

**ATHABASCA UNIVERSITY  
EXECUTIVE EXPENSE REPORT**

Dr. Cindy Ives  
Interim Vice President, Academic  
February 1, 2017 to March 31, 2017

1) Travel expenses

\* "Transportation" includes airfare, public transportation, taxis, parking, mileage per diem, and fuel

\*\* "Incidentals" includes registration fees, telephone calls, internet charges, etc

\*\*\* "Recovery" refers to reimbursements from external parties

Travel Date(s)	Destination	Purpose	Transportation*	Accommodation	Meals	Incidentals**	Hospitality & Working Sessions	Recovery ***	Total
Jan 17 - 20, 2017	Edmonton	Business Meetings	153.60	538.89	90.00	-	-	-	782.49
Jan 9 - 10, 2017	Edmonton	Business Meetings	153.60	179.63	40.00	-	54.95	-	428.18
Jan 3 - 6, 2017	Edmonton	Business Meetings	153.60	538.89	105.00	-	108.92	-	906.41
Dec 7 - 10, 2016	Edmonton, Calgary	Business Meetings	602.51	516.14	85.00	-	-	-	1,203.65
Jan 26 - 27, 2017	Edmonton	Business Meetings	153.60	179.63	-	-	-	-	333.23
Feb 7 - 10, 2017	Edmonton	Business Meetings	153.60	538.89	65.00	-	-	-	757.49
Mar 1 - 3, 2017	Edmonton	Business Meetings	139.20	323.71	25.00	-	-	-	487.91
Mar 8 - 10, 2017	Edmonton	Business Meetings	153.60	359.26	80.00	-	-	-	592.86
			<b>\$ 1,663.31</b>	<b>\$ 3,175.04</b>	<b>\$ 490.00</b>	<b>\$ -</b>	<b>\$ 163.87</b>	<b>\$ -</b>	<b>\$ 5,492.22</b>

Receipts for the respective expenses are attached. The balance represents per diem payments that are not receipted.  
Please refer to the "Travel and Expense Claim Policy" for per diem rates. <http://ous.athabascau.ca/policy/finance/travelexpenseclaimpolicy.htm>

Mrs Cindy Ives

Athabasca AB  
Canada

Room Number: 1607  
Arrival Date: 01-17-17  
Departure Date: 01-20-17  
Page No: 1 of 2

Guest Name:

**INFORMATION INVOICE**

Folio No: 272713

01-31-17

Date	Description	Charges	Credits
01-17-17	Room Revenue	160.00	
01-17-17	Destination Marketing Fee - 3%	4.80	
01-17-17	Tourism Levy - 4%	6.59	
01-17-17	Room GST - 5%	8.24	
01-18-17	Room Revenue	160.00	
01-18-17	Destination Marketing Fee - 3%	4.80	
01-18-17	Tourism Levy - 4%	6.59	
01-18-17	Room GST - 5%	8.24	
01-19-17	Room Revenue	160.00	
01-19-17	Destination Marketing Fee - 3%	4.80	
01-19-17	Tourism Levy - 4%	6.59	
01-19-17	Room GST - 5%	8.24	
01-20-17	Visa XXXXXX		538.89

Mrs Cindy Ives

Athabasca AB  
Canada

Room Number: 1607  
Arrival Date: 01-17-17  
Departure Date: 01-20-17  
Page No: 2 of 2

Guest Name:

**INFORMATION INVOICE**

Folio No: 272713

01-31-17

Date	Description	Charges	Credits
<b>Total</b>		<b>538.89</b>	<b>538.89</b>
<b>Balance</b>		<b>0.00</b>	

**Signature:** \_\_\_\_\_

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008

49th STREET GRILL  
4901 49 ST  
ATHABASCA AB

CARD \*\*\*\*\*6766  
CARD TYPE VISA  
DATE 2017/01/09  
TIME 4835 13:08:12  
RECEIPT NUMBER  
C84118624-001-267-006-0

-----  
PURCHASE  
AMOUNT \$47.78  
TIP \$7.17 ✓  
TOTAL

\$54.95  
-----

VISA  
A0000000031010  
3E14B63AE8803ADD  
0080008000-E800  
30FF1CCF86E92DC2  
0080008000-F800

**APPROVED**

AUTH# 043693 01-027  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

Mrs Cindy Ives

Athabasca AB  
Canada

Guest Name:

**INFORMATION INVOICE**

Folio No:

Room Number: 0809  
Arrival Date: 01-09-17  
Departure Date: 01-10-17  
Page No: 1 of 1

RECEIVED

JAN 24 2017

FINANCE

01-10-17

Date	Description	Charges	Credits
01-09-17	Room Revenue	185.00	
01-09-17	Destination Marketing Fee - 3%	5.55	
01-09-17	Tourism Levy - 4%	7.62	
01-09-17	Room GST - 5%	9.53	
01-10-17	Adj - Room Revenue 6	-28.07	
01-10-17	Visa <XXXXXX		179.63
<b>Total</b>		<b>179.63</b>	<b>179.63</b>
<b>Balance</b>		<b>0.00</b>	

**Signature:** \_\_\_\_\_

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008

ALLEGRO ITALIAN KITCHEN  
10011 109 STREET  
EDMONTON AB

CARD \*\*\*\*\*6766  
CARD TYPE VISA  
DATE 2017/01/05  
TIME 7194 15:36:55  
RECEIPT NUMBER  
C82036351-001-078-013-0

PURCHASE  
AMOUNT \$94.71  
TIP \$14.21 ✓  
TOTAL

**\$108.92**

VISA  
A0000000031010  
3491E1BDF0A1A2F3  
0080008000-E800  
13074291FD768265  
0080008000-F800

**APPROVED**

AUTH# 096757 01-027  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

Allegro Italian Kitchen  
10011-109th Street  
Edmonton, Alberta  
780-424-6644

Your GST# 896140834

123 PENNY

Check: 1997      Guests: 1  
Table: 99-1

01/05/2017 12:52PM

2	CANNELLONI	32.90
1	1/2 ZITTI CON POLLO	13.95
1	COZZE PEI	15.45
2	1/2 AFFUMICATO	27.90

Subtotal 90.20  
G.S.T. 4.51

**Total Due \$94.71**

**\*\*Please Pay Server\*\***



Mrs Cindy Ives

Athabasca AB  
Canada

Guest Name:

**INFORMATION INVOICE**

Folio No: 271454

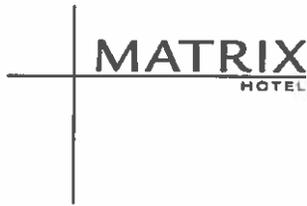
RECEIVED  
JAN 24 2017

FINANCE  
RECEIVED  
JAN 24 2017

Room Number: 1607  
Arrival Date: 01-03-17  
Departure Date: 01-06-17  
Page No: 1 of 2

01-06-17

Date	Description	Charges	Credits
01-03-17	Room Revenue	160.00	
01-03-17	Destination Marketing Fee - 3%	4.80	
01-03-17	Tourism Levy - 4%	6.59	
01-03-17	Room GST - 5%	8.24	
01-04-17	Room Revenue	160.00	
01-04-17	Destination Marketing Fee - 3%	4.80	
01-04-17	Tourism Levy - 4%	6.59	
01-04-17	Room GST - 5%	8.24	
01-05-17	Room Revenue	160.00	
01-05-17	Destination Marketing Fee - 3%	4.80	
01-05-17	Tourism Levy - 4%	6.59	
01-05-17	Room GST - 5%	8.24	
01-06-17	Visa XXXXXX		538.89



Mrs Cindy Ives

Athabasca AB  
Canada

Guest Name:

Room Number: 1607  
Arrival Date: 01-03-17  
Departure Date: 01-06-17  
Page No: 2 of 2

**INFORMATION INVOICE**

Folio No: 271454

01-06-17

Date	Description	Charges	Credits
<b>Total</b>		<b>538.89</b>	<b>538.89</b>
<b>Balance</b>		<b>0.00</b>	

**Signature:** \_\_\_\_\_

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008

Room Name: **315 IVES/CINDY** Rate: **139.00** Depart Time: **12/10/16 09:03** ACCT#: **9017**  
 Type: **GK** Arrive Time: **12/08/16 15:39**

Room Clerk: **ATHABASCA** Address: **AB** Payment: **XXXXXXXXXXXX** RWD#: **613881382**

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE
12/08	PARKING	2NIGHTS		28.57
12/08	GST	2NIGHTS		1.43
12/08	ROOM	315, 1		139.00
12/08	DMF	315, 1		4.17
12/08	GST	315, 1		7.16
12/08	TRSM LEV	315, 1		5.73
12/09	ROOM	315, 1		139.00
12/09	DMF	315, 1		4.17
12/09	GST	315, 1		7.16
12/09	TRSM LEV	315, 1		5.73
12/10	CCARD-VS		342.12	
	PAYMENT RECEIVED BY: VISA		XXXXXXXXXXXX)	
				.00

AS REQUESTED, A FINAL COPY OF YOUR BILL WILL BE EMAILED TO:  
 SEE "INTERNET PRIVATE STATEMENT" ON MARRIOTT.COM

Your Rewards points/miles earned on your eligible earnings will be credited to your account. Check your Rewards Account Statement for updated activity.



**Renaissance Hotel**  
EDMONTON INTERNATIONAL AIRPORT  
Please retain this ticket and use  
for passage for duration of stay



0/09428377/170423800/087866  
049886 08/12/16 00:00

**Parking Card**

**10/12/16 18:00**





Mrs Cindy Ives

Athabasca AB  
Canada

Room Number: 1607  
Arrival Date: 12-07-16  
Departure Date: 12-08-16  
Page No: 1 of 1

**INFORMATION INVOICE**

Folio No: 269843

12-08-16

Date	Description	Charges	Credits
12-07-16	Room Revenue	155.00	
12-07-16	Destination Marketing Fec - 3%	4.65	
12-07-16	Tourism Levy - 4%	6.39	
12-07-16	Room GST - 5%	7.98	
12-08-16			174.02
<b>Total</b>		<b>174.02</b>	<b>174.02</b>
<b>Balance</b>		<b>0.00</b>	

RECEIVED  
JAN 24 2017  
FINANCE

**Signature:** \_\_\_\_\_

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008

## Electronic Invoice

**Prepared For:**  
IVES/CINDY MRS

SALES PERSON	12
INVOICE NUMBER	0009054
INVOICE ISSUE DATE	30 Nov 2016
RECORD LOCATOR	ERFXGN

**Client Address**

**Delivery Address**  
AGENCY PHONE 514-871-8330  
GST 113405179RT0001 QST 1214845322 TQ0001

**Notes**

PLEASE REVIEW YOUR ITINERARY AND CONTACT CWT IMMEDIATELY IF CHANGES ARE REQUIRED. THANK YOU FOR YOUR BUSINESS.  
IF YOU WILL NOT BE TRAVELLING ON THIS TICKET PLEASE CONTACT YOUR COUNSELLOR PRIOR TO SCHEDULED DEPARTURE. THIS TICKET MAY BE SUBJECT TO PENALTIES OR FARE INCREASE. CHANGES MAY BE SUBJECT TO A PENALTY OR FARE INCREASE UP TO AND INCLUDING THE TOTAL COST OF THE TICKET. FAILURE TO CANCEL MAY FORFEIT THE TOTAL VALUE OF THE TICKET. FARES ARE SUBJECT TO CHANGE WITHOUT NOTICE. NOT GUARANTEED UNTIL TICKETED. CHANGES MAY INCREASE THE FARE.

**DATE: Fri, Dec 09**

**Flight: WESTJET 238**

From	EDMONTON INTL AB, CANADA	Departs	6:15am
To	CALGARY INTL AB, CANADA	Arrives	7:14am
Duration	0hr(s) 59min(s)	Class	Economy
Type	BOEING 737-700 JET	Meal	
Stop(s)	Non Stop		

**DATE: Fri, Dec 09**

**Flight: WESTJET 3291 Operated by: WESTJET ENCORE**

From	CALGARY INTL AB, CANADA	Departs	7:00pm
To	EDMONTON INTL AB, CANADA	Arrives	7:57pm

Duration	0hr(s) 57min(s)	Class	Economy
Type	DEHAVILLAND DASH 8-400 TURBOPROP	Meal	
Stop(s)	Non Stop		

**DATE: Wed, Jun 07**

**Others**

INFO  
THANK YOU FOR  
CHOOSING  
CARLSON  
WAGONLIT  
TRAVEL  
Trans Fees

Billed to:	VI XXXXXXXXXXXXX	CAD * 39.00
V.A.T./G.S.T./H.S.T.		CAD * 1.95
Q.S.T.		CAD * 0.00

**Ticket Information**

<b>Ticket Number</b>	WS 1157729048	<b>Passenger</b>	IVES CINDY MRS		
		<b>Billed to:</b>	XXXXXXXXXXXXX.	CAD	* 370.25
			V.A.T./G.S.T./H.S.T.	CAD	* 18.51
			Q.S.T.	CAD	* 0.00
			<b>Total base fare amount</b>	CAD	311.00
			<b>Total Taxes</b>	CAD	98.25
			<b>Total V.A.T./G.S.T./H.S.T.</b>	CAD	20.46
			<b>Total Q.S.T.</b>	CAD	0.00
			<b>Net Credit Card Billing</b>		* CAD 429.71
			<b>Total Amount Due</b>	CAD	0.00

**ITINERARY NOTES:**

RESERVATIONS MUST BE BOOKED IN THE EXACT NAME ON THE TRAVELLERS'S PASSPORT OR I.D. ENTRY TO ANOTHER COUNTRY MAY BE REFUSED EVEN IF THE REQUIRED INFORMATION AND TRAVEL DOCUMENTS ARE COMPLETE.

THE DEPARTMENT OF HOMELAND SECURITY INFORMATION REQUIRED TO BE COLLECTED FROM YOU OR YOUR PROFILE WAS SENT TO THE TSA WHO MAY BE IN CONTACT WITH YOU FOR ADDITIONAL INFORMATION. TO VIEW THE TSA PRIVACY POLICIES THE RECORDS NOTICE OR THE PRIVACY IMPACT ASSESSMENT GO TO WWW.TSA.GOV.

I DECLINED TO PURCHASE THE FOLLOWING TRAVEL INSURANCE OPTIONS THAT MY TRAVEL AGENT HAS OFFERED AND EXPLAINED TO ME

\* COVERAGE FOR THE FULL DOLLAR VALUE OF THE TRIP

NONE OF CARLSON WAGONLIT CANADA OR YOUR CWT TRAVEL AGENT ADVISOR OR YOUR CWT TRAVEL AGENCY WILL BE RESPONSIBLE FOR ANY EXPENSES LOSSES CLAIMS LIABILITIES COSTS ACCOUNTS CHARGES TAXES ACTIONS DEMANDS OR DAMAGES OF ANY NATURE WHATSOEVER ARISING AS A RESULT OF YOU DECLINING TO PURCHASE TRAVEL INSURANCE FOR THE FULL VALUE AND

BOARDING IF NOT CHECKED IN OR NOT ARRIVING AT THE  
CORRECT DEPARTURE GATE ON TIME.

LIVING STANDARDS AND PRACTICES AT DESTINATION  
INCLUDING PROVISION OF UTILITIES SERVICES AND  
ACCOMMODATION MAY DIFFER FROM THOSE IN CANADA.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING  
CARLSON WAGONLIT TRAVEL IS NOT RESPONSIBLE FOR ANY  
CONSEQUENTIAL DAMAGES WHATSOEVER.

CARLSON WAGONLIT TRAVEL IS AN AGENT-INTERMEDIARY  
BETWEEN YOU AND THE SUPPLIER AND DOES NOT TAKE  
RESPONSIBILITY FOR SUPPLIER OPERATIONS HOTEL CHANGES  
OR ANY OTHER SUPPLIER ACTS OR OMISSIONS OUT OF OUR  
DIRECT CONTROL.

CARLSON WAGONLIT TRAVEL STRONGLY RECOMMENDS THAT YOU  
PURCHASE TRAVEL INSURANCE PARTICULARLY FOR MEDICAL  
AND HOSPITALIZATION CANCELLATION OR LOSS OF LUGGAGE.

TO VIEW CWT PRIVACY POLICY  
[WWW.CWTVACATIONS.CA/CWT/DO/INFO/PRIVACY](http://WWW.CWTVACATIONS.CA/CWT/DO/INFO/PRIVACY)  
PLEASE VISIT [WWW.CARLSONWAGONLIT.COM/AIRLINEBAGGAGEFEES](http://WWW.CARLSONWAGONLIT.COM/AIRLINEBAGGAGEFEES)  
FOR INFORMATION ON FREE BAGGAGE ALLOWANCE AND/OR APPLICABLE  
FEES FOR CARRY ON AND CHECKED BAGGAGE RELATED TO YOUR FLIGHT.

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.

Your travel arranger provides the information contained in this document. If you have any questions about the content, please contact your travel arranger. For Credit Card Service fees, please see eTicket receipt for total charges.



Mrs Cindy Ives

Canada

Guest Name:

Room Number: 1009  
Arrival Date: 01-26-17  
Departure Date: 01-28-17  
Page No: 1 of 1

**INFORMATION INVOICE**

Folio No:

01-28-17

Date	Description	Charges	Credits
01-26-17	Room Revenue	160.00	
01-26-17	Destination Marketing Fee - 3%	4.80	
01-26-17	Tourism Levy - 4%	6.59	
01-26-17	Room GST - 5%	8.24	
01-28-17	Visa	XXXXX	179.63
<b>Total</b>		<b>179.63</b>	<b>179.63</b>
<b>Balance</b>		<b>0.00</b>	

RECEIVED  
JAN 31 2017  
FINANCE

**Signature:**

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008

Mrs Cindy Ives

Athabasca AB  
Canada

Guest Name:

**INFORMATION INVOICE**

Folio No:

Room Number: 1602  
Arrival Date: 02-05-17  
Departure Date: 02-10-17  
Page No: 1 of 2

RECEIVED  
FEB 14 2017  
FINANCE

02-10-17

Date	Description	Charges	Credits
02-07-17	Room Revenue	160.00	
02-07-17	Destination Marketing Fee - 3%	4.80	
02-07-17	Tourism Levy - 4%	6.59	
02-07-17	Room GST - 5%	8.24	
02-08-17	Room Revenue	160.00	
02-08-17	Destination Marketing Fee - 3%	4.80	
02-08-17	Tourism Levy - 4%	6.59	
02-08-17	Room GST - 5%	8.24	
02-09-17	Room Revenue	160.00	
02-09-17	Destination Marketing Fee - 3%	4.80	
02-09-17	Tourism Levy - 4%	6.59	
02-09-17	Room GST - 5%	8.24	
02-10-17	Visa	542.04 Split into 538.89 and 3.15. XXXXXX	538.89



Mrs Cindy Ives

Athabasca AB  
Canada

Guest Name:

Room Number: 1602  
Arrival Date: 02-05-17  
Departure Date: 02-10-17  
Page No: 2 of 2

**INFORMATION INVOICE**

Folio No:

02-10-17

Date	Description	Charges	Credits
	<b>Total</b>	<b>538.89</b>	<b>538.89</b>
	<b>Balance</b>	<b>0.00</b>	

**Signature:** \_\_\_\_\_

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008



# Best Western Plus The Inn at St.Albert

www.bestwesternstalbert.com

460 St Albert Trail

St Albert, AB T8N 5J9

Telephone: (780)470-3800 Fax: (780)470-0038

Mar 03, 2017

8:42 am

Each Best Western® branded hotel is independently owned and operated.

Cindy Ives

RECEIVED

MAR 13 2017

FINANCE

Folio #: 102336

Room Number: 227

Rate: \$143.99

Rate Change During Stay:

3/1/2017 - \$143.99 All

3/2/2017 - \$152.99 All

Arrival Date: Wednesday, March 01, 2017

Departure Date: Friday, March 03, 2017

Best Western Rewards Member #:

Best Western Rewards Tier: BASE

Information:

Pay Method: VI4740

Date	Department	Reference	Voucher	Room	Debit	Credit
3/1/2017	Room postings	Auto Posted		227	\$143.99	
3/1/2017	Room GST	Auto Posted		227	\$7.20	
3/1/2017	Tourism Levy	Auto Posted		227	\$5.76	
3/2/2017	Room postings	Auto Posted		227	\$152.99	
3/2/2017	Room GST	Auto Posted		227	\$7.65	
3/2/2017	Tourism Levy	Auto Posted		227	\$6.12	
3/3/2017	Visa	EXPRESS CHECKOUTVI4740		227		\$323.71

Thank you for being our guest.

GST# 84067 3925 RT 0003

I agree that my liability for all charges is not waived

Tax Summary	
Room GST	\$14.85
Tourism Lev	\$11.88

Balance: \$0.00

Signature \_\_\_\_\_

RECEIVED  
MAR 13 2017  
FINANCE

Dr Cindy Ives

Canada

Guest Name:

Room Number: 1606  
Arrival Date: 03-08-17  
Departure Date: 03-10-17  
Page No: 1 of 1

**INFORMATION INVOICE**

Folio No: 277077

03-10-17

Date	Description	Charges	Credits
03-08-17	Room Revenue	160.00	
03-08-17	Destination Marketing Fee - 3%	4.80	
03-08-17	Tourism Levy - 4%	6.59	
03-08-17	Room GST - 5%	8.24	
03-09-17	Room Revenue	160.00	
03-09-17	Destination Marketing Fee - 3%	4.80	
03-09-17	Tourism Levy - 4%	6.59	
03-09-17	Room GST - 5%	8.24	
03-10-17	Visa	XXXXXX	359.26
<b>Total</b>		<b>359.26</b>	<b>359.26</b>
<b>Balance</b>		<b>0.00</b>	

**Signature:** \_\_\_\_\_

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008