / night  
- **Approximate Total, including taxes:** CAD 140.76

---

## Flight Receipt

**Flight:** Porter Airlines Inc (PO) - 247  
**Confirmation Numbers:** G7EH2G  
**Depart:** 1:25 PM  
**Arrive:** 3:35 PM  
**Flight:** 247  
**Class of Service:** Economy/Coach Discounted (K)

---

## Tour Receipt

**Tour:** Tour (ZZ)  
**Location:** St Johns (YYT)  
**Departure Date:** Wednesday, November 30, 2016  
**Number of Persons:** 1

---

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HAWKINS, ALLAN

PLEASE OBTAIN

PLEASE OBTAIN NS 6356
CANADA

Confirmation Number: 85386873

THE HOLLIS HALIFAX 1/21/2016 8:46:00 AM

<table>
<thead>
<tr>
<th>DATE</th>
<th>DESCRIPTION</th>
<th>Cashier ID</th>
<th>Transaction ID</th>
<th>GUEST CHARGES</th>
<th>CREDIT</th>
<th>BALANCE</th>
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<tbody>
<tr>
<td>1/19/2016</td>
<td>GUEST ROOM</td>
<td>OLRO</td>
<td>156205</td>
<td>$120.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1/19/2016</td>
<td>RM HARMONIZED SALES TAX</td>
<td>OLRO</td>
<td>156205</td>
<td>$18.00</td>
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<td>1/19/2016</td>
<td>RM HRM HOTEL MARKETING LEVY</td>
<td>OLRO</td>
<td>156205</td>
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<tr>
<td>1/20/2016</td>
<td>VS <strong>7781</strong></td>
<td>BRJO</td>
<td>156346</td>
<td>($140.76)</td>
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</table>

**BALANCE** $0.00

EXPENSE REPORT
SUMMARY

<table>
<thead>
<tr>
<th>DATE</th>
<th>ROOM AND TAX</th>
<th>DAILY TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/19/2016</td>
<td>$140.76</td>
<td>$140.76</td>
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<tr>
<td></td>
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</tr>
</tbody>
</table>
ST. JOHN'S INTL
AIRPORT AUTHORITY

RECIPTH1
CASHIER NO. : 7
SHIFT NO. : [redacted]

* NORMAL TICKET *

ENTRY DATE/TIME:
19.01.16 18:42
PAY DATE/TIME:
20.01.16 15:48
PARK-DUR. : HRS:MIN
0:21:06

AMOUNT: $ 14.00
VAL. AMT:- $ 0.00
PAID: $ 14.00

VISA
08/17 201

AUTH. REF.
[redacted]

* NO IN/OUT *
* PRIVILEGES *

TRAN No. : 1 1415

* HST INCLUDED *

HST No. [redacted]

ST JOHNS NL
A1A 5T2

QUESTIONS?
CALL 709-758-8500

HAV
| EMPLOYEE NAME: | Hon. Al Hawkins | DEPARTMENT: | Transportation and Wo |
| ADDRESS: | | POSITION TITLE: | Minister |
| POSTAL CODE: | | SUPPLIER NUMBER: | |

**OFFICIAL JOURNEY AUTHORIZATION**

| FISCAL YEAR | 2015/2016 | TYPE OF IMPRINT | | |
| | | TRAVEL ADVANCE | | |
| | | STANDING TRAVEL ADVANCE | | |

**SECTION 1: TRAVEL INFORMATION**

| FROM: | St. John's, NL | TO: | Halifax, NS |
| FROM DATE: | January 19th, 2016 | TO DATE: | January 20, 2016 |

**PURPOSE OF TRIP:**
To meet with Hon. Amarjeet Sohi, Minister of Infrastructure and Communities

| PAYMENT METHOD | | MODE OF TRAVEL |
| PERSONAL CREDIT CARD | | AIR |
| GOVERNMENT CREDIT CARD | | GOVERNMENT VEHICLE |
| TRAVEL ORDER | | RENTAL CAR |

**TRAVEL AGENCY AND ORDER NUMBER**

| THE ESTIMATED TOTAL TRIP COST MUST BE ENCUMBERED REGARDLESS OF IMPRINT |
| AMOUNT | ACCOUNTING DISTRIBUTION |
| $1,000.00 | 01 | 0000 |

**EMPLOYEE’S SIGNATURE:**

| DATE: |
| |

**SECTION 2: 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: |
| | | |

| CHIEF OF STAFF | SIGNATURE | DATE: |

**SECTION 3: 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 | ACCOUNTING DISTRIBUTION | DEPARTMENTAL FINANCE DIVISION USE ONLY: |
| | | Signature | Date |
| 01 | | 0000 |
| 03 | | 0000 |
| 01 | | 0000 |
**Government of Newfoundland and Labrador**

**Expense Claim: TCMS954208**

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<thead>
<tr>
<th>Name:</th>
<th>Hawkins, Hon Allan</th>
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<tbody>
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<td>Expense Date:</td>
<td>12-Jan-16 - 31-Jan-16</td>
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<tr>
<td>Cost Center:</td>
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<tr>
<td>Purpose:</td>
<td>Travel to Ottawa to attend FPT meetings and Northern Lights Conference</td>
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<tr>
<td>Report Submit Date:</td>
<td>08-Feb-16</td>
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<td>Claim Authorization:</td>
<td>Journey Authorization</td>
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<td>Related Claims:</td>
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### Receipt-Based Expenses

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<th>Tax Amount</th>
<th>Reimbursable Amount (CAD)</th>
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<td>60.36</td>
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<td>67.60</td>
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Government of Newfoundland and Labrador
Expense Claim: TCMS954208

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<th>Amount (CAD)</th>
<th>Net of Tax Amount</th>
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**Per Diem Expenses**

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<th>Reimbursable Amount</th>
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<td>29-Jan-16 to 29-Jan-16</td>
<td>Breakfast (Canada)</td>
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<td><strong>18.05</strong></td>
<td><strong>168.50</strong></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 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: $1,930.16

Claimant's Signature: ___________________________ Date: Feb 8, 2016

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

Approved and Certified By: ___________________________

Supervisor/Divisional Head: ___________________________ Date: Feb 8, 2016

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: ___________________________ Date: ___________________________
**Government of Newfoundland and Labrador**

**Expense Claim: TCMS954208**

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<tr>
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## Government of Newfoundland and Labrador

**Expense Claim: TCMS954208**

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### Per Diem Expenses

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<tr>
<td>29-Jan-16</td>
<td>01-3001-110-1700-0364-000000</td>
<td></td>
<td></td>
<td>11.00</td>
<td>9.82</td>
<td>1.18</td>
<td>11.00</td>
</tr>
<tr>
<td>30-Jan-16  to Breakfast (Canada)</td>
<td></td>
<td></td>
<td>1</td>
<td>16.50</td>
<td>14.73</td>
<td>1.77</td>
<td>16.50</td>
</tr>
<tr>
<td>30-Jan-16  to Lunch (Canada)</td>
<td></td>
<td></td>
<td>1</td>
<td>16.50</td>
<td>14.73</td>
<td>1.77</td>
<td>16.50</td>
</tr>
<tr>
<td>30-Jan-16</td>
<td>01-3001-110-1700-0364-000000</td>
<td></td>
<td></td>
<td>11.00</td>
<td>9.82</td>
<td>1.18</td>
<td>11.00</td>
</tr>
<tr>
<td>31-Jan-16  to Breakfast (Canada)</td>
<td></td>
<td></td>
<td>1</td>
<td>16.50</td>
<td>14.73</td>
<td>1.77</td>
<td>16.50</td>
</tr>
<tr>
<td>31-Jan-16  to Lunch (Canada)</td>
<td></td>
<td></td>
<td>1</td>
<td>16.50</td>
<td>14.73</td>
<td>1.77</td>
<td>16.50</td>
</tr>
<tr>
<td>31-Jan-16</td>
<td>01-3001-110-1700-0364-000000</td>
<td></td>
<td></td>
<td>11.00</td>
<td>9.82</td>
<td>1.18</td>
<td>11.00</td>
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<tr>
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<td></td>
<td><strong>Total</strong></td>
<td>125.89</td>
<td>15.11</td>
<td>141.00</td>
<td></td>
<td></td>
</tr>
</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):

Minister's flight on Sat Jan 30th was oversold; he stayed in Halifax and flew the next day - Jan 31st.

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: 1,936.56

Claimant's Signature: ___________________________ Date: Feb 7, 2016

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

Approved and Certified By: ___________________________ Date: Feb 3, 2016

Supervisor/Divisional Head: ___________________________ Date: Feb 3, 2016

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: ___________________________ Date: ___________________________
HARVEYS TRAVEL LTD.
92 ELIZABETH AVENUE
ST JOHN'S NEWFOUNDLAND
A1A 1W7

To: GNL-TRANSPORTATION & WORKS
P.O. BOX 8700
ST. JOHNS, NL
ST JOHNS NL
CA A1B 4J6

INVOICE

For
MR ALLAN HAWKINS

Wednesday, January 27, 2016

Air

AIR CANADA
From: ST JOHNS NF
To: HALIFAX NS
Stops: 0  Arrival: 27Jan16
Flight: 8995 ECONOMY CLASS
02:05 PM  Equipment: CRA
03:20 PM  Mile(s) Flown: 548

Air

AIR CANADA
From: HALIFAX NS
To: OTTAWA ON
Stops: 0  Arrival: 27Jan16
Flight: 167 ECONOMY CLASS
04:10 PM  Equipment: E90
05:14 PM  Mile(s) Flown: 593
To: GNL-TRANSPORTATION & WORKS
P.O. BOX 8700
ST. JOHNS, NL
ST JOHNS NL
CA A1B 4J6

Wednesday, January 27, 2016

Hotel
Check In: 27Jan2016
Check Out: 29Jan2016
OTTAWA ON
MARRIOTT
OTTAWA MARRIOTT HOTEL
OTTAWA MARRIOTT HOTEL
100 KENT STREET
OTTAWA ON
K1P5R7
Tel: 6132381122
Confirmation: 32CZVN5L

Friday, January 29, 2016

Air
AIR CANADA
From: OTTAWA ON
To: HALIFAX NS
Stops: 0 Arrival: 29Jan16

Air
AIR CANADA
From: HALIFAX NS
To: GANDER NF
Stops: 0 Arrival: 30Jan16

Saturday, January 30, 2016

Air
AIR CANADA
From: OTTAWA ON
To: MONTREAL-TRUDEAU
Stops: 0 Arrival: 30Jan16
To: GNL-TRANSPORTATION & WORKS  
P.O. BOX 8700  
ST. JOHNS, NL  
ST JOHN'S NL  
CA A1B 4J6

To: HALIFAX NS  
Stops: 0  
Arrival: 30Jan16

Flight: 8982  
L CLASS  
08:30 AM  
Equipment: CRA  
10:54 AM

Mile(s) Flown: 492

Flight: 8862  
L CLASS  
11:40 AM  
Equipment: CRJ JET  
01:31 PM

Mile(s) Flown: 507

Cost:

<table>
<thead>
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<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>TKT- AC1612477324 E-TKT</td>
<td>342.00</td>
</tr>
<tr>
<td>HST</td>
<td>53.20</td>
</tr>
<tr>
<td>Tax</td>
<td>67.25</td>
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<tr>
<td>Ticket Total</td>
<td>462.45</td>
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</table>

Service Fee HAR*61011-1612477324

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>HST</td>
<td>2.40</td>
</tr>
<tr>
<td>Service Fee Total</td>
<td>20.89</td>
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</table>

Total:

<table>
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<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Grand Total</td>
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<td>Less Credit Card Payments</td>
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<td>Total GST/HST</td>
<td>55.60</td>
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<tr>
<td>Total Balance Due</td>
<td>0.00</td>
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</tbody>
</table>

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

For
MR ALLAN HAWKINS
AC

Wednesday, January 27, 2016

Air

AIR CANADA
From: ST JOHNS NF
To: HALIFAX NS
Stops: 0 Arrival: 27Jan16
Flight: 8995 ECONOMY CLASS
02:05 PM Equipment: CRA
03:20 PM
Mile(s) Flown: 548

Air

AIR CANADA
From: HALIFAX NS
To: OTTAWA ON
Stops: 0 Arrival: 27Jan16
Flight: 167 ECONOMY CLASS
04:10 PM Equipment: E90
05:14 PM
Mile(s) Flown: 593
To: GNL-TRANSPORTATION & WORKS  
P.O. BOX 8700  
ST. JOHNS, NL  
ST JOHNS NL  
CA A1B 4J6  

Wednesday, January 27, 2016

Hotel
Check In: 27Jan2016  
Check Out: 29Jan2016  
OTTAWA ON  
MARRIOTT  
OTTAWA MARRIOTT HOTEL  
OTTAWA MARRIOTT HOTEL  
100 KENT STREET  
OTTAWA ON  
K1P5R7  
Tel: 6132381122  
Confirmation: 32CZVN5L  

Friday, January 29, 2016

Air  
AIR CANADA  
Flight: 118  
From: OTTAWA ON  
To: HALIFAX NS  
Stops: 0  
Arrival: 29Jan16  
Flight: 8860  
From: HALIFAX NS  
To: GANDER NF  
Stops: 0  
Arrival: 30Jan16  

Saturday, January 30, 2016

Air  
AIR CANADA  
Flight: 7558  
From: OTTAWA ON  
To: MONTREAL-TRUDEAU  
Stops: 0  
Arrival: 30Jan16
To: GNL-TRANSPORTATION & WORKS
P.O. BOX 8700
ST. JOHNS, NL
ST JOHNS NL
CA A1B 4J6

From: MONTREAL-TRUDEAU
To: HALIFAX NS
Stops: 0
Arrival: 30Jan16

Flight: 8982  L CLASS
08:30 AM  Equipment: CRA
10:54 AM

Mile(s) Flown: 492

Cost:
PAY FOR SEATS 60.00
HST: 7.60
Ticket Total: 67.60

Total:
Grand Total: 67.60
Less Credit Card Payments: 67.60
Total GST/HST: 7.60
Credit / Balance Due To This Invoice: 0.00
Total Previous Payments: 483.34
Total Charges Previous Invoices: 483.34
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.
For MR ALLAN HAWKINS  
AC s. 40 (1) 

Wednesday, January 27, 2016

Air

AIR CANADA  
From: ST JOHNS NF  
To: HALIFAX NS  
Stops: 0  
Arrival: 27Jan16

Flight: 8995  
ECONOMY CLASS  
02:05 PM  
Equipment: CRA

Mile(s) Flown: 548

Air

AIR CANADA  
From: HALIFAX NS  
To: OTTAWA ON  
Stops: 0  
Arrival: 27Jan16

Flight: 167  
ECONOMY CLASS  
04:10 PM  
Equipment: E90

Mile(s) Flown: 593

Saturday, January 30, 2016

Air

AIR CANADA  
From: OTTAWA ON  
To: MONTREAL-TRUDEAU  
Stops: 0  
Arrival: 30Jan16

Flight: 7558  
CLASS  
06:30 AM  
Equipment: DH4

Mile(s) Flown: 103
# INVOICE

**Saturday, January 30, 2016**

**Air**

<table>
<thead>
<tr>
<th>Flight: 8982</th>
<th>L CLASS</th>
<th>08:30 AM</th>
<th>Equipment: CRA</th>
<th>10:54 AM</th>
</tr>
</thead>
<tbody>
<tr>
<td>From: MONTREAL-TRUDEAU</td>
<td>To: HALIFAX NS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stops: 0</td>
<td>Arrival: 30Jan16</td>
<td></td>
<td></td>
<td></td>
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</table>

**Air**

<table>
<thead>
<tr>
<th>Flight: 8862</th>
<th>L CLASS</th>
<th>11:40 AM</th>
<th>Equipment: CRJ JET</th>
<th>01:31 PM</th>
</tr>
</thead>
<tbody>
<tr>
<td>From: HALIFAX NS</td>
<td>To: GANDER NF</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stops: 0</td>
<td>Arrival: 30Jan16</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Cost:**

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>Service Fee HAR*61011-1612487863</td>
<td>18.49</td>
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<tr>
<td>PAY FOR SEATS</td>
<td>10.00</td>
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<td><strong>Total</strong></td>
<td><strong>156.49</strong></td>
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</tbody>
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**Total Balance Due:** 0.00
**Trip on Jan 27, 2016**

**Locater:** VX76LK  
**Date:** Jan 18, 2016

**Traveler:** MR ALLAN HAWKINS  
**Agent:** MT

---

### Wednesday, January 27, 2016

#### Flight Air Canada 8995

- **DEPARTURE:** YYT - St Johns, Newfoundland  
  **DEPARTURE Time:** 2:05 PM, Jan 27, 2016  
  **ARRIVAL:** YHZ - Halifax, Nova Scotia Canada  
  **ARRIVAL Time:** 3:20 PM, Jan 27, 2016

<table>
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<tbody>
<tr>
<td>Class</td>
<td>Coach Class - A</td>
</tr>
<tr>
<td>Duration</td>
<td>01:45 (Non-stop)</td>
</tr>
<tr>
<td>Equipment</td>
<td>CRA</td>
</tr>
<tr>
<td>Meal Service</td>
<td>None</td>
</tr>
<tr>
<td>Frequent Flyer</td>
<td>OPERATED BY AIR CANADA EXPRESS - JAZZ</td>
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<tr>
<td>Notes</td>
<td>SEAT 15A</td>
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#### Flight Air Canada 167

- **DEPARTURE:** YHZ - Halifax, Nova Scotia Canada  
  **DEPARTURE Time:** 4:10 PM, Jan 27, 2016  
  **ARRIVAL:** YOW - Ottawa, Canada  
  **ARRIVAL Time:** 5:14 PM, Jan 27, 2016

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<tr>
<td>Class</td>
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<tr>
<td>Duration</td>
<td>02:04 (Non-stop)</td>
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<tr>
<td>Equipment</td>
<td>Embraer EMB E90</td>
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<tr>
<td>Meal Service</td>
<td>Food For Purchase</td>
</tr>
<tr>
<td>Frequent Flyer</td>
<td>SEAT 20F</td>
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<td>Notes</td>
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### Hotel OTTAWA MARRIOTT HOTEL

- **LOCATION:** 100 KENT STREET  
  **CONTACT:** Tel RT-CAD2020-

<table>
<thead>
<tr>
<th>Reserved For</th>
<th>MR ALLAN HAWKINS</th>
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<tbody>
<tr>
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<tr>
<td>Check-In</td>
<td>Jan 27, 2016</td>
</tr>
<tr>
<td>Check-Out</td>
<td>Jan 30, 2016</td>
</tr>
<tr>
<td>Number of Rooms</td>
<td>1</td>
</tr>
<tr>
<td>Rate</td>
<td>202.00/night</td>
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</tbody>
</table>
| Notes        | CANCEL HOTEL RESERVATION 24 HOURS PRIOR TO DAY OF ARRIVAL TO AVOID ROOM CHARGES. PLEASE OBTAIN CANCELLATION NUMBER.  
RATE-CAD202.00 1 |
<table>
<thead>
<tr>
<th>Flight Air Canada 7558</th>
<th>Flight Air Canada 8982</th>
<th>Flight Air Canada 8862</th>
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</thead>
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<td><strong>DEPARTURE</strong></td>
<td><strong>DEPARTURE</strong></td>
</tr>
<tr>
<td>YOW - Ottawa, Canada</td>
<td>YUL - Montreal Trudeau</td>
<td>YHZ - Halifax, Nova Scotia Canada</td>
</tr>
<tr>
<td><strong>ARRIVAL</strong></td>
<td><strong>ARRIVAL</strong></td>
<td><strong>ARRIVAL</strong></td>
</tr>
<tr>
<td>YUL - Montreal Trudeau</td>
<td>YHZ - Halifax, Nova Scotia Canada</td>
<td>YQX - Gander Municipal</td>
</tr>
<tr>
<td><strong>Status</strong></td>
<td><strong>Status</strong></td>
<td><strong>Status</strong></td>
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<tr>
<td><strong>Class</strong></td>
<td><strong>Class</strong></td>
<td><strong>Class</strong></td>
</tr>
<tr>
<td>Coach Class - L</td>
<td>Coach Class - L</td>
<td>Coach Class - L</td>
</tr>
<tr>
<td><strong>Duration</strong></td>
<td><strong>Duration</strong></td>
<td><strong>Duration</strong></td>
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<td>01:24 (Non-stop)</td>
<td>01:21 (Non-stop)</td>
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<tr>
<td><strong>Equipment</strong></td>
<td><strong>Equipment</strong></td>
<td><strong>Equipment</strong></td>
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<tr>
<td>DH4</td>
<td>CRA</td>
<td>Canadair Jet</td>
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<tr>
<td><strong>Meal Service</strong></td>
<td><strong>Meal Service</strong></td>
<td><strong>Meal Service</strong></td>
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<tr>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td><strong>Frequent Flyer</strong></td>
<td><strong>Frequent Flyer</strong></td>
<td><strong>Frequent Flyer</strong></td>
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<tr>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td><strong>Notes</strong></td>
<td><strong>Notes</strong></td>
<td><strong>Notes</strong></td>
</tr>
<tr>
<td>OPERATED BY AIR CANADA EXPRESS - SKY REGIONAL</td>
<td>OPERATED BY AIR CANADA EXPRESS - JAZZ</td>
<td>OPERATED BY AIR CANADA EXPRESS - JAZZ</td>
</tr>
</tbody>
</table>

**Invoice / Ticket / Date**

<table>
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<tr>
<th>Name</th>
<th>Invoice / Ticket / Date</th>
<th>Base</th>
<th>Tax 1</th>
<th>Tax 2</th>
<th>Tax 3</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>HAWKINS/ALLAN</td>
<td>01415124-878-63-864/13JAN16</td>
<td>CAD 377.00</td>
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<td></td>
<td></td>
<td>502.00</td>
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</table>

**Form of Payment:**

**GENERAL INFORMATION**

EMERGENCIES/ENROUTE CHANGES AFTER BUSINESS HOURS: 1-866-464-4400 TOLLFREE. OUTSIDE NORTH AMERICA CALL COLLECT 314-513-0807. AN ADDITIONAL FEE FOR SERVICE WILL APPLY TO OUR ATTENTION THE SAME DAY THE TICKET IS ISSUED.

ANY RESPONSIBILITY FOR PENALTY FEES WILL REST WITH THE CLIENT.

CWT STRONGLY RECOMMENDS THAT YOU PURCHASE EMERGENCY TRAVEL AND MEDICAL INSURANCE FOR YOUR PROTECTION AGAINST HIGH COSTS OF AN UNEXPECTED TRAVEL OR MEDICAL EMERGENCY DURING YOUR TRIP. PLEASE NOTE UNLESS IT IS NOTED OTHERWISE ON THIS ITINERARY YOU DECLINED TRAVEL INSURANCE COVERAGE AND THEREFORE IS NOT INCLUDED WITH YOUR TRAVEL ARRANGEMENTS.

RECOMMENDED CHECK-IN FOR DOMESTIC FLIGHTS-MINIMUM 1 HOUR PRIOR.
SEAT(S) CONFIRMED BOARDING PASSES AT CHECK-IN.
YOUR FREQUENT TRAVELLER NUMBER HAS BEEN APPLIED RECONFIRM AT CHECK-IN.
THE MINIMUM CHANGE FEE IS 50.00CA
TICKET HAS NO VALUE IF NOT REBOOKED/CANCELLED PRIOR TO SCHEDULED DEPARTURE.
YOUR TICKET IS 100 PERCENT NONREFUNDABLE IF CANCELLED.
SOME CHANGES ARE ALLOWED UNDER RESTRICTIVE CONDITIONS FOR A CHANGE FEE AND/OR POSSIBLE INCREASE IN FARE.
VALID ONLY ON TICKETED AIRLINE
TICKET IS NONREFUNDABLE-UNDER CERTAIN CONDITIONS VALUE MAY BE APPLIED FOR FUTURE TRAVEL
**** ATTENTION E-TICKET TRAVELLERS ****
E-TICKET TRAVELLER WILL BE REQUIRED TO SHOW GOVERNMENT ISSUED PHOTO.
I.D. OR PURCHASING CREDIT CARD
E-TICKETS WILL NOT BE ACCEPTED BY OTHER CARRIERS.

THANK YOU FOR CHOOSING THE SERVICES OF HARVEYS TRAVEL
** PLEASE REVIEW THESE RESERVATIONS THOROUGHLY
** IF A DISCREPANCY EXISTS CALL OUR OFFICE IMMEDIATELY

VIEW WWW.CARLSONWAGONLIT.CA FOR GREAT VACATION IDEAS

BY MAKING THIS RESERVATION WITH CWT YOU ARE ACKNOWLEDGING THE DATA PRIVACY POLICY AN CONSENT TO THE DATA PROTECTION STATEMENT BOTH FOUND AT WWW.CWTCORPORATE.CA/PRIVACY.HTML
TO WITHDRAW YOUR CONSENT PLEASE CONTACT YOUR CONSULTANT.

Agency Information
Carlson Wagonlit/Harvev's Travel
92 Elizabeth Ave
St. John's, NF
A1A 4W7
Reservations: 877 726-1881
Facsmile: 709-726-0317

Consultant: [REDACTED]

<table>
<thead>
<tr>
<th>Form of Payment</th>
<th>Fare Total</th>
<th>Service Fee Amount</th>
<th>Invoice Total Amount</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>502.00</td>
<td>20.89</td>
<td>522.89</td>
</tr>
</tbody>
</table>

This above service fee will be applied to your credit card.
Note: The above fare quote is not guaranteed until time of ticket issuance.
**Electronic Expense Receipt**

**Carlson Wagonlit Travel**

**Apollo Reservation Number:** VX76LK
**Traveler:** HAWKINS, ALLAN MR
**Total Agency Charges to Date:** 522.89 CAD

<table>
<thead>
<tr>
<th>Date</th>
<th>Form of Payment</th>
<th>Document</th>
<th>Original Airfare</th>
<th>Original Taxes</th>
<th>Original Total Airfare</th>
<th>Amount Charged</th>
<th>Total Amount Charged</th>
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<tr>
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<td>eTicket 0141612477324</td>
<td>342.00</td>
<td>120.45</td>
<td>462.45</td>
<td>462.45</td>
<td>462.45 CAD</td>
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<tr>
<td>13 Jan 2016</td>
<td>40 (1)</td>
<td>eTicket 0141612458786 - 864</td>
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<td>125.00</td>
<td>502.00</td>
<td>39.55</td>
<td>60.44 CAD</td>
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</table>

**Validating Center:** Air Canada

**Flight - Air Canada (AC) - 8995**
**Flight Operated By:** Air Canada Express - Jazz
**Air Canada Confirmation Number:** PNV3A
**Depart:** 2:05 PM - St John Arpt (YYT)
**Arrive:** 3:20 PM - Halifax Intl (YHZ)
**Flight:** 8995 - Non-stop - Economy (A)
**Status:** Confirmed (HK)

**Flight - Air Canada (AC) - 167**
**Air Canada Confirmation Number:** PNV3A
**Depart:** 4:10 PM - Halifax Intl (YHZ)
**Arrive:** 5:14 PM - Ottawa McDonald Cartier Intl (YOW)
**Flight:** 167 - Non-stop - Economy (A)
**Status:** Confirmed (HK)

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

1/28/2016
### Hotel - Ottawa Marriott Hole - Ottawa
**Marriott Hotels, Resorts And Suites**
Ottawa Marriot Hotel
Ottawa Marriott Hotel
100 Kent Street
Ottawa On
K1P5R7
1 613-2341122

**Electronic Expense Receipt**

**Confirmation Number:** RT-CAD202.00-GOV
**Check In:** Wednesday, January 27, 2016
**Check Out:** Saturday, January 30, 2016
**Rate:** CAD202.00
**Confirmation Number:** 32CZVN5L
**Status:** Status Confirmed Passive MK (MK)

### Flight - Air Canada (AC) - 7558
**Flight Operated By:** Air Canada Express - Sky Regional
**Air Canada Confirmation Number:** PNVISA
**Depart:** 6:30 AM
**Arrive:** 7:12 AM
**Flight 7558**
**Class of Service:** Economy (L)
**Depart:** Ottawa McDonald Cartier Intl (YOW)
**Arrive:** Pierre Elliott Trudeau Intl Arpt (YUL)
**Status:** Confirmed (HK)

### Flight - Air Canada (AC) - 8982
**Flight Operated By:** Air Canada Express - Jazz
**Air Canada Confirmation Number:** PNVISA
**Depart:** 8:30 AM
**Arrive:** 10:54 AM
**Flight 8982**
**Class of Service:** Economy (L)
**Depart:** Pierre Elliott Trudeau Intl Arpt (YUL)
**Arrive:** Halifax Intl (YHZ)
**Status:** Confirmed (HK)

### Flight - Air Canada (AC) - 8862
**Flight Operated By:** Air Canada Express - Jazz
**Air Canada Confirmation Number:** PNVISA
**Depart:** 11:40 AM
**Arrive:** 1:31 PM
**Flight 8862**
**Class of Service:** Economy (L)
**Depart:** Halifax Intl (YHZ)
**Arrive:** Gander International (YQX)
**Status:** Confirmed (HK)

### Tour - Tour
**Tour (ZZ)**
**Location:** St Johns (YYT)
**Departure Date:** Tuesday, May 31, 2016
**Number of Persons:** 1
**Status:** Confirmed (HK)

---

**Electronic Expense Receipt available until Wednesday, November 30, 2016**

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CONFIRMATION STATEMENT OF ACCOUNT

For
MR ALLAN HAWKINS
AC

Itinerary
Wednesday, January 27, 2016
Air
AIR CANADA
Flight: 8995 ECONOMY CLASS
From: ST JOHNS NF
To: HALIFAX NS
Stops: 0 Arrival: 27Jan16
Equipment: CRA
02:05 PM
03:20 PM
Mile(s) Flown: 548

Air
AIR CANADA
Flight: 167 ECONOMY CLASS
From: HALIFAX NS
To: OTTAWA ON
Stops: 0 Arrival: 27Jan16
Equipment: E90
04:10 PM
05:14 PM
Mile(s) Flown: 593

Friday, January 29, 2016
Air
AIR CANADA
Flight: 118 K CLASS
From: OTTAWA ON
To: HALIFAX NS
Stops: 0 Arrival: 29Jan16
Equipment: E90
06:10 PM
08:52 PM
Mile(s) Flown: 593
CONFIRMATION
STATEMENT OF ACCOUNT

Friday, January 29, 2016

Air

AIR CANADA
From: HALIFAX NS
To: GANDER NF
Stops: 0 Arrival: 30Jan16

AIR CANADA E

Flight: 8860 K CLASS
10:55 PM Equipment: CRJ JET
12:46 AM

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
<th>Tax</th>
<th>Total Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIR TICKETS</td>
<td>342.00</td>
<td>120.45</td>
<td>462.45</td>
</tr>
<tr>
<td>(Includes 53.20 HST)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service Fee - HAR*61011-1612477324</td>
<td>18.49</td>
<td>2.40</td>
<td>20.89</td>
</tr>
<tr>
<td>(Includes 2.40 HST)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service Fee - HAR*61011-1612487863</td>
<td>18.49</td>
<td>2.40</td>
<td>20.89</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Total Charges:</td>
<td>504.23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less Previous Payments:</td>
<td>707.43</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Balance Due:</td>
<td>-203.20</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL
2132 HAWKINS/ALLAN

Room / Chambre: Name / Nom: Rate / Tarif: Date / Date: Time / Heure:

NKNE

Type

18

254.00 01/30/16 12:00 ACCT# GROUP

Room Clerk: Receptioniste: Address: Payment: Reference:

<table>
<thead>
<tr>
<th>DATE</th>
<th>REFERENCE / RÉFÉRENCE</th>
<th>CHARGES / FAIS</th>
<th>CREDITS / CRÉDITS</th>
<th>BALANCE DUE / SOLDE</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/27</td>
<td>ROOM 2132, 1</td>
<td>202.00</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>01/27</td>
<td>ROOM HST 2132, 1</td>
<td>26.26</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>01/27</td>
<td>DM FEE 2132, 1</td>
<td>6.06</td>
<td>J</td>
<td></td>
</tr>
<tr>
<td>01/27</td>
<td>DFM HST 2132, 1</td>
<td>0.79</td>
<td>L</td>
<td></td>
</tr>
<tr>
<td>01/28</td>
<td>ROOM 2132, 1</td>
<td>202.00</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>01/28</td>
<td>ROOM HST 2132, 1</td>
<td>26.26</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>01/28</td>
<td>DM FEE 2132, 1</td>
<td>6.06</td>
<td>J</td>
<td></td>
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<tr>
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<td>DFM HST 2132, 1</td>
<td>0.79</td>
<td>L</td>
<td></td>
</tr>
<tr>
<td>01/29</td>
<td>ROOM 2132, 1</td>
<td>254.00</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>01/29</td>
<td>ROOM HST 2132, 1</td>
<td>33.02</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>01/29</td>
<td>DM FEE 2132, 1</td>
<td>7.62</td>
<td>J</td>
<td></td>
</tr>
<tr>
<td>01/29</td>
<td>DFM HST 2132, 1</td>
<td>0.99</td>
<td>L</td>
<td></td>
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<td>01/30</td>
<td>VS CARD</td>
<td></td>
<td></td>
<td>765.85</td>
</tr>
</tbody>
</table>

TO BE SETTLED TO: VISA  CURRENT BALANCE .00

THANK YOU FOR CHOOSING MARRIOTT! TO EXPEDITE YOUR CHECK-OUT, PLEASE CALL THE FRONT DESK, OR DIAL *84 AND AFTER THE BEEP, PLEASE DISCONNECT THE CALL.

------------- DESCRIPTION -------------

HST # 869427344RT0003 ---------

TAXED AMOUNT TAX 88.11

HST (ALMNOP) NET CHARGES TAX 677.74 88.11 765.85

CREDITS .00

FOLIO

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:

MTHORNHILL@HARVEYSTRAVEL-CWT.COM

SEE "INTERNET PRIVACY STATEMENT" ON MARRIOTT.COM

H.S.T.# 86942 7344 RT0003

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in this reference column above was charged to the credit card indicated opposite the entry.

This credit card company will be in the usual manner(s) for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are subject to the Act and payment is not made within 25 days after checkout, you will owe us interest from the checkout date on unpaid balances at the rate of 1.5% per month (annual rate 18%) or the maximum allowed by law, plus the reasonable cost of collection, including attorney's fees.

Your signature: ____________________________

To secure your next stay, go to marriott.com / Pour réserver votre prochain séjour, allez a marriott.com
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.lhg.com/reviews. We look forward to welcoming you back soon.

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Charges</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>01-30-16</td>
<td>Best Available Rate</td>
<td>124.99</td>
<td></td>
</tr>
<tr>
<td>01-30-16</td>
<td>Market Levy - 2%</td>
<td>2.50</td>
<td></td>
</tr>
<tr>
<td>01-30-16</td>
<td>HST - 15%</td>
<td>19.12</td>
<td></td>
</tr>
<tr>
<td>01-30-16</td>
<td>Visa</td>
<td></td>
<td>146.61</td>
</tr>
</tbody>
</table>

Total: 146.61
Balance: 0.00

Guest Signature:
I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.
Table 1

Guest Num: 1

<table>
<thead>
<tr>
<th>Item</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 CUP OF SOUP</td>
<td>5.95</td>
</tr>
<tr>
<td>1 AS APP</td>
<td>0.00</td>
</tr>
<tr>
<td>1 SAUSAGE &amp; PEPPE</td>
<td>18.95</td>
</tr>
</tbody>
</table>

SubTotal: 24.90
Sales Tax: 3.74

Please pay this amount:
Total: 28.64

FOR ROOM CHARGES ONLY!

Gratuity

Total Charge

Room Number

Print Name

SIGNATURE
Amount: $31.19
Tip: $5.94
Total: CAD$ 37.13

Date: Jan 27, 2016
From: Airport
To: Kent marielette
Cap No: 1007

H.S.T included in meter fare
Le prix inclus la TVH.

RECEIPT FOR CAB FARE

CAPITAL TAXI
Merchant ID: [redacted]
Driver ID: [redacted]
Record Num.: [redacted]

Sale

Application Label: Visa Credit
AID: A0000000031010
VISA Entry Method: Chip

Total: CAD$ 16.50
2015-01-29 16:18:18
Resp Code: 00

Inv #: 001783
Approval Code: [redacted]
Batch #: [redacted]

CUSTOMER SERVICE 1-888-443-2012
INQUIRIES@BLUELINE.COM
FAX 519-452-7811

RECEIPT FOR CAB FARE

Job #

Amount 10 - Date 29/1/16
From
To

Total: CAD$ 16.50
2015-01-29 16:18:18
Resp Code: 00

Inv #: 001783
Approval Code: [redacted]
Batch #: [redacted]

CUSTOMER SERVICE 1-888-443-2012
INQUIRIES@BLUELINE.COM
FAX 519-452-7811

RECEIPT FOR CAB FARE

Job #

Amount 10 - Date 29/1/16
From
To

Total: CAD$ 16.50
2015-01-29 16:18:18
Resp Code: 00

Inv #: 001783
Approval Code: [redacted]
Batch #: [redacted]

CUSTOMER SERVICE 1-888-443-2012
INQUIRIES@BLUELINE.COM
FAX 519-452-7811

RECEIPT FOR CAB FARE

Job #

Amount 10 - Date 29/1/16
From
To

Total: CAD$ 16.50
2015-01-29 16:18:18
Resp Code: 00

Inv #: 001783
Approval Code: [redacted]
Batch #: [redacted]
<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHARGE</td>
<td>$40.00</td>
</tr>
<tr>
<td>TOTAL</td>
<td>$40.00</td>
</tr>
<tr>
<td>DRIVING ADDRESS</td>
<td>412231</td>
</tr>
</tbody>
</table>

**PASSENGER COPY**

CUSTOMER SERVICE: 1-800-487-2002
drivingdirections.com

BLUELINE
**OFFICIAL JOURNEY AUTHORIZATION**

**SECTION 1: CLAIMANT INFORMATION**

**EMPLOYEE NAME:** Ai Hawkins

**FISCAL YEAR:** 2015/2016

**ADDRESS:**

**POSTAL CODE:**

**DEPARTMENT:** Transportation and Works

**TYPE OF IMPREST (IF APPLICABLE):**

- [ ] TRAVEL ADVANCE
- [x] STANDING TRAVEL ADVANCE

**SUPPLIER NUMBER:**

**SECTION 2: TRAVEL DETAILS**

**FROM:** St. John's

**FROM DATE:** January 27th, 2016

**TO:** Ottawa

**TO DATE:** January 29th, 2016

**PURPOSE OF TRIP:** Council of Ministers Responsible for Transportation and Highway Safety Meetings

**PAYMENT METHOD:**

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

**MODE OF TRAVEL:**

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

**TRAVEL AGENCY**

**ORDER NUMBER**

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

<table>
<thead>
<tr>
<th>AMOUNT</th>
<th>ACCOUNTING DISTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,400.00</td>
<td>01 0000</td>
</tr>
</tbody>
</table>

**EMPLOYEE'S SIGNATURE:**

**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:**

**PREMIER'S OFFICE**

**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
- [x] NO

**TOTAL ANTICIPATED EXPENSES: [ADVANCE REQUIRED]**

<table>
<thead>
<tr>
<th>AMOUNT</th>
<th>ACCOUNTING DISTRIBUTION</th>
<th>DEPARTMENTAL FINANCE DIVISION USE ONLY:</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 0000</td>
<td></td>
<td>DCS148</td>
</tr>
</tbody>
</table>
Government of Newfoundland and Labrador

Expense Claim: TCMS972585

Name: Hawkins, Hon Allan
Expense Date: 06-Jul-16 - 06-Jul-16
Cost Center: 3001
Purpose: To attend Atlantic Ministers' of Transportation meetings in PEI
Report Submit Date: 06-Jul-16
Claim Authorization: Journey Authorization
Fiscal Year: 2016-17
Acct Distribution: 01-3001-110-1700-0369-000000
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>06-Jul-16</td>
<td>Airfare 01-3001-110-1700-0367-000000</td>
<td>Location From: St John's; Location To: Halifax; Ticket Number: AC9565259893; Receipt Date: 29-Jun-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>578.56</td>
<td>81.00</td>
<td>659.56</td>
</tr>
<tr>
<td>06-Jul-16</td>
<td>Travel Agency Fees 01-3001-110-1700-0369-000000</td>
<td>Receipt Date: 29-Jun-16</td>
<td>18.32</td>
<td>2.57</td>
<td>20.89</td>
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<tr>
<td>Total</td>
<td></td>
<td></td>
<td>596.88</td>
<td>83.57</td>
<td>680.45</td>
</tr>
</tbody>
</table>

This trip was not taken.
*Flight canceled and credit issued.*
Amount used for future travel to Edmonton.

ref: TCMS979548.
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: $680.45

Claimant's Signature: [Signature]

Date: July 7, 2016

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

Approved and Certified By: [Signature]

Date: July 7, 2016

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: [ ]
HARVEYS TRAVEL LTD.
92 ELIZABETH AVENUE
ST JOHN'S NL
A1A 1W7

GST Reg#: R 102293552
Branch: 661011

To: GNL-TRANSPORTATION WORKS
TW MINISTERS OF
TW CORPORATE SE

INVOICE

For
HON ALLAN HAWKINS

Wednesday, July 6, 2016

Air

AIR CANADA
From: ST JOHNS NF
To: HALIFAX NS
Stops: 0 Arrival: 06Jul16
Seat(s): 08C

Flight: 8993 M CLASS
10:35 AM Equipment: DH4
12:14 PM

Car

ENTERPRISE
Pickup 06Jul16
Return 08Jul16

1 SFAR

Pickup City: HALIFAX NS
Dropoff City: HALIFAX NS

Rate Plan: 2 Day(s)
Daily Rate: CAD
Confirmation: 1908831925COUNT
Corporate Id: XVC9310
Tel: 9028734700

Friday, July 8, 2016
To: GNL-TRANSPORTATION WORKS  
TW MINISTERS OF  
TW CORPORATE SE  

Invoice Number: 12890  
Date: June 29, 2016  
Page: 2/2  
Our Reference: GWT0112879C SLKBJU  

Friday, July 8, 2016  

Air  

Flight: 8992  
V CLASS  

Equipment: DH4  

Air Canada  

From: HALIFAX NS  
To: ST JOHNS NF  

Stops: 0  
Arrival: 08Jul16  
Seat(s): 11C  

Air Canada E  

Cost:  

Service Fee HAR*61011-9565259893  

STJOHNS  

S. 40 (1)  

HST: 18.49  

Service Fee Total: 20.89  

TKT- AC9565259893 E-TKT  

513.99  

HST: 76.32  

Tax: 69.25  

Ticket Total: 659.56  

Total:  

Grand Total: 680.45  

Less Credit Card Payments: 680.45  

Total GST/HST: 78.72  

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 TRANSPORTATION WORKS  
U87 TW MINISTERS OFFICE  
U89 TW CORPORATE SERVICES
### Official Journey Authorization

**Newfoundland Labrador**

**Fiscal Year**
- 2016/17

**Section 1: Claimant Information**
- **Employee Name:** Allan Hawkins
- **Department:** Transportation & Works
- **Position Title:** Minister
- **Address:** (Redacted)
- **Postal Code:** (Redacted)
- **Supervisor Number:** (Redacted)

**Type of Imprest**
- **Travel Advance**
- **Standing Travel Advance**

**Section 2: Travel Details**
- **From:** St. John's
- **To:** Summerside, PEI
- **From Date:** July 6, 2016
- **To Date:** July 8, 2016

**Purpose of Trip:**
To attend Atlantic Ministers’ of Transportation & Works meetings in PEI

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

**Mode of Travel**
- **Air**
- **Personal Vehicle**
- **Government Vehicle**
- **Rental Car**
- **Government Vehicle**

**Travel Agency**

**Order Number**

**The Estimated Total Trip Cost Must Be Encumbered Regardless of Imprest**

<table>
<thead>
<tr>
<th>Amount</th>
<th>Accounting Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,400.00</td>
<td>01 0000 0000</td>
</tr>
</tbody>
</table>

**Employee's Signature**

<table>
<thead>
<tr>
<th>Date</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 6/16</td>
<td>(Signed)</td>
</tr>
</tbody>
</table>

**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**

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Signed)</td>
<td>Jul 5 - 2016</td>
</tr>
</tbody>
</table>

**Minister**

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Signed)</td>
<td></td>
</tr>
</tbody>
</table>

**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)**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taxi, Limousine, or Bus Fare to and from departure points</td>
<td>$</td>
</tr>
<tr>
<td>Transportation Cost (if travel order is not issued)</td>
<td>$</td>
</tr>
<tr>
<td>Accommodations for ___ Nights (Hotel/Private)</td>
<td>$</td>
</tr>
<tr>
<td>Meals for ___ Days (at approved rates)</td>
<td>$</td>
</tr>
<tr>
<td>Other</td>
<td>$</td>
</tr>
<tr>
<td>Cash Advance Required</td>
<td>YES NO</td>
</tr>
<tr>
<td>Total Anticipated Expenses (Advance Required)</td>
<td>$ 0.00</td>
</tr>
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</table>

**Amount**

<table>
<thead>
<tr>
<th>01</th>
<th>Accounting Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**Departmental Finance Division Use Only**

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Name: Hawkins, Hon Allan
Expense Date: 29-Jan-16 - 29-Jan-16
Cost Center: 3001
Purpose: Registration for Premier's Luncheon at the Northern Lights Conference, Ottawa
Report Submit Date: 20-Jan-16
Claim Authorization: Journey Authorization
Fiscal Year: 2015-16
Acct Distribution: 01-3001-110-1700-0369-000000
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>29-Jan-16</td>
<td>Conference/Reg. Fees</td>
<td>Receipt Date: 20-Jan-16; Description: Registration for Premier's Keynote Speech at Northern Lights Conference Luncheon, Ottawa</td>
<td>100.89</td>
<td>12.11</td>
<td>113.00</td>
</tr>
</tbody>
</table>

Total 100.89 12.11 113.00
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.
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* 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: $113.00

Claimant's Signature: [Signature] Date: Jan 20, 2016

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

Approved and Certified By: [Signature] Date: Jan 20, 2016

Office of the Comptroller General Purposes Only:
Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: Date: 
Government of Newfoundland and Labrador
Expense Claim: TCMS979548

Name: Hawkins, Hon Allan
Expense Date: 24-Aug-16 - 08-Sep-16
Cost Center: 3001
Purpose: To attend Federal Infrastructure meetings with Hon. Amarjeet Sohi at Edmonton
Report Submit Date: 12-Sep-16
Claim Authorization: Journey Authorization
Fiscal Year: 2016-17
Acct Distribution: 01-3001-110-1700-0369-000000

Receipt-Based Expenses

<table>
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<tr>
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<th>Expense Type</th>
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<th>Tax Amount</th>
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<tbody>
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<td>24-Aug-16</td>
<td>Airfare</td>
<td>Location From: Gander; Location To: Edmonton; Ticket Number: 0149565668291, Receipt Date: 24-Aug-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
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<td>105.35</td>
<td>857.87</td>
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<td>Receipt Date: 24-Aug-16</td>
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<td>2.61</td>
<td>21.26</td>
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<td>72.60</td>
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<td>Accommodations</td>
<td>Receipt Date: 07-Sep-16</td>
<td>443.18</td>
<td>62.05</td>
<td>505.23</td>
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<tr>
<td>07-Sep-16</td>
<td>Taxi</td>
<td>Receipt Date: 07-Sep-16</td>
<td>51.14</td>
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<td>58.30</td>
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</tbody>
</table>

Total 1,329.17 186.09 1,515.26

Per Diem Expenses

<table>
<thead>
<tr>
<th>Date</th>
<th>Expense Type</th>
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<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>05-Sep-16 to</td>
<td>Per Diem (Canada)</td>
<td></td>
<td>1</td>
<td>55.00</td>
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<td>01-3001-110-1700-0364-000000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>05-Sep-16 to</td>
<td>Incidental Expenses</td>
<td></td>
<td>3</td>
<td>5.00</td>
<td>13.16</td>
<td>1.84</td>
<td>15.00</td>
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<tr>
<td>07-Sep-16</td>
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<td></td>
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</tr>
<tr>
<td>06-Sep-16 to</td>
<td>Lunch (Canada)</td>
<td></td>
<td>1</td>
<td>16.50</td>
<td>14.47</td>
<td>2.03</td>
<td>16.50</td>
</tr>
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<td>06-Sep-16</td>
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</tr>
<tr>
<td>06-Sep-16 to</td>
<td>Breakfast (Canada)</td>
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<td>11.00</td>
<td>28.95</td>
<td>4.05</td>
<td>33.00</td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<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>
<td>------------</td>
<td>--------------------</td>
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<td>------</td>
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<td>-----------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>07-Sep-16</td>
<td>Dinner (Canada)</td>
<td></td>
<td>1</td>
<td>27.50</td>
<td>24.12</td>
<td>3.38</td>
<td>27.50</td>
</tr>
<tr>
<td>07-Sep-16</td>
<td>01-3001-110-1700-0364-000000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08-Sep-16</td>
<td>Lunch (Canada)</td>
<td></td>
<td>1</td>
<td>16.50</td>
<td>14.47</td>
<td>2.03</td>
<td>16.50</td>
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<tr>
<td>08-Sep-16</td>
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<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td>143.42</td>
<td>20.08</td>
<td>163.50</td>
</tr>
</tbody>
</table>

**Mileage Expenses**

<table>
<thead>
<tr>
<th>Date</th>
<th>Expense Type</th>
<th>Expense Details</th>
<th>Trip Distance</th>
<th>Mileage Rate</th>
<th>Net of Tax Amount</th>
<th>Tax Amount</th>
<th>Reimbursable Amount (CAD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>05-Sep-16</td>
<td>Mileage</td>
<td></td>
<td>104 KM</td>
<td>.364</td>
<td>33.21</td>
<td>4.65</td>
<td>37.66</td>
</tr>
<tr>
<td>05-Sep-16</td>
<td>01-3001-110-1700-0362-000000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08-Sep-16</td>
<td>Mileage</td>
<td></td>
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<td>01-3001-110-1700-0362-000000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td>86.42</td>
<td>9.30</td>
<td>75.72</td>
</tr>
</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.
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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: 1,754.48

Claimant's Signature: [Signature]
Date: 12/09/16

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

Approved and Certified By: [Signature]
Supervisor/Divisional Head: [Signature]
Date: Sept 13, 2016

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes  No

Transactional Review and Compliance: Date:
### PRIVATE VEHICLE USAGE REPORT

**Claimant:** HON. AL. HAWKINS

**Department:** TRANSPORTATION AND WORKS

**Division:** EXECUTIVE

<table>
<thead>
<tr>
<th>Reason for Travel</th>
<th>Details of Travel</th>
<th>Distance Travelled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sept 85</td>
<td>Grand Falls - Windsor to Gander Airport</td>
<td>104</td>
</tr>
<tr>
<td>Sept 8</td>
<td>Gander Airport to Grand Falls - Windsor</td>
<td>104</td>
</tr>
</tbody>
</table>

**Total Distance Travelled:** 208

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

**Claim Amount:**

- Total distance travelled: 208 kilometres
- Total distance travelled: $75.72

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

**Certified Correct:**

**Approved:**

- **Claimant:**
  - Signature: [Signature]
  - Date: Sept 12 2016

- **Head of Branch or Division:**
  - Signature: [Signature]
  - Date: Sept 13, 2016

Form OCG 128
### 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>
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**Total:** 1,329.17 186.09 1,515.26

### Per Diem Expenses

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<tbody>
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<td>05-Sep-16  to 06-Sep-16</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
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<td><strong>20.08</strong></td>
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**Mileage Expenses**

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Total Amount to Reimburse: 1,754.48

Claimant’s Signature: __________________________ Date: 12/09/16

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:
For
HON ALLAN HAWKINS
AC [redacted] [redacted]

Monday, September 5, 2016

Air

AIR CANADA
Flight: 7784 G CLASS
From: GANDER NF
10:30 AM Equipment: BEH
To: ST JOHNS NF
11:14 AM
Stops: 0 Arrival: 05Sep16
Seat(s): 03A
Mile(s) Flown: 125

Air

AIR CANADA
Flight: 695 G CLASS
From: ST JOHNS NF
11:40 AM Equipment: E90
To: TORONTO PEARSON
01:40 PM
Stops: 0 Arrival: 05Sep16
Seat(s): 25D
Mile(s) Flown: 1335

Air

AIR CANADA
Flight: 127 G CLASS
From: TORONTO PEARSON
02:40 PM Equipment: A320
To: EDMONTON INTL AB
04:49 PM
Stops: 0 Arrival: 05Sep16
Seat(s): 25D
Mile(s) Flown: 1671

HARVEYS TRAVEL LTD.
92 ELIZABETH AVENUE
ST JOHN'S NL
A1A 1W7
GST Reg#: R 102293552
Branch: 661011
Agent: [redacted] [redacted]

To: GNL-TRANSPORTATION WORKS
TW MINISTERS OF
TW CORPORATE SE

Invoice Number: 16610
Date: August 24, 2016
Page: 1/3
Our Reference: GWT0115870C J33GSM

INVOICE
To: GNL-TRANSPORTATION WORKS
GW MINISTERS OF
GW CORPORATE SE

Monday, September 5, 2016

Hotel

Check In: 05Sep2016
Check Out: 07Sep2016
EDMONTON AB
WESTIN EDMONTON
10135 100TH STREET, EDMONTON AB, T5J 0N7
CA
Tel: 7804263636
Fax: 7804281454
Confirmation: 191853817

Rooms: 1
2 Night(s)
MODERATE ONE KING BED
Rate: 150.00 CAD per Night
Guaranteed for late arrival

Thursday, September 8, 2016

Air

Flight: 1164 G CLASS
01:35 AM Equipment: 321
07:14 AM Mile(s) Flown: 1671

From: EDMONTON INTL AB
To: TORONTO PEARSON
Stops: 0 Arrival: 08Sep16
Seat(s): 18C

Air

Flight: 690 G CLASS
08:25 AM Equipment: A320
12:55 PM Mile(s) Flown: 1335

From: TORONTO PEARSON
To: ST JOHNS NF
Stops: 0 Arrival: 08Sep16
Seat(s): 26D

Air

Flight: 7811 G CLASS
01:15 PM Equipment: BEH
02:00 PM Mile(s) Flown: 125

From: ST JOHNS NF
To: GANDER NF
Stops: 0 Arrival: 08Sep16
Seat(s): 03A
AIR CANADA
To: GNL-TRANSPORTATION WORKS  
TW MINISTERS OF  
TW CORPORATE SE

**INVOICE**

**Cost:**

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</tr>
<tr>
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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 TRANSPORTATION WORKS

U87 TW MINISTERS OFFICE

U89 TW CORPORATE SERVICES
To: GNL-TRANSPORTATION WORKS
TW MINISTERS OF
TW CORPORATE SE

Invoice Number: 16610
Date: August 24, 2016
Page: 1/3
Our Reference: GWT0115870C J33GSM

For
HON ALLAN HAWKINS
AC  S. 40 (1)

Monday, September 5, 2016

Air

AIR CANADA
From: GANDER NF
To: ST JOHNS NF
Stops: 0 Arrival: 05Sep16
Seat(s): 03A
Flight: 7784  G CLASS
10:30 AM  Equipment: BEH
11:14 AM
Mile(s) Flown: 125

Air

AIR CANADA
From: ST JOHNS NF
To: TORONTO PEARSON
Stops: 0 Arrival: 05Sep16
Seat(s): 25D
Flight: 695  G CLASS
11:40 AM  Equipment: E90
01:40 PM
Mile(s) Flown: 1335

Air

AIR CANADA
From: TORONTO PEARSON
To: EDMONTON INTL AB
Stops: 0 Arrival: 05Sep16
Seat(s): 25D
Flight: 127  G CLASS
02:40 PM  Equipment: A320
04:49 PM
Mile(s) Flown: 1671
Monday, September 5, 2016

Hotel

Check In: 05Sep2016
Check Out: 07Sep2016

EDMONTON AB

WESTIN EDMONTON
10135 100TH STREET, EDMONTON AB, T5J 0N7
CA
Tel: 7804263636
Fax: 7804281454
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From: EDMONTON INTL AB
To: TORONTO PEARSON
Stops: 0 Arrivals: 08Sep16
Seat(s): 18C

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Mile(s) Flown: 1671

Air

AIR CANADA
From: TORONTO PEARSON
To: ST JOHNS NF
Stops: 0 Arrival: 08Sep16
Seat(s): 26D

Flight: 690 G CLASS
08:25 AM Equipment: A320
12:55 PM

Mile(s) Flown: 1335

Air

AIR CANADA
From: ST JOHNS NF
To: GANDER NF
Stops: 0 Arrivals: 08Sep16
Seat(s): 03A

Flight: 7811 G CLASS
01:15 PM Equipment: BEH
02:00 PM

Mile(s) Flown: 125
To: GNL-TRANSPORTATION WORKS  
  TW MINISTERS OF  
  TW CORPORATE SE

INVOICE

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<th>Amount</th>
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<tr>
<td>GST</td>
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<td>HST</td>
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<td>21.26</td>
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<td>0.00</td>
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*BAGGAGE FEES/CHECKED BAGGAGE ALLOWANCES WILL VARY. REFER TO AIRLINE WEBSITES FOR DETAILS.

THANK YOU FOR BOOKING WITH CWT HARVEYS TRAVEL

U85 TRANSPORTATION WORKS  
U87 TW MINISTERS OFFICE  
U89 TW CORPORATE SERVICES
### Tax Invoice

Tax ID: 815461330RT0001  
The Westin Edmonton  07-SEP-16 22:20  MRONDEAU

<table>
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<td>GST</td>
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<td>Visa-7781</td>
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<td>-505.23</td>
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** Total                                505.23

*** Balance                              0.00

Continued on the next page
FUEL YOUR BODY - It's easy to maintain a healthy lifestyle on the road. Our extensive SuperFoodsRx(TM) menu features nutrient-rich, delicious dishes that fuel your body and give you the focused energy you need. Discover dishes to supercharge your day at westin.com/eatwell.

As a Starwood Preferred Guest you have earned at least 900 Starpoints for this visit. Tell us about your stay. www.westin.com/reviews
ATS GROUP
4608 101 ST NW
780-887-0999
EDMONTON AB

CARD
CARD TYPE: VISA
DATE: 2016/09/05
TIME: 17:24:06
INVOICE #: 006
RECEIPT NUMBER: C85034162-001-038-007-0

PURCHASE AMOUNT: $66.00
TIP: $6.60
TOTAL: $72.60

APPROVED
AUTH#: 022121
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

GST#:

S. 40 (1)
**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>
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</thead>
<tbody>
<tr>
<td>Sept 8</td>
<td>Grand Falls - Windsor to Gander airport</td>
<td>104</td>
</tr>
<tr>
<td>Sept 9</td>
<td>Gander airport to Grand Falls - Windsor</td>
<td>104</td>
</tr>
</tbody>
</table>

Reason for Travel

Claim Amount: Total distance travelled 208 kilometres × 0.364 $ per km = $ 75.72

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

Certified Correct:  
Approved:

Head of Branch or Division

Form OCG 128
**FISCAL YEAR:** 2016/17  
**OFFICIAL JOURNEY AUTHORIZATION**

**DEPARTMENT:** Transportation & Work

### SECTION 1: CLAIMANT INFORMATION

**EMPLOYEE NAME:** Allan Hawkins  
**ADDRESS:** [Redacted]  
**POSTAL CODE:** [Redacted]

### SECTION 2: TRAVEL DETAILS

**FROM:** St. John's, NL  
**TO:** Edmonton, AB

**FROM DATE:** September 5, 2016  
**TO DATE:** September 8, 2016

**PURPOSE OF TRIP:** To attend FPT Ministers' Meeting on Infrastructure

### 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**

**DEPUTY MINISTER**

**SIGNATURE**

**DATE**

**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)**

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<th>Item</th>
<th>Amount</th>
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<td>Taxi, limousine, or bus fare to and from departure points:</td>
<td>$</td>
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<tr>
<td>Transportation cost (if travel order is not issued):</td>
<td>$</td>
</tr>
<tr>
<td>Accommodations for _______ nights (hotel/ private):</td>
<td>$</td>
</tr>
<tr>
<td>Meals for _______ days (at approved rates):</td>
<td>$</td>
</tr>
<tr>
<td>Other:</td>
<td>$</td>
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**CASH ADVANCE REQUIRED:**

- YES
- NO

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

$ 0.00

**AMOUNT**

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**DEPARTMENTAL FINANCE DIVISION USE ONLY:**

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<th>AMOUNT</th>
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</table>
Name: Hawkins, Hon Allan
Expense Date: 27-Oct-16 - 15-Nov-16
Cost Center: 3001
Purpose: Travel back to Grand Falls-Windsor from HQ, and then to Toronto for P3 Seminar.
Report Submit Date: 15-Nov-16
Claim Authorization: Journey Authorization
Fiscal Year: 2016-17
Acct Distribution: 01-3001-110-1700-0369-000000

### Receipt-Based Expenses

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<th>Net of Tax Amount</th>
<th>Tax Amount</th>
<th>Reimbursable Amount (CAD)</th>
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<td>Airfare</td>
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<td>Airfare</td>
<td>Location From: St John's; Location To: Gander; Ticket Number: 0149566187436; Receipt Date: 27-Oct-16; Airline Carrier: Air Canada; Class of Ticket: Economy</td>
<td>586.35</td>
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<td>13-Nov-16</td>
<td>Miscellaneous</td>
<td>Description of Misc. Expense: Union Pearson Express Shuttle at Toronto Airport; Receipt Date: 13-Nov-16</td>
<td>10.53</td>
<td>1.47</td>
<td>12.00</td>
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<td>13-Nov-16</td>
<td>Accommodations</td>
<td>Receipt Date: 14-Nov-16</td>
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## Per Diem Expenses

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<td>10-Nov-16</td>
<td>Lunch (NL)</td>
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<td>Lunch (NL)</td>
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<tr>
<td>13-Nov-16</td>
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<tr>
<td>14-Nov-16</td>
<td>Dinner (Canada)</td>
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<td>27.50</td>
<td>24.12</td>
<td>3.38</td>
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## Mileage Expenses

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<td>208 KM</td>
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<td>208 KM</td>
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<td>66.65</td>
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<td>13-Nov-16</td>
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<td></td>
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<td><strong>133.30</strong></td>
<td><strong>18.66</strong></td>
<td><strong>151.96</strong></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 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: 2,231.69

Claimant's Signature: [Signature] Date: Nov 16, 2014

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

Approved and Certified By: [Signature] Date: Nov 16, 2014

Supervisor/Divisional Head:

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: Date: 
**PRIVATE VEHICLE USAGE REPORT**
(to be attached to travel expense claim)

**TOWN HAWKINS**
Claimant

**TRANSPORTATION AND WORKS**
Department

**EXECUTIVE**
Division

<table>
<thead>
<tr>
<th>Date</th>
<th>Details of Travel</th>
<th>Distance Travelled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nov 10</td>
<td>Grand Falls - Windsor - Gander airport - Grand Falls - Windsor</td>
<td>208</td>
</tr>
<tr>
<td>Nov 13</td>
<td>Grand Falls - Windsor - Gander airport - Grand Falls - Windsor</td>
<td>208</td>
</tr>
</tbody>
</table>

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>Total Distance Travelled this Claim</th>
<th>Cumulative Distance Travelled since Jan 1 Including this Claim</th>
</tr>
</thead>
</table>

Claim Amount: Total distance travelled 416 kilometres X 0.3653 c per km = $181.96
Total distance travelled = Total km X c per km = $________
Total = $________

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

Certified Correct:

Approved:

Claimant: Head of Branch or Division

Form OCG 128
**Official Journey Authorization**

**Fiscal Year:** 2016/2017

**Employee Name:** Al Hawkins

**Address:**

**Postal Code:**

**Department:** Transportation and Works

**Position Title:** Minister

**Supplier Number:**

**From:** St. John's

**To:** Toronto

**From Date:** November 13th, 2016

**To Date:** November 14th, 2016

**Purpose of Trip:**

P3 Fundamentals one day seminar at the Sheraton Centre Toronto Hotel

**Payment Method:**

- [x] Personal Credit Card
- [ ] Government Credit Card
- [ ] Travel Order
- [ ] Other (Specify)

**Mode of Travel:**

- [x] Air
- [ ] Personal Vehicle
- [ ] Government Vehicle
- [ ] Rental Car

**Transportation Cost (If Travel Order is Not Issued):**

**Accommodations for**

**Meals for**

**Other:**

**Cash Advance Required:**

- [ ] Yes
- [ ] No

**Total Estimated Trip Cost: $1,130.07**

**Accounting Distribution:**

<table>
<thead>
<tr>
<th>Amount</th>
<th>01</th>
<th>0000</th>
</tr>
</thead>
</table>

**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:** Nov 2, 2016

**Deputy Minister**

**Signature**

**Date:**

**Chief of Staff**

**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):**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taxi, Limousine, or Bus Fare to and from departure points</td>
<td>$</td>
</tr>
<tr>
<td>Transportation cost (if travel order is not issued)</td>
<td>$</td>
</tr>
<tr>
<td>Accommodations for <strong>nights</strong> (hotel/private)</td>
<td>$</td>
</tr>
<tr>
<td>Meals for <strong>days</strong> (at approved rates)</td>
<td>$</td>
</tr>
<tr>
<td>Other</td>
<td>$</td>
</tr>
</tbody>
</table>

**Cash Advance Required:**

- [ ] Yes
- [ ] No

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

**Accounting Distribution:**

<table>
<thead>
<tr>
<th>Amount</th>
<th>01</th>
<th>0000</th>
</tr>
</thead>
</table>

**Departmental Finance Division Use Only:**

<table>
<thead>
<tr>
<th>Amount</th>
<th>01</th>
<th>0000</th>
</tr>
</thead>
</table>

**Signature**

**Date:**

**Code:**

110518
Trip on Nov 10, 2016
Locator: T5FB10
Date: Oct 27, 2016

Traveler: ALLAN HON HAWKINS
TRANSPORTATION WORKS
TW MINISTERS OFFICE
TW CORPORATE SERVICES

Agent: MT

Thursday, November 10, 2016
Flight Air Canada 7785

DEPARTURE
YYT - St Johns, Newfoundland
2:45 PM, Nov 10, 2016

ARRIVAL
YQX - GANDER MUNICIPAL
3:30 PM, Nov 10, 2016

Status: Confirmed
Class: Coach Class - T
Duration: 00:45 (Non-stop)
Equipment: BEH
Meal Service: None
Frequent Flyer: None

Notes: OPERATED BY AIR CANADA EXPRESS - EXPLOITS VALLEY AIR

Sunday, November 13, 2016
Flight Air Canada 7786

DEPARTURE
YQX - GANDER MUNICIPAL
4:05 PM, Nov 13, 2016

ARRIVAL
YYT - St Johns, Newfoundland
4:50 PM, Nov 13, 2016

Status: Confirmed
Class: Coach Class - T
Duration: 00:45 (Non-stop)
Equipment: BEH
Meal Service: None
Frequent Flyer: None

Notes: OPERATED BY AIR CANADA EXPRESS - EXPLOITS VALLEY AIR

CO2 CALCULATED PER PERSON BY CLIMATENEUTRALGROUP.COM/OFFSET-NOW
CO2 YTYQX ECONOMY
37.58 KG PREMIUM
37.58 KG
CO2 YQXYYT ECONOMY
37.58 KG PREMIUM
37.58 KG
CO2 TOTAL ECONOMY
75.16 KG PREMIUM
75.16 KG

Name: HAWKINS/ALLAN
Invoice / Ticket / Date: 0149556187436/270CT16
Base: CAD 512.00
Tax 1: 87.19 RC
Tax 2: 14.25 CA
Tax 3: 55.00 SQ
Total: 668.44

Form of Payment: Blank

TOTAL AMOUNT: 668.44

GENERAL INFORMATION
EMERGENCIES/ENROUTE CHANGES AFTER BUSINESS HOURS
1-866-464-4400 TOLLFREE. OUTSIDE NORTH AMERICA CALL
YOUR EMERGENCY ID CODE IS G/286T-GOV

THANK YOU FOR CHOOSING THE SERVICES OF HARVEYS TRAVEL
** PLEASE REVIEW THESE RESERVATIONS THOROUGHLY
** IF A DISCREPANCY EXISTS CALL OUR OFFICE IMMEDIATELY

VIEW WWW.CARLSONWAGONLIT.CA FOR GREAT VACATION IDEAS

BY MAKING THIS RESERVATION WITH CWT YOU ARE ACKNOWLEDGING THE DATA PRIVACY POLICY AN CONSENT TO THE DATA PROTECTION STATEMENT BOTH FOUND AT WWW.CWTCORPORATE.CA/PRIVACY.HTML
TO WITHDRAW YOUR CONSENT PLEASE CONTACT YOUR CONSULTANT.

Agency Information
Carlson Wagonlit/Harvy's Travel
92 Elizabeth Ave

St. John's, NF
A1A 4W7
Reservations: 877 726-1881
Facsmile: 709-726-0317

Consultant: [redacted]
Form of Payment: [redacted]

s. 40 (1)
Thursday, November 10, 2016

Air

AIR CANADA
From: ST JOHNS NF
To: GANDER NF
Stops: 0  Arrival: 10Nov16

Flight: 7785  T CLASS
02:45 PM  Equipment: BEH
03:30 PM

Mile(s) Flown: 125

Sunday, November 13, 2016

Air

AIR CANADA
From: GANDER NF
To: ST JOHNS NF
Stops: 0  Arrival: 13Nov16
Seat(s): 03B

Flight: 7784  H CLASS
10:20 AM  Equipment: BEH
11:05 AM

Mile(s) Flown: 125

Air

AIR CANADA
From: ST JOHNS NF
To: TORONTO PEARSON
Stops: 0  Arrival: 13Nov16
Seat(s): 29D

Flight: 667  H CLASS
01:25 PM  Equipment: E90
03:35 PM

Mile(s) Flown: 1335
To: GNL-TRANSPORTATION WORKS
    TW MINISTERS OF
    TW CORPORATE SE

Invoic

Sunday, November 13, 2016

Air

AIR CANADA
From: GANDER NF
To: ST JOHNS NF
Stops: 0 Arrival: 13Nov16

Flight: 7786 T CLASS
04:05 PM Equipment: BEH
04:50 PM

Mile(s) Flown: 125

Hotel

Check In: 13Nov2016
Check Out: 14Nov2016

METRO TORONTO OT
SHERATON HOTELS CORP
SHERATON CENTRE TOR
123 QUEEN STREET WEST,TORONTO
ON,M5H 2M9
CA
Tel: 4163611000
Fax: 4169474854
Confirmation: 241921061

Rooms: 1
1 Night(s)
STANDARD ONE KING BED
Rate: 179.00 CAD per Night
Guaranteed for late arrival

Monday, November 14, 2016

Air

AIR CANADA
From: TORONTO PEARSON
To: ST JOHNS NF
Stops: 0 Arrival: 15Nov16
Seat(s): 26D

Flight: 696 G CLASS
08:55 PM Equipment: A320
01:24 AM

Mile(s) Flown: 1335
**INVOICE**

**To:** GNL-TRANSPORTATION WORKS  
TW MINISTERS OF  
TW CORPORATE SE

---

**Hotel**

- **Check In:** 14Nov2016  
- **Check Out:** 15Nov2016  
- **ST JOHNS NF**  
- **HOLIDAY INN**  
- **HOLIDAY INN EXP STE**  
- **5 NAVIGATOR AVENUE, ST. JOHN S NL, A1A 0R5**  
- **CA**  
- **Tel:** 7097380123  
- **Fax:** 7097383210  
- **Confirmation:** 63115031

**Rooms:** 1  
**KNG**  
**Rate:** 129.00 CAD per Night  
**Guaranteed for late arrival**

<table>
<thead>
<tr>
<th>Cost</th>
<th></th>
</tr>
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<tbody>
<tr>
<td><strong>TKT- AC9566187436 E-TKT</strong></td>
<td>512.00</td>
</tr>
<tr>
<td><strong>HST:</strong></td>
<td>87.19</td>
</tr>
<tr>
<td><strong>Tax:</strong></td>
<td>69.25</td>
</tr>
<tr>
<td><strong>Ticket Total:</strong></td>
<td>668.44</td>
</tr>
<tr>
<td><strong>Service Fee HAR*61011-9566187436</strong></td>
<td></td>
</tr>
<tr>
<td><strong>HST:</strong></td>
<td>18.58</td>
</tr>
<tr>
<td><strong>Tax:</strong></td>
<td>2.79</td>
</tr>
<tr>
<td><strong>Service Fee Total:</strong></td>
<td>21.37</td>
</tr>
</tbody>
</table>

---

**Total:**

<p>| | |</p>
<table>
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<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Grand Total:</strong></td>
<td>689.81</td>
</tr>
<tr>
<td><strong>Less Credit Card Payments:</strong></td>
<td>689.81</td>
</tr>
<tr>
<td><strong>Total GST/HST:</strong></td>
<td>89.98</td>
</tr>
<tr>
<td><strong>Credit / Balance Due To This Invoice:</strong></td>
<td>0.00</td>
</tr>
<tr>
<td><strong>Total Balance Due:</strong></td>
<td>0.00</td>
</tr>
</tbody>
</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.
Thursday, November 10, 2016

Air

AIR CANADA
From: ST JOHNS NF
To: GANDER NF
Stops: 0
Arrival: 10Nov16

Flight: 7785  T CLASS
02:45 PM  Equipment: BEH
03:30 PM

Mile(s) Flown: 125

Sunday, November 13, 2016

Air

AIR CANADA
From: GANDER NF
To: ST JOHNS NF
Stops: 0
Arrival: 13Nov16
Seat(s): 03B

Flight: 7784  H CLASS
10:20 AM  Equipment: BEH
11:05 AM

Mile(s) Flown: 125

Air

AIR CANADA
From: ST JOHNS NF
To: TORONTO PEARSON
Stops: 0
Arrival: 13Nov16
Seat(s): 29D

Flight: 667  H CLASS
01:25 PM  Equipment: E90
03:35 PM

Mile(s) Flown: 1335
To: GNL-TRANSPORTATION WORKS  
TW MINISTERS OF  
TW CORPORATE SE  

Air

<table>
<thead>
<tr>
<th>Flight: 696</th>
<th>G CLASS</th>
</tr>
</thead>
<tbody>
<tr>
<td>From: TORONTO PEARSON</td>
<td>08:55 PM</td>
</tr>
<tr>
<td>To: ST JOHNS NF</td>
<td>Equipment: A320</td>
</tr>
</tbody>
</table>

Stops: 0  
Arrival: 15Nov16  
Seat(s): 26D  

Cost:

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>TKT- AC9566220823 E-TKT EXCHANGED</td>
<td>686.00</td>
</tr>
<tr>
<td>Service Fee HAR*61011-9566220823</td>
<td>18.58</td>
</tr>
</tbody>
</table>

HST:  
Tax:  
Ticket Total: 817.15  
Service Fee Total: 21.37

Total:

<table>
<thead>
<tr>
<th>Description</th>
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<tbody>
<tr>
<td>Grand Total:</td>
<td>838.52</td>
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<tr>
<td>Less Credit Card Payments:</td>
<td>838.52</td>
</tr>
<tr>
<td>Total GST/HST:</td>
<td>108.94</td>
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<tr>
<td>Credit / Balance Due To This Invoice:</td>
<td>0.00</td>
</tr>
<tr>
<td>Total Balance Due:</td>
<td>0.00</td>
</tr>
</tbody>
</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 TRANSPORTATION WORKS  
U87 TW MINISTERS OFFICE  
U89 TW CORPORATE SERVICES
For your convenience, we have prepared this zero-balance folio indicating a $0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a $0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full. Please note that your guest room will be checked out at 12 noon.

Continued on the next page
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihgrewardsclub.com/review. We look forward to welcoming you back soon.

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Charges</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>11-14-16</td>
<td>Accommodation</td>
<td>129.00</td>
<td></td>
</tr>
<tr>
<td>11-14-16</td>
<td>HST</td>
<td>19.35</td>
<td></td>
</tr>
<tr>
<td>11-14-16</td>
<td>TML</td>
<td>5.16</td>
<td></td>
</tr>
<tr>
<td>11-15-16</td>
<td>Visa</td>
<td>153.51</td>
<td></td>
</tr>
</tbody>
</table>

Total 153.51 153.51

Balance 0.00

Guest Signature:
I have received the goods and/or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.
RECEIPT

UP

Union Pearson Express
ADULT ONE-WAY
ADULT ALLEY SIMPLE

Pearson
Union

Ticket #: 1 Numer de Billet

s. 40 (1)

RECeipt Re?U

UP

Union Pearson Express
ADULT ONE-WAY
ADULT ALLEY SIMPLE

Pearson
Union

Ticket #: 1 Numer de Billet

s. 40 (1)

EXPIRATION
2017-11-13 02:00:00

 Terms and conditions available at
www.pearsonexpress.com

Refill 1 End:
13 Nov 13 12:34 EST 2016
UP EXPRESS #25
UNION STATION
TORONTO ON

CARD
CARD TYPE VISA
DATE 2016/11/14
TIME 7137 18:23:50
CLERK ID
RECEIPT NUMBER
C84110771-001-090-095-0

PURCHASE TOTAL
$12.00

APPROVED
AUTH# 005571 01-027
THANK YOU

CARDHOLDER COPY

CUSTOMER RECEIPT
REÇU DU CLIENT

UP Union
52901
1881

Ticket Sale / Vente de billet
UP ADULT / UP ADULTE

Total Amount Montant Total

Payment Amount Montant du paiement
Payment Method Mode de paiement

12.00

CreditCard

IMPOR T RETAIN THIS COP
ADULT | ADULTE
ONE-WAY | ALLER SIMPLE

$ 12.00

UNION
TO / À
AÉROPORT PEARSON AIRPORT

11/14/2016
18:23:00

Must take trip within 1 hour of issuance
Doit faire le trajet au plus 1 heure après achat

Not refundable, not transferable
Non remboursable, non transférable

Retain for inspection | Conserver pour inspection

Use is subject to, and deemed acceptance of
terms and conditions available at
En utilisant ce service, le titulaire accepte les
conditions telles qu'énoncées sur
www.upexpress.com

Trx Location
Device ID
Device TSN
Sales Period ID

3844312

UP Union
52901
1880
ST. JOHN'S INTL AIRPORT AUTHORITY

RECEIPTH1
CASHIER NO.: 8
SHIFT NO.: 

***************
* NORMAL TICKET *
***************
ENTRY DATE/TIME:
10.11.16 13:37
PAY DATE/TIME:
15.11.16 01:29
PARK-DUR.: HRS:MIN
4:11:52

***************
AMOUNT: $ 71.25
VAL. AMT:- $ 0.00
PAID: $ 71.25

***************
VISA 08/17 201
AUTH. REF. 9

***************
* NO IN/OUT *
* PRIVILEGES *
***************
TRAN No.: 1 4840

***************
* HST INCLUDED *
***************
HST No. 

***************
ST JOHNS NL
A1A 5T2
QUESTIONS?
CALL 
****
HAV
Name: Hawkins, Hon Allan
Expense Date: 14-Nov-16 - 14-Nov-16
Cost Center: 3001
Purpose: Travel to Toronto for P3 Conference
Report Submit Date: 21-Nov-16
Claim Authorization: Journey Authorization
Fiscal Year: 2016-17
Acct Distribution: 01-3001-110-1700-0369-000000
Related Claims: TCMS986024

Time of Departure: 14:45
Time of Return: 02:00
Departure Date: 10-Nov-16
Return Date: 15-Nov-16
Exchange Rate: 
Currency: CAD
Reimbursement Amount: 17.25
Net of Tax Total: 15.13
Tax Total: 2.12

<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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</thead>
<tbody>
<tr>
<td>14-Nov-16</td>
<td>Miscellaneous Travel</td>
<td>Description of Misc. Expense: Seat selection; Receipt Date: 14-Nov-16</td>
<td>15.13</td>
<td>2.12</td>
<td>17.25</td>
</tr>
<tr>
<td>01-3001-110-1700-0369-000000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>15.13</td>
<td>2.12</td>
<td>17.25</td>
</tr>
</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.
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* 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: 17.25

Claimant's Signature: ___________________________ Date: Nov 21, 2016

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

Approved and Certified By: ________________________ Date: Nov 21, 2016

Supervisor/Divisional Head: ________________________ Date: Nov 21, 2016

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: ________________________ Date: ________________________
Government of
Newfoundland and Labrador
Expense Claim: TCMS980810

Name: Hawkins, Hon Allan
Expense Date: 01-Sep-16 - 29-Sep-16
Cost Center: 3001
Purpose: To attend FPT Council of Minister's Responsible for Transportation meetings in Toronto
Report Submit Date: 05-Oct-16
Claim Authorization: Journey Authorization
Fiscal Year: 2016-17
Acct Distribution: 01-3001-110-1700-0369-000000

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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</thead>
<tbody>
<tr>
<td>01-Sep-16</td>
<td>Travel Agency Fees</td>
<td>01-3001-110-1700-0369-000000</td>
<td>18.65</td>
<td>2.61</td>
<td>21.26</td>
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<tr>
<td>26-Sep-16</td>
<td>Airfare</td>
<td>01-3001-110-1700-0367-000000</td>
<td>732.18</td>
<td>102.51</td>
<td>834.69</td>
</tr>
<tr>
<td>26-Sep-16</td>
<td>Accommodations</td>
<td>01-3001-110-1700-0365-000000</td>
<td>233.02</td>
<td>32.62</td>
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Per Diem Expenses

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## Expense Claim: TCMS980810

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### Mileage Expenses

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<td><strong>75.72</strong></td>
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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: 1,963.79

Claimant's Signature: ___________________________ Date: Oct 5, 2016

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

Approved and Certified By: ___________________________

Supervisor/Divisional Head: ___________________________

Date: Oct 5, 2016

Office of the Comptroller General Purposes Only:

Selected for Regular Review: Yes [ ] No [ ]

Transactional Review and Compliance: ___________________________

Date: ___________________________
# PRIVATE VEHICLE USAGE REPORT
(to be attached to travel expense claim)

<table>
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<th>Reason for Travel</th>
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<th>Distance Travelled</th>
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<tbody>
<tr>
<td></td>
<td>20/16</td>
<td>Sept 26, Grand Falls - Windsor to Gander Airport</td>
<td>184</td>
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<td></td>
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<td>Sept 29, Gander Airport to Grand Falls - Windsor</td>
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**Total Distance Travelled**: 208

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>
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<th>Cumulative Distance Travelled since Jan 1 from Previous Claim</th>
<th>Total Distance Travelled this Claim</th>
<th>Cumulative Distance Travelled since Jan 1 Including this Claim</th>
</tr>
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</table>

Claim Amount: Total distance travelled 208 kilometres $0.364 per km = $75.72

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

Certified Correct:  
Claimant: 
Oct 4, 2016

Approved:  
Head of Branch or Division:  
Oct 5, 2016

Form OCG 128
<table>
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<th>DEPARTURE</th>
<th>Arrival</th>
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<td>Air Canada 7784</td>
<td>YQX - Gander Municipal</td>
<td>YYT - St Johns, Newfoundland</td>
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<tr>
<td>Air Canada 695</td>
<td>YYT - St Johns, Newfoundland</td>
<td>YYZ - Toronto, Canada</td>
</tr>
<tr>
<td>Air Canada 604</td>
<td>YYZ - Toronto, Canada</td>
<td>YHZ - Halifax, Nova Scotia Canada</td>
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### Monday, September 26, 2016

**Flight Air Canada 7784**

- **DEPARTURE**
  - YQX - Gander Municipal
  - 10:30 AM, Sep 26, 2016
- **Status**: Confirmed
- **Class**: Coach Class - G
- **Duration**: 00:45 (Non-stop)
- **Equipment**: BEH
- **Meal Service**: None
- **Reserved Seats**: 2A
- **Frequent Flyer**: 
- **Notes**: OPERATED BY AIR CANADA EXPRESS - EXPLOITS VALLEY AIR

**Flight Air Canada 695**

- **DEPARTURE**
  - YYT - St Johns, Newfoundland
  - 11:40 AM, Sep 26, 2016
- **Status**: Confirmed
- **Class**: Coach Class - G
- **Duration**: 03:40 (Non-stop)
- **Equipment**: Embraer EMB E90
- **Meal Service**: Food For Purchase
- **Reserved Seats**: 24C
- **Frequent Flyer**: 
- **Notes**: ARRIVES YYZ TERMINAL 1

**Flight Air Canada 604**

- **DEPARTURE**
  - YYZ - Toronto, Canada
  - 8:10 AM, Sep 29, 2016
- **Status**: Confirmed
- **Class**: Coach Class - G
- **Duration**: 02:05 (Non-stop)
- **Equipment**: Airbus Industrie 320
- **Meal Service**: Food For Purchase
- **Reserved Seats**: 20D
- **Frequent Flyer**: 
- **Notes**: DEPARTS YYZ TERMINAL 1
### Flight Air Canada 8862

**DEPARTURE**  
YHZ - Halifax, Nova Scotia Canada  
12:15 PM, Sep 29, 2016

**ARRIVAL**  
YQX - GANDER MUNICIPAL  
2:07 PM, Sep 29, 2016

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<tbody>
<tr>
<td>Class</td>
<td>Coach Class - G</td>
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<tr>
<td>Duration</td>
<td>01:22 (Non-stop)</td>
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<tr>
<td>Equipment</td>
<td>Canadair Jet</td>
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<tr>
<td>Meal Service</td>
<td>None</td>
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<tr>
<td>Reserved Seats</td>
<td>5C S.40 (1)</td>
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<tr>
<td>Frequent Flyer</td>
<td>OPERATED BY AIR CANADA EXPRESS - JAZZ</td>
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**Notes:**

**GENERAL INFORMATION**

EMERGENCIES/ENROUTE CHANGES AFTER BUSINESS HOURS  
1-866-464-4400 TOLL FREE. OUTSIDE NORTH AMERICA CALL COLLECT 314-513-0807. ADDITIONAL FEE WILL APPLY YOUR EMERGENCY ID CODE IS G/266T-GOV RECOMMENDED CHECK-IN FOR DOMESTIC FLIGHTS-MINIMUM 1 HOUR PRIOR. TICKET IS NONREFUNDABLE-UNDER CERTAIN CONDITIONS VALUE MAY BE APPLIED FOR FUTURE TRAVEL **** ATTENTION E-TICKET TRAVELLERS **** E-TICKET TRAVELLER WILL BE REQUIRED TO SHOW GOVERNMENT ISSUED PHOTO. I.D. OR PURCHASING CREDIT CARD E-TICKETS WILL NOT BE ACCEPTED BY OTHER CARRIERS. CWT STRONGLY RECOMMENDS THAT YOU PURCHASE EMERGENCY TRAVEL AND MEDICAL INSURANCE FOR YOUR PROTECTION AGAINST HIGH COSTS OF AN UNEXPECTED TRAVEL OR MEDICAL EMERGENCY DURING YOUR TRIP. PLEASE NOTE UNLESS IT IS NOTED OTHERWISE ON THIS ITINERARY YOU DECLINED TRAVEL INSURANCE COVERAGE AND THEREFORE IS NOT INCLUDED WITH YOUR TRAVEL ARRANGEMENTS.

THANK YOU FOR CHOOSING THE SERVICES OF HARVEYS TRAVEL  
**PLEASE REVIEW THESE RESERVATIONS THOROUGHLY**  
**IF A DISCREPANCY EXISTS CALL OUR OFFICE IMMEDIATELY**

VIEW WWW.CARLSONWAGONLIT.CA FOR GREAT VACATION IDEAS

BY MAKING THIS RESERVATION WITH CWT YOU ARE ACKNOWLEDGING THE DATA PRIVACY POLICY AN CONSENT TO THE DATA PROTECTION STATEMENT BOTH FOUND AT WWW.CWTCORPORATE.CA/PRIVACY.HTML TO WITHDRAW YOUR CONSENT PLEASE CONTACT YOUR CONSULTANT.

**Agency Information**  
Carlson Wagonlit/Harvey’s Travel  
92 Elizabeth Ave  
St. John’s, NF  
A1A 4W7  
Reservations: 877 726-1881  
Facsimile: 709-726-0317

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<th>Tax 2</th>
<th>Tax 3</th>
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<td>14.25CA</td>
<td>50.00SQ</td>
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**Total Amount:** 834.69

**Form of Payment:**

This above service fee will be applied to your credit card.
Note: The above fare quote is not guaranteed until time of ticket issuance.
<table>
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<tr>
<td><strong>Passenger Name:</strong> Hawkins, Allan Hon</td>
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<tr>
<td><strong>e-Ticket Number:</strong> 0149555714166</td>
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<td><strong>Reservation Number:</strong> VV54K0</td>
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<td><strong>Grand Total (after service Fee):</strong></td>
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<tr>
<td><strong>92 Elizabeth Ave.</strong></td>
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<tr>
<td><strong>St John’s, NL A1A 1W7</strong></td>
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<tr>
<td><strong>Canada</strong></td>
</tr>
<tr>
<td><strong>Agency Phone:</strong></td>
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<td><strong>Agency IATA Number:</strong></td>
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Traveler
Passenger Name: Hawkins, Allan Han
Rider Name: Han
Airline Name: Air Canada (AC)
Flight Number: 7784
Flight Date: September 26, 2016
Departure: Gander International (YQX)
Arrival: St John's Arpt (YYT)
Flight Time: 10:30 AM - 11:15 AM
Carry-On: 2 Piece Plan
Bag 1 - NO FEE CARRYON HAND BAGGAGE ALLOWANCE
Bag 2 - NO FEE CARRYON HAND BAGGAGE ALLOWANCE
Flight - Air Canada (AC) - 7784 September 26, 2016
Confirmation Number: AG44L5
Status: Confirmed
Fare Basis: G10SLTPC
Flight Operated By: AIR CANADA EXPRESS
- EXPLOITS VALLEY AIR SERVICES
Class Of Service: Economy
Baggage Allowance:
1 Piece Plan
Bag 1 - NO FEE UPTO50LB/23KG AND UPTO62L/158LCM
Bag 2 - 35.00 CAD UPTO50LB/23KG AND UPTO62L/158LCM

Flight - Air Canada (AC) - 695 September 26, 2016
Confirmation Number: AG44L5
Status: Confirmed
Fare Basis: G10SLTPC
Class Of Service: Economy
Baggage Allowance:
1 Piece Plan
Bag 1 - NO FEE UPTO50LB/23KG AND UPTO62L/158LCM
Bag 2 - 35.00 CAD UPTO50LB/23KG AND UPTO62L/158LCM

Flight - Air Canada (AC) - 604 September 29, 2016
Confirmation Number: AG44L5
Status: Confirmed
Fare Basis: G10SLTPC
Class Of Service: Economy
Baggage Allowance:
1 Piece Plan
Bag 1 - NO FEE UPTO50LB/23KG AND UPTO62L/158LCM
Bag 2 - 35.00 CAD UPTO50LB/23KG AND UPTO62L/158LCM

Flight - Air Canada (AC) - 8862 September 29, 2016
Confirmation Number: AG44L5
Status: Confirmed
Fare Basis: G10SLTPC
Class Of Service: Economy
Flights Operated By: AIR CANADA EXPRESS
- JAZZ
Baggage Allowance:
1 Piece Plan
Bag 1 - NO FEE UPTO50LB/23KG AND UPTO62L/158LCM
Bag 2 - 35.00 CAD UPTO50LB/23KG AND UPTO62L/158LCM
Fare Information
Form Of Payment:  
CAD 662.00
Fare:  
CAD 662.00
Taxes and Carrier-Imposed fees:  
CAD 1425 CA
CAD 108.44 RC
CAD 50.00 SQ
Total:  
CAD 834.69
Service Fee:  
CAD 21.26
Grand Total (after service Fee):  
CAD 855.95
Endorsement Information:  
AC ONLY-NON-REF-CHGE FEE

Agency Information
HARVEYS TRAVEL LTD
92 Elizabeth Ave.
St. John's, NL A1A 1W7
Canada
Agency Phone:  
709-579-2424 OR 1877 7261881-HARVEYS TRVL
Agency IATA Number:  
64686775

Notes
BAGGAGE DISCOUNTS MAY APPLY BASED ON FREQUENT FLYER STATUS/ONLINE CHECKIN/FORM OF PAYMENT/MILITARY/ETC.

IMPORTANT INFORMATION FOR TRAVELERS WITH ELECTRONIC TICKETS - PLEASE READ:
Carriage and other services provided by the carrier are subject to conditions of carriage, which are hereby incorporated by reference. These conditions may be obtained from the issuing carrier. Passengers on a journey involving an ultimate destination or a stop in a country other than the country of departure are advised that international treaties known as the Montreal Convention, or its predecessor, the Warsaw Convention, including its amendments (the Warsaw Convention System), may apply to the entire journey, including any portion thereof within a country. For such passengers, the applicable treaty, including special contracts of carriage embodied in any applicable tariffs, governs and may limit the liability of the carrier. The carriage of certain hazardous materials, like aerosols, fireworks, and flammable liquids, aboard the aircraft is forbidden. If you do not understand these restrictions, further information may be obtained from your airline.
Sheraton Centre Toronto Hotel
123 Queen Street West
Toronto, ON M5H 2M9
Canada
Tel: (416) 361-1000 Fax: 416-947-4854

Allan Hawkins

<table>
<thead>
<tr>
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<td>Rooms HST</td>
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***For Authorization Purpose Only***

<table>
<thead>
<tr>
<th>Date</th>
<th>Code</th>
<th>Authorized</th>
</tr>
</thead>
<tbody>
<tr>
<td>26-SEP-16</td>
<td>077631</td>
<td>661.81</td>
</tr>
</tbody>
</table>

** Total: 796.92
*** Balance: -796.92

Continued on the next page
Sheraton Centre Toronto Hotel
123 Queen Street West
Toronto, ON M5H 2M9
Canada
Tel: (416) 361-1000 Fax: 416-947-4854

Allan Hawkins

<table>
<thead>
<tr>
<th>Page Number</th>
<th>Guest Number</th>
<th>Folio ID</th>
<th>Arrive Date</th>
<th>Depart Date</th>
<th>No. Of Guest</th>
<th>Room Number</th>
<th>Club Account</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>6440144</td>
<td>A</td>
<td>26-SEP-16</td>
<td>29-SEP-16</td>
<td>2</td>
<td>1414</td>
<td></td>
</tr>
</tbody>
</table>

| HST Room:     | 89.31 |
| HST Food and Beverage: | 0.00 |
| HST Telephone: | 0.00 |
| HST Other:    | 0.00  |
| HST Total:    | 89.31 |

Experience Sheraton Club. Upgrade to a higher level of comfort, complete with special touches like complimentary breakfast, a premium selection of beverages and access to the Club lounge. Learn more at www.sheraton.com/club

Tell us about your stay. www.sheraton.com/reviews

Questions on your bill? Please submit your billing inquiries as follows: Go to: www.sheratontoronto.com  Select: "Hotel Features"  Select: "Billing"
Sheraton Centre Toronto Hotel
123 Queen Street West
Toronto, ON M5H 2M9
(416) 361-1000 / 416-947-4854
http://www.starwood.com/

Attn: Allan Hawkins

Arrival Date: 09-25-2016
Departure Date: 09-30-2016

One-Night Deposit Receipt

Tax Identification 844048108

<table>
<thead>
<tr>
<th>Reference</th>
<th>Deposit</th>
<th>Guest Name</th>
<th>Description</th>
<th>Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td>731815146</td>
<td>1 Night</td>
<td>Hawkins, Allen</td>
<td>Rm Chrg</td>
<td>$229.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Rm Chrg HST</td>
<td>$ 29.77</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>DMP Fee</td>
<td>$  6.87</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Total:</td>
<td>CAD $265.64</td>
</tr>
</tbody>
</table>

*DMP Fee = Destination Marketing Program

**The deposit for $265.64 was charged to VISA card ending [redacted] on July 14, 2016.
RECEIPT

Cab No. 08802 H.S.T.

From

Date Sept 26/16  Amount $8.00

Signature

UP Union Pearson Express

GROUP/CONFERENCE ONE-WAY
GROUP/CONFERENCE ALLER SIMPLE 9.00

Pearson Union

EXP 00218
PEARSON AIRPORT, 6350 S1
MISSISSAUGA ON

CARD TYPE VISA
DATE 2016/09/29
TIME 06:26:49

PURCHASE AMOUNT $58.00
TIP $8.70
TOTAL $66.70

APPROVED AUTH# 095051 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS
**Official Journey Authorization**

**Employee Name:** Al Hawkins  
**From:** Gander  
**To:** Toronto  
**From Date:** September 26th, 2016  
**To Date:** September 29th, 2016  

**Purpose of Trip:** To attend Council of Ministers of Transportation FPT meetings

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

**Mode of Travel:**  
- Air  
- Personal Vehicle

**Estimated Total Trip Cost:** $1,800.00

**Employee's Signature:**  
**Date:** Aug 31/16

**Divisional Director/Assistant Deputy Minister**

**Deputy Minister**

**Summary of All Anticipated Expenses Equal to the Amount of the Advance Required (Travel Advance Only):**

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taxi, Limo, or Bus Fare to and from Departure Points</td>
<td>$0.00</td>
</tr>
<tr>
<td>Transportation Cost (if travel order is not issued)</td>
<td>$0.00</td>
</tr>
<tr>
<td>Accommodations for _______ Nights (Hotel/ Private)</td>
<td>$0.00</td>
</tr>
<tr>
<td>Meals for _______ Days (at approved rates)</td>
<td>$0.00</td>
</tr>
<tr>
<td>Other:</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Cash Advance Required:**

- Yes
- No

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