

Board Member Expense Form

Name:	Dr. Re Ann Colbourne	
Signature:	Mellen	Date: Que 20/18.
-		

Date:	Type of Expense:	Account:	Description:	Subtotal:	GST:	Total:
July 30, 2018	Hosting	6003	Board Chair/President Lunch Meeting			60.38
	3					
	-	n n			<u> </u>	-
		:				
		-	*			
ni.				Total Co	ost:	60.38

FOR OFFICE USE ONLY

是其中 医原子氏	Budget Deta	ils	医 种种 医神经病	
PO#	Fund	Dept ID	Location	
14981	10	10000	999	
Signing Authority Name & Title:	Signature:		Date:	
Carla Madra, Finance & Audit C	ommittee Chair		August 23, 2016	

Additional Information:

- 1. As per the Travel and Business Policy, hosting expenses require identification of the date, purpose of the event, and the name of all people in attendance (use notes section below).
- 2. Detailed itemized receipts are required. Non-detailed credit card transaction receipts are not accepted as they do not provide details of the purchase.
- 3. Personal vehicle use is reimbursed at \$0.48/KM driven.
- 4. If project and analysis codes are required, please add them to the description line.

	Notes	

	Attendees	
Dr. Re Ann Colbounre		
Dr. Jodi Abbott		

Am

CHARACTERS REST 10257 - 105 Street EDMONTON, AB. T5J 1E3 (780) 421-4100 GST# 89206-4429

Rem MUSGRAVE

Tb1 3/1	SAN		Gst	2
	Ju130'18	3 12:08P	М	
1 FRI	ES		0.00	
1 SPI	NACH		14.00	
1 SPI	NACH PRAM	INS	20.00	
2 HER	BAL TEA 6	4.00	8.00	
2 POP	@ 4.00		8.00	
Foo	d		34.00	
	_		16.00	
	erage			
GST			2.50	
01:17PM	Amount D	ue 52	.50	

WELCOME TO CHARACTERS! & HAVE A GREAT DAY!! Ann

```
CHARACTERS FINE DINING
10257 105th Street
Edmonton AB T5J 1E3
780-421-4100
```

** TRANSACTION RECORD **

Tran. #: 26035
RUC: RESTAURANT
Table #: 3
Check #: 1304
Group #: 1
Employee #: Restaurant

Visa Credit Purchase

××××××××××××

AID: A0000000031010

Amount \$52.50 Tip \$7.88

TOTAL CAD\$60.38

APPROVED 019601 00-001 019601 CHARAWS1/CHARAWC1 212001001004 2018/07/30 13:37:34

TUR: 0080008000 TSI: F800

No signature required

Customer Copy