# TRAVEL CLAIM FORM FOR ELECTED OFFICIALS TRAVEL INFORMATION

Travel Dates May 3/1/3 Jule 3/16  Destination
Destination
nadian municipalities.
Tradeshow (Fcm)
r(1)(b)(i)
Activity Account
for the purposes of attendance to this travel.

This section is completed by the Finance Department

	Date	Payable To	Doc. Ref.	
Registration	Feb5/13	FCM- Pland Transaction	-a74aa.	s_ 735,00·
Airfare			111. 100.411 100.000.00	\$
Cash				\$
Other				\$
TOTAL ADV	ANCES (transfe	r total to page 2)		s(/

Original:

Finance Department

Copy:

Department

TYPE OF	DETAILS OF EXPENDITURES							
EXPENDITURE	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7	TOTALS
Accommodation	255.14	255.14	255.14	255.14	255.14			\$1275.70
Meal Allowance Breakfast (\$10.00 per meal)		<u></u>				1500		\$10.00
Lunch (\$14.00 per meal)	14.00		14.00		14.00	14.00		\$56.00
Dinner (\$22.00 per meal)	22.00	22.00	22.00		22.0D	22.00		S110.0D
Incidental (\$6.00 per day)	6.00	60.00	6.00	صع	<u>600.d</u>	1000		\$36.00
Daily Remuneration								s
TOTALS	297.14	283.14	297.14	261.14	297.14	52,00		\$ <u>1487.70</u> (B)

DESCRIPTION OF ITEM OF EXPENDITURE	TOTALS
Registration	\$735.00
Airfare	\$735.00 \$430.00
Automotive (S0.42_per Km.)	s
Other Taxi	2 80.00
TOTAL OTHER EXPENDITURES	\$ 1245. 06(c)

### EXPENDITURE SUMMARY

TOTAL DAILY EXPENDITURES (total (B) on this page) TOTAL OTHER EXPENDITURES (total (C) on this page)	\$1487.70°
TOTAL TRIP EXPENDITURES  LESS: TRAVEL ADVANCES (total (a) on page 1)	\$232.76. V
LESS: 20% TAX WITHHELD ON DAILY REMUNERATION	(\$)
AMOUNT DUE TO (FROM) ELECTED OFFICIAL	s 1997. 76.

This is to certify that the above travel expenses have been incurred by me in the discharge of my duties as a member of City Council. I have confirmed that the expenses are allowed in accordance with the provisions of the Elected Official Travel Policy and hereby request their reimbursement.

28(1) Signature Removed

Bryon Burnett Signature of Elected Official

Date



Mr. Bryon Burnett 2047 Wascana Greens Regina, SK S4V 2M3

Canada

Room Number

: 1511

Folio Number Cashier Number : 31

: 97270

Page Number

Arrival Date

: 1 of 1 : 30-MAY-2013 : 04-JUN-2013

**Group Name** 

: Federation of Canadian AthreicipalifoLEIL Departure Date

INFORMATION INVOICE

Date	Description	Addition	al Information	Charges	Credi
05-30-13	Room			219.00	Orcan
05-30-13	Room Tax 10%				
	Room GST 5%			21.90	
	DMF 1.5%			10.95	
05-31-13	and the second s			3.29	
05-31-13	Room Tax 10%			219.00	
	Room GST 5%			21.90	
	DMF 1.5%			10.95	
06-01-13				3.29	
	Room Tax 10%			219.00	
	Room GST 5%			21.90	
	DMF 1.5%			10.95	
06-02-13				3.29	
	Room Tax 10%			219.00	
	Room GST 5%			21.90	
	DMF 1.5%			10.95	
06-03-13	Charles to the contract of the			3.29	
	Room Tax 10%			219.00	
	Room GST 5%			21.90	
	DMF 1.5%			10.95	
6-04-13			17(1)(b)(i)	3.29	resta conservanta
70-04-13	visa				1,275.70
GST Sum	mary:		Total	1,275.70	1,275.70
Room		54.75			- N
F&B		0.00	Balance Due	0.00	
Other		16.45			
GST Regis	17(1)(b)(i)				
neid person	my liability for this bill is not waive ally liable in the event that the association fails to pay for any	indicated nerson	Signature:		



# RESERVATION CONFIRMATION

January 15, 2013

**Bryon Burnett** 

Canada

Dear Burnett.

We wish to thank you for choosing Hotel LeSoleil and are pleased to confirm your reservation. Please kindly review the details below to ensure all the information is correct.

Confirmation Number: 4631402

Guest Name:

**Bryon Burnett** 

**Number of Guests:** 

ests.

Arrival Date:

05-30-13

Departure Date:

06-04-13

Number of Nights:

5

Room Type:

Executive One Bedroom Queen

Room Rate:

CAD \$219.00/ night + Tax

Guaranteed By:

VA

#### \*Tax of 14.24%

Room rates are in Canadian dollars and do not include applicable taxes. For Guaranteed Reservation, a one-night room and tax charge will be levied in the event of cancellation after 4:00pm Pacific Time one day prior to arrival, or non-arrival on the arrival day.

Should you have any questions or need further assistance, please feel free to contact our Reservations Department at 1-877-632-3030 or 604-632-3000.

We look forward to welcoming you as our guest.

Kris Eisnor

# Amber Smale - FCM Event Registration - Inscription d'événement de la FCM - FCM's Annual nference and Trade Show /Congrès annuel et salon professionnel de la FCM

From:

<register@fcm.ca>

To:

<br/>
<br/>
bburnett@regina.ca>

Date:

2/5/2013 3:05 PM

Subject: FCM Event Registration - Inscription d'événement de la FCM - FCM's Annual Conference

and Trade Show /Congrès annuel et salon professionnel de la FCM

CC:

<amazzotti@regina.ca>

La version française se trouve à la suite du texte anglais

# Registration confirmation

FCM's Annual Conference and Trade Show /Congrès annuel et 17(1)(b)(i) salon professionnel de la FCM

05/31/2013 - 06/03/2013

Thank you for your registration. Please print this page as proof of payment for your records. 電

### Your information

Name:

Bryon Burnett

Job title:

Councillor

Organisation: City of Regina

Address:

Telephone:

(306) 777-7000

Email:

bburnett@regina.ca

# Registration summary

Registration Package: Early-Member

# **Bryon Burnett**

Invoice number / Numéro de facture: 27422

Confirmation number / Numéro de confirmation: 25790

Registration Cost / Côut d'inscription	\$ 735.00
Functions / Fonctions:	
Welcome Reception   Réception et cocktail de bienvenue	\$0.00
Cocktails & Gala Dinner   Dîner de gala	\$0.00
Farewell Breakfast   Déjeuner de clôture	\$0.00

<sup>\*</sup>Please see the FCM Website for more details as well as the terms and conditions as accepted.

# Payment detail

Amount Paid: \$735.00

17(1)(b)(i)

Balance Due: \$0

Payment Type: VISA

Credit Card Number:

# Confirmation de l'inscription

FCM's Annual Conference and Trade Show /Congrès annuel et salon professionnel de la FCM

05/31/2013 - 06/03/2013

Merci pour votre inscription. Veuillez imprimer cette preuve de paiement pour vos dossiers.

#### Vos coordonnées :

Nom:

Bryon Burnett

Titre:

Councillor

Organisation: City of Regina

Adresse:

Téléphone:

(306) 777-7000

Courriel:

bburnett@regina.ca

### Sommaire des frais

ramme d'inscription : Early-Member

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# Registration confirmation

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Thank you for your registration. Please print this page as proof of payment for your records.

#### Your information

Name:

**Bryon Burnett** 

Job title:

Councillor

Organisation: City of Regina

PO Box 1790

Address:

2476 Victoria Avenue

Regina, SK S4P 3C8

Telephone: (306) 777-7000

Email:

bburnett@regina.ca

#### Registration summary

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#### Bryon Burnett

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2 1

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\$0.00

Cocktails & Gala Dinner | Dîner de gala

Farewell Breakfast | Déjeuner de clôture

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Organisation: City of Regina

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\$ 735.00

Functions / Fonctions:

Welcome Reception | Réception et cocktail de bienvenue

Cocktails & Gala Dinner J Diner de gala

\$0.00

\$0.00

Farewell Breakfast | Déjeuner de clôture

\$0.00

Veuillez consulter le site web de la FCM pour plus de reseignements et pour consulter les conditions d'inscriptions telles

# Détails de palement

Montant facturé : \$735.00

Montant dû : \$0

Type de paiement :VISA

Numéro de carte de credit : -

17(1)(b)(i)

Technical problems with registration? Probleme technique avec l'inscription?

Questions?

Tradeshow questions? Questions au sujet du salon professionnei

register@fcm.ca inscription@fcm.ca 613-907-6212

membership@fcm.ca

adhesion@fcm.ca 613-907-6273

tradeshow@fcm.ca salon@fcm.ca 613-907-6348

# AIR CANADA

#### Passenger Information

Passenger 1

Name:

Mr Bryon Burnett

Ticket number:

014 2116 561554

430.06

Program number:

Fare Summary

Frequent Flyer Pgm:

#### Passenger: 1 Ticket number 0142116 561554

Date of issue 15-Jan 2013 Fare Amount in Canadian dollars: 354.00 (including navigational & other charges) Taxes, Fees & Charges Canada Security Charge (CA) Canada Goods and Services Tax (GST/HST #10009-2287) (XG) 14.25 Combined Taxes \*see fare calculation below (XT) 19.41 42.40 Total Fare in Canadian dollars:

Ticket particularities: AC ONLY/NON-REF/ CHGE FEE ACPEDIA 6772218 CIC48/905

\*Fare calculation: 30MAY13YQR AC X/YYC AC YVR Q18.00R159.00AC X/YYC Q18.00AC YQR R159.00CAD354.00 END ROE1.00 XT2.40RC40.00SQ Canadian tax registration numbers: XG Canada Goods and Service Tax (GST) #10009-2287 RC Canada Harmonized Sales Tax (HST) #10009-2287 XQ Quebec Sales Tax (QST) #1000-043-172

#### Fare Rules

Voluntary changes to your itinerary may require the payment of additional fees and fare upgrades.

If you are travelling on a non-refundable ticket, Air Canada will be unable to make exceptions in the event of an unexpected trip cancellation or medical emergency. We recommend the purchase of travel insurance. Tickets are non transferable and name changes are not permitted.

Advance seat assignments are not guaranteed and may be changed without notice. If your pre-assigned seat is unavailable, we will try to accomodate you in a comparable seat in the same class of service and will refund any applicable refundable fees.

#### Important Information

This is your E-ticket itinerary/receipt. Keep this document for your travel. Your flight coupons are stored in our reservation system. The Conditions of Contract and other legal notices are provided with this itinerary/receipt.

Please review this itinerary/receipt and should you have any questions, please call 1-888-247-2262 within 24 hours of receipt.

Air Canada is required by federal government regulations to check identification at the departure gate for all passengers who appear to be 18 years of age or older. The name on the identification must match the name used on the reservation or ticket. The passenger must present: one (1) piece of government-issued ID with photo or two (2) pieces of government-issued ID without photo. For air travel between Canada and the United States, all passengers including Canadian and U.S. citizens, are required to present a



# Itinerary / Receipt

Your booking is confirmed. Thank you for choosing Air Canada. Please bring your itinerary-receipt to the airport.

### **Main Contact Information**

Booking reference: MQV5FV

Name:

Mr Bryon Burnett

E-mail

BBURNETT@REGINA.CA

Form of payment:

17(1)(b)(i)

**Electronic Ticketing confirmed.** 

This is your official itinerary/receipt.

Customer Care Air Canada Reservations 1-888-247-2262 Air Canada Flight Information 1-888-422-7533

International Reservations

Alert me of flight changes Flight notification

### Flight Itinerary

Flight AC8437	From		То		Aircraft	Booking class	Status
7100157	Regina	(YQR)	Calgary	(YYC)	DH4	Α	Confirmed
Operated by:	Thu 30-May 2013		Thu 30-1	May 2013			
Air Canada Express- Jazz	- 09:20		ada Express- 09:20 10:52				
AC213	Calgary (Y	YC)	Vancouv	er (YVR)	319	A	Confirmed
	Thu 30-Ma 12:15	ay 2013	Thu 30-M 12:40 -	lay 2013 TERMINAL M -MAIN			
AC220	Vancouver	(YVR)	Calgary (	YYC)	E90	Α	Confirmed
	Tue 04-Jun 16:00 - TE	1 2013 ERMINAL M -MAIN	Tue 04-Ju 18:20	un 2013			
AC8434	Calgary (Y	YC)	Regina	(YQR)	DH4	A	Confirmed
Operated by:	Tue 04-Jun	2013	Tue 04-Ju	ın 2013			- and a second
Air Canada Express- lazz	19:35		21:00				



### Passenger Information

Passenger 1

Name:

Mr Bryon Burnett

Ticket number:

014 2116 561554

Program number:

#### Fare Summary

Frequent Flyer Pgm:

# Passenger: 1 Ticket number 014 2116 561554

Date of issue	
Fare Amount in Canadian dollars:	15-Jan 2013
(including navigational & other charges)	354.00
Taxes, Fees & Charges	
Canada Security Charge (CA)	
Canada Goods and Services Tax (GST/HST #10009-2287) (VG)	14.25
Combined Taxes *see fare calculation below (XT)	19.41
,	42.40
Total Fare in Canadian dollars:	
A CONTROL OF THE CONT	430.06

Ticket particularities: AC ONLY/NON-REF/CHGE FEE ACPEDIA 6772218 CIC48/905

\*Fare calculation:

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Meals:
Thursday May 30 - Lunch Binur
Friday May 31 - Denner
Daturday May 1- Zunch / Denner
Sunday June 2 - Buch Monday June 3 - Lunch / Benner
Tues June 4 - Full his Diem

567 HORNBY STREET, VANCOUVER, BC V6C 2E8 TEL: 604-632-3000 FAX: 604-632-3001 www.hotellesoleil.com RESERVATIONS TOLL FREE: 1-877-632-3030

Cash Receipt
For prompt, safe and courteous service call...

NOTHERD HUHIZATION ORDER RELEASE REQUESTOR: Sand tor Bryon James Barnet COMPLETED NUMBER MUST BE INDICATED ON ALL AND CORRESPON ADDRESS. SHIP TO \_ DATE REQUIRED AS PER ATTACHED PACKING SLIP! LOC N QTY. DESCRIPTION QUANTITY UNIT UNIT PRICE FUND ACTIVITY ACCOUNT PROJECT WORK ORDER TASK REC'D INVOICE NO. \_ (EXCLUDING TAX) Manuel travel 17(1)(b)(i) \$1337.76 Carin John 11111111111 NOTES APPROVAL TO APPROVER: REQUESTOR 28(1) Signature Removed 9 5 E E G W 1 1 3 Massamba Fall TO BUYER (PURCHASING BRANCH): DEPARTMENT AUTHORIZATION PLACE ORDER WITH SUPPLIER SEND CONFIRMATION ORDER TO SUPPLIER PHONE NO.

(PLEASE PRINT) SOURCE AVAILABILITY/PRICING AND ADVISE OTHER\_ SIGNATURE TO RECEIVER: RECEIVING NAME PHONE NO. \_ SIGNATURE DATE GOODS/SERVICES RECEIVED