

Expense Disclosure Reporting Form

Name: Fred Nowicki, Board Member

For the Period:

Mar-17

Travel, Seminars/Conference and Associated Expenditures

Date of expense	Destination	Purpose	Airfare	Other Transportation	Accommodation	Meals (includes per diem allowances)	Seminar / Conference / Registration fees	Total
1	Mar 7-8, 2017	Airdrie, AB	To attend Industry Task Force (ITF) meeting		\$259.08	\$114.45	\$30.00	\$403.53
2								\$0.00
3								\$0.00
4								\$0.00
5								\$0.00
6								\$0.00
7								\$0.00
8								\$0.00
9								\$0.00
10								\$0.00
Travel Related								\$403.53

[Notes](#)

Non-travel related Expenditures (Business meals, etc...)

Dates	Purpose	Total
1		\$0.00
2		\$0.00
3		\$0.00
4		\$0.00
5		\$0.00
6		\$0.00
7		\$0.00
8		\$0.00
9		\$0.00
10		\$0.00
Non-Travel Related		\$0.00

[Notes](#)

Total claimed for reporting period: \$403.53

Mileage & Per Diem Allowances

Employee Name	Expense Type	Submitted Date	Trip Info	Trip Start Date	Trip End Date	Expense Trans Date	Detail Description	Total Amount (Includes GST/HST)	Summary Item Reference
Fred Nowicki	Travel Meal Allowance	3/21/2017	01. 03/07/2017 at 02:00 PM to 03/08/2017 at 04:00 PM - Airdire AB ~ to attend ITF meeting.	3/7/2017	3/8/2017	3/7/2017	Meals - dinner (Mar 7), other meals provided.	\$30.00	1
Fred Nowicki	Mileage	3/21/2017	01. 03/07/2017 at 02:00 PM to 03/08/2017 at 04:00 PM - Airdire AB ~ to attend ITF meeting.	3/7/2017	3/8/2017	3/7/2017	Mileage (508 km) Lethbridge to Airdrie r/t.	\$259.08	1

Nowicki Trip # 1



Hampton Inn & Suites Airdrie
 52 East Lake Avenue NE • Airdrie, AB T4A 2G8
 Phone (403) 980-4477 • Fax (403) 980-0535



NOWICKI, FRED	name address	room number: 327.	If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.
		arrival date: 3/7/2017 9:16:00 PM	
		departure date: 3/8/2017 12:23:00 PM	
		adult/child: 2/0	
		room rate: 105.00	
		Rate Plan: ITF	

Confirmation Number: 3/8/2017

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. 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 association fails to pay for any part or the full amount of these charges. A fee of up to 250 CAD will be assessed for smoking in a non-smoking room. Please ask the Front Desk for locations of designated outdoor smoking areas.

date	reference	description	amount
3/7/2017	111301	GUEST ROOM	\$105.00
3/7/2017	111301	GST- ROOMS	\$5.25
3/7/2017	111301	OCCUPANCY TAX- ROOMS	\$4.20
3/8/2017	111380	**BALANCE**	(\$114.45)
			\$0.00
EXPENSE REPORT SUMMARY			
		3/7/2017 STAY TOTAL	
ROOM AND TAX		\$114.45	\$114.45
DAILY TOTAL		\$114.45	\$114.45
Total Invoice Amount	\$105.00	\$9.45	

thanks.

for reservations call 1.800.hampton or visit us online at hampton.com

account no.	date of charge 3/8/2017	folio/check no.
card member name NOWICKI, FRED	authorization	initial
establishment no. and location GST # - 850899287	purchases & services	
	taxes	
	tips & misc.	
signature of card member X	total amount	-114.45