

Invoice #	_____
Supplier #	_____
Recurring Payment:	_____
Start Date	_____
End Date	_____
# of Payments	_____
Cycle	_____
Comments:	_____

ACCOUNTS PAYABLE ONLY s.17(1), 17(4)(g)(i)

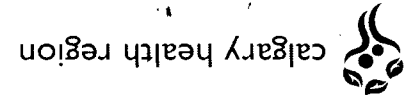
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140	
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer	
TOTAL AMOUNT OF CHEQUE: \$1,024.33			
<input checked="" type="checkbox"/>	CDN	<input type="checkbox"/>	US
<input type="checkbox"/>	Other		
ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT
0 1 7 1 1 2 0 0 0 0 0 0 5	6 9 6 0 0 0 0	802.39	Meeting Expenses - February - March 2006
0 1 7 1 1 2 0 0 0 0 0 0 5	6 9 5 0 0 0 0	185.60	Recognition Expense
0 1 7 1 1 2 0 0 0 0 0 0 5	4 9 0 1 0 0 0	28.84	Book
0 1 7 1 1 2 0 0 0 0 0 0 5	6 2 4 1 0 0 0	7.50	Parking
			GST \$
FINANCIAL CODE			

CODING & AUTHORIZATION

Date		Requested By (Please Print)	
March 24, 2006		Lynn Gallow	
Department People & Learning		Site Southport	
Phone No (in full) 943-1393		Employee/Supplier #	
MAILING ADDRESS (for forwarding of cheque) s.17(1), 17(4)(g)(i)			
Canada Post:			
City			
Province			
Postal Code			
Department People & Learning			
Site Southport			
Purpose of Request			
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS			
MAKE CHEQUE PAYABLE TO: Margaret Munsch			

RECEIVED
 MAR 28 2006
 FINANCE

INSTRUCTIONS: A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED



APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch

FOR THE PERIOD OF February 2006 – March 2006

DATE OF OCCURRENCE REASON FOR THE EXPENSE (Receipts Attached) AMOUNT

February 24, 2006	P & L Clean-Up Committee (lunch)	249.52
March 7, 2006	AUPE/P & L Exec Lunch Meeting	172.94
March 8, 2006	P & L Transition Meeting	21.30
March 15, 2006	Quarterly Follow-Up – Carla Phillips (new assignment)	24.31
March 16, 2006	UNAP & L Exec Lunch Meeting	176.29
March 20, 2006	D. Winn Dinner Meeting (re Contract, Phase II, Support Model, TSS Relationship Model)	158.03

Other

February 18, 2006	Recognition - Pam Hillier (for P&L Quarterly Report)	100.00
March 11, 2006	Recognition - P&L Clean-Up Committee	85.60
March 18, 2006	Farewell Gift – S. Bayliffe Indigo Books (World is Flat)	28.84

Parking

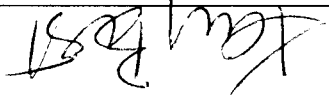
March 22, 2006	Parking CAPP & Bella Functions	7.50
----------------	--------------------------------	------

GRAND TOTAL

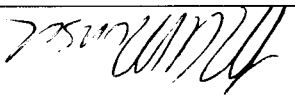
\$ 1024.33

Date March 24, 2006

Approved by Kay Best, FCA
Executive Vice-President, Risk Management
Risk Management & CFO



Margaret Munsch
Senior Vice-President
People & Learning



APPLICANT COPY

FRUITS AND PASSION
100 ANDERSON ROAD T2J3V1
CALGARY AB
22818807

Name: MINSCH MARGARET

Acct #

s.17(1), 17(4)(e.1)

Date 06/03/11 Time 14 05 28

Exp Date 0609 Auth # 066109

Card type VI Tran Code 00

N22818807002 001185021

Subtotal
Tax
Total \$85.60

Signature X

I agree to pay above total amount
according to card issuer agreement
Retain this copy for your records

Top copy-customer Bottom copy-merchant

RAA-PAY PWP HOME FRAGR. 1 8.00 PWP HOME FRAGR. 1 8.00

RAA-FRAGR PWP HOME FRAGR. 1 8.00 PWP HOME FRAGR. 1 8.00

* Sup Total: 80.00
GST/TPS 5.60

0 piece(s) Total Payments 85.60

WRITE VISA VISA : 85.60
VISA and Rate : 85.60 @

35
Authentic 7962
Sales Associate : Laura

s.17(1), 17(4)(e.1)

TIME 18:40
402599

55704
15/06
4502

JACK ASTOR'S - CALGARY
9823 Macleod Trail
CALGARY ALBERTA
403 252-2246

08/06
112 (MTR 733)

DEB
18.98
1.33

SUBTOTAL \$ 20.31
TIP \$ 4
TOTAL \$ 24.31

CUSTOMER COPY

WELCOME TO THE NEW JACK ASTOR'S
I HAVE A BUSINESS CARD FOR YOU
WIN AN OFFICE PARTY

ARE YOU JOINING THE TEAM SPONSOR?
OR BUY A CARD?



Store# 00288 Indigo South Centre
100 Anderson Rd South East
Calgary, AB T2J 3V1

Phone: (403) 225-0033
Fax: (403) 225-0620

* Thank you for shopping at Indigo *
Store# 00288 Term# 002 Trans# 33883
Operator: 703NB 03/18/2006 16:37

SALE

WORLD IS FLAT \$26.95
0374292884
Original Price \$38.50
Bestseller 30% off \$-11.55

Items: 1

Subtotal: \$26.95
GST: 7.0% \$1.89
Total: \$28.84
VISA: \$28.84

You Saved: \$11.55

Items accompanied by a gift receipt
and returned in store bought
condition may be returned
for a credit note for the value
of the item on the receipt

If, for any reason, you purchase an
item that is not totally satisfactory,
please feel free to return it for refund
for exchange within 14 days. We simply ask
that the item be returned in store-bought
condition and be accompanied by a proof
of purchase from any of our stores. Please
note we cannot accept a return or exchange
of magazines or newspapers.



Store# 00288 Term# 002 Trans# 33883
GST Registration # R897152666
0028800200338831

APPLICANT COPY

PASSQULES ON HACLEDD
8806 HACLEDD TR SU
CALGARY

ID: 00999540
SLIP #: 2036
STORE: 0999540

PRE-AUTH \$154.94

POURBOIRE/TIP \$ 18
TOTAL \$ 172.94

SIGNATURE X. *M. Munsch*
VISA
APPROVED AUTH 067383
SER 2840101015 ISO -001
MAR 07 2006 1:25 PM

MERCHANT COPY

APPROVED
1:25 PM 03/18/2006
COFFEE \$ 3.90
HERBAL TEA \$ 2.75
Subtotal \$ 144.00
GST \$ 10.14
Total \$ 154.94

Thank you
Your server is
PLEASE PAY WITH CARD
INDIGO SUNDAY HOURS
1:00 - 2:00 PM
GST #R897152666

BRIN

13

earts
GREAT FOOD GREAT PEOPLE

62 Z-Nicole

101 2017 Chk 925
06Mar'08 08:45PM
ast 0

cards Gift Card 100.00

Total 100.00

ear... your server
W177owPat

Call...
GREAT EXPERIENCE
thece...
403-...
403-...

51#R893005B37RT

Best Copy Possible

s.17(1), 17(4)(e.1)

s.17(1), 17(4)(e.1)

Millions

176.01

#13

FILED IN...
2015 APR 14 11:51 AM
CLERK, AB
(403) 228-9734

Pre Audit

2015 APR 14 11:51 AM

158.00
158.00
158.00

Approval Code: 070040
NOT APPROVED
KIT REQUIRED

20:42:10
Customer Copy

APPLICANT COPY

PALLISER PARKADE
 CALGARY AB
 RECEIPT ONLY!
 PAY STATION: C1

 ENTRY DAT/TIME: 22/03/06 17:36
 PAY DATE/TIME: 22/03/06 17:36
 PARK-DUR.: HRS:MIN 0:03:36
 PAID: \$ 7.50
 VISA
 AUTH. CODE041662
 REF. 10

 * YOU MUST TAKE *
 * ORIGINAL TICKET *
 * WITH YOU AND USE *
 * IT TO EXIT *

 GST INCLUDED
 GST No. RT12201449
 1

 THANK YOU FOR YOUR
 VISIT!

s.17(1), 17(4)(e.1)

CSMR ASHLEY
 MAR.08.06 0001
 NO5591 14:21 #003

GST#R93954416

THANK YOU FOR
 YOUR PATRONAGE

EURST DINING
 CHNG 18.70
 CASH 40.00
 TOTL 21.30
 GSTL 21.30

GST 1.39

#185
 4 SQUARES 9.00
 6 JUICE 12.30
 473ML

CMR SOUTHPORT
 UNIT#63038
 COMPASS GROUP

APPROVED AUTH 077809
 SEQ#732001091034--001
 FEB 24 2006 2:09 PM
 THANK YOU!
 CUSTOMER COPY
 VISA
 09/06 M
 s.17(1), 17(4)(e.1)
 \$249.52
 SALE

ID: A4052039
 STORE: 4052039
 SLIP#: 9778
 11566 24TH STREET
 CALGARY, AB
 SUBWAY

Customer Name
 Joyce



Travel/Education Expense Claim

Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

Employee Name (Print) **Margaret Munsch**
 Department/Site **People Learning**
 Tuition Paid To (if tuition to be paid directly to institution, use Payment Requisition form #10074.) **160002005**
 Course Title **CORPORATE STAFF**
 Estimated/Actual Expenses **Actual Expenses Paid by Employee**
 Departure Date **Oct 16/07** Return Date **Oct 17/07**
 Original Receipts Must Be Attached

Expense Description	Expense	Exchange	Total Funds	Description	Expense	Exchange	Total Funds
Tuition	785.00 (4.5)		785.00 (4.5)	Tuition only if paid by employee	785.00 (4.5)		785.00 (4.5)
Air paid by Calgary Health Region via Calgary Health Region Travel Agent							
Mileage				If travel is by car			
Accommodation				Meals			
Meals Based on per diem rate				Meals			
Ground Transport				Meals			
Ground Transport				Meals			
Other (Specify)				Meals			
Total				Meals			

Advance Requested (80% of estimated expenses & advance exceeds \$250.00)	Less Advance or Undeclared Portion	Balance Due To	Employee Signature	Date
\$	\$	\$		
Total	Total	Total		

Departmental Authorization	Employee Signature	Date	Departmental Authorization	Date

Financial Code **2007-16-06**
 Org Functional Centre **017112004000562414006**
 Account **12**
 Comments/Other Sources of Funding **84584**
26705

the corporate state

PAID \$20

WORK FORCE CRISIS

MARGARET PINNELL

+ \$6.00 - Sandwich on plate

So% = 5/100

THANK YOU FOR VISITING TOAST
GST # 137612901

Amount: \$6.00
PURCHASE
1.40
1.40
0.68
1.48
5.00
3.52

Sub Total: \$5.26
GSTPS: \$0.32
PSTVP: \$0.42

Card: \$6.00

Visa

s.17(1), 17(4)(e.1)

Exp: **/**

Terminal ID: GTAAPP11

Host date: 10/16/07 15:16:57

Auth.: 050438

Response code: 001

ISO:

Ref. #: 006001001043

APPROVED

Thank You

GST/TPS #: 13975970

RECEIPT
GST NO. R122556194

EXIT NO. 42
IN: 10/16/07 07:36
OUT: 10/17/07 21:16
DURATION: 1 13: 48
PAID: \$ 42.00
(GST INCLUDED)
VISA

s.17(1), 17(4)(e.1)

REF. CODE 014699
THANK YOU FOR
YOUR VISIT

Calgary International Airport Parkade

Toronto Pearson Int'l Airport

Retail Id: MA1234

UNPROCESSED

CALGARY INTERNATIONAL AIRPORT

Shift Date: 10/12/07

Entry Date: 10/16/07 10:47:00

Payment Date: 10/16/07 15:21:43

Exit Before: 10/16/07 16:17:00



The Sutton Place Hotel

APPLICANT COPY

Ms Margaret Ann Munsch
10101 Southport Rd SW
Calgary AB T2W 3N2
Canada

INFORMATION INVOICE

Group Code : T0071016BE
Company Name : Bedlam Entertainment Inc

GST No. : R135760569

Room Number : 0919
Arrival Date : 10-16-07
Departure Date : 10-17-07
Page : 1 of 1
Folio Number : 1463945
Confirmation :
Cashier :

Date	Description	Charges	Credits
10-16-07	Room Charge	200.00	
10-16-07	Room PST	10.00	
10-16-07	Room GST	12.00	
10-16-07	Room D.M.F.	5.66	
10-16-07	Room D.M.F. GST	0.34	
Total		228.00	0.00

Balance

228.00 CAD

Room GST 12.00
F&B GST 0.00
Misc GST 0.34
Total 12.34

Guest Signature:

I agree that I am personally liable for the final disposition and payment of any services rendered or goods supplied by The Sutton Place Hotel and further authorize the use of my credit card to facilitate full payment. I accept responsibility in the event the indicated third-party, company or association fails to render full payment of this account, and also for any loss or damage to the premises or its contents.



APPLICANT COPY TRAVEL/EDUCATION EXPENSE CLAIM

INSTRUCTIONS

- This form must be completed prior to booking travel.
- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be E-Mailed to your CRHA E-Mail address OR mailed to your home address (if a valid E-Mail address doesn't exist).
- Please consult the CRHA Travel Policy for clarification.
- See back of form for additional instructions.

Employee Name (Print) Mikhael Munsch
 Department/Site CRHA - Calgary
 Tuition Paid To (if tuition to be paid directly to institution, use Cheque Requisition form #0074) Calgary Health Region
 Destination Katowice, Poland
 Course Title Medical Management
 CRHA E-Mail Address s.17(1), 17(4)(g)(i)
 Phone Number 543-1166
 Date June 15/08
 Departure Date June 1/08
 Return Date June 3/08
 Employee Number

ESTIMATED/ACTUAL EXPENSES				ACTUAL EXPENSES PAID BY EMPLOYEE			
Expense	Description	Exchange	Rate/GST	Expense	Description	Exchange	Rate/GST
Tuition	Tuition only if						
Air paid by CRHA via	CRHA Travel Agent						
Mileage	If travel is by car						
Accommodation	If travel is by car						
Meals Based-on							
per diem rate							
Ground							
Transport							
Other (Specify)							
TOTAL		\$	1170.00	TOTAL		\$	1148.08

Advance Requested (80% of estimated expenses & advance exceeds \$250.00) \$ (Cdn) _____
 Less Advance or Unfunded Portion \$ (Cdn) _____
 Balance Due To Employee CRHA (cheque attached) \$ 1148.08 (Cdn)
 Date June 15/08
 Employee Signature Mikhael Munsch
 Expenditure Officer Authorization Mikhael Munsch
 Date June 15/08
 Authorizer Employee Number _____
 Expenditure Officer Approval Mikhael Munsch
 Date June 15/08
 Authorizer Employee Number _____

FINANCIAL CODE _____
 Org _____
 Functional Centre _____
 Account 61030000
 Expenditure Officer Approval Mikhael Munsch
 Date June 15/08
 Authorizer Employee Number _____

Comments/Other Sources of Funding _____
 10



DELTA

LODGE AT KANANASKIS

Kananaskis Village, Alberta, Canada T0L 2H0

Tel: (403) 591-7711 • Fax: (403) 591-7770

G.S.T. Registration #122372063

Mrs Margaret Munsch

2 NIGHTS

CR-OUT 03JUN,05 10:36a NJ

ADDRESS/ADR:SS

s.17(1), 17(4)(e.1) VS

BARBERS/MARGUETS

3112 CA

FOI/O/DOSSIER

ARRIVAL/ARRIVEE

WED 01JUN,05 001275

FOI/O N° MBER N° DOSSIER

DEPARTURE/DEPART

FRI 03JUN,05 BALANCE/SOLDE

APPLICANT COPY

LINE NO. N° LIGNE	DATE	ROOM CHAMBRE	DESCRIPTION	REFERENCE	AMOUNT MONTANT	ID
----------------------	------	-----------------	-------------	-----------	-------------------	----

001	01JUN	Rm 3112	Room		216.00+	LW
002	01JUN	Rm 3112	Tourism Levy 4%		7.92+	LW
003	01JUN	Rm 3112	Room GST 7%		13.86+	LW
004	01JUN	Rm 3112	Package GST		1.26+	LW
005	02JUN	Rm 3112	Room		216.00+	LW
006	02JUN	Rm 3112	Tourism Levy 4%		7.92+	LW
007	02JUN	Rm 3112	Room GST 7%		13.86+	LW
008	02JUN	Rm 3112	Package GST		1.26+	LW
009	03JUN				478.08-	NJ

s.17(1), 17(4)(e.1)

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. Delta agrees to transmit to credit card issuer for payment. Merchandise/or services purchased on this credit card shall not be resold for a cash refund. I have accepted delivery of The Globe and Mail. Had I refused, I would have been eligible for a \$.50 (Mon.-Fri.) and \$1.25 (Sat.) credit to my account. (At participating hotels.)

Je m'engage personnellement à acquitter les frais encourus soit en partie, soit en entier, à défaut de paiement complet par la compagnie, l'association ou son représentant désigné. Delta Hotels convient de transmettre cette note au fournisseur de la carte de crédit pour paiement. Les achats en biens et services effectués avec cette carte de crédit ne peuvent être revendus pour un remboursement en espèces.

J'ai accepté la livraison du journal The Globe and Mail. Si j'avais refusé, j'aurais pu obtenir un crédit à mon compte de 0,50 \$ par jour (du lundi au vendredi) et de 1,25 \$ le samedi. (Dans les hôtels participants.)

Guest's Signature / Signature du client

11



April 29, 2005

Ms. Margaret Munsch
Calgary Health Region
10101 Southport Road SW
Calgary, AB T2W 3N2

Conference Receipt

On behalf of the Calgary Health Region and our co-sponsor, Scripps
Centre for Integrative Medicine, we would like to thank you for registering
for this year's

Exploring Health and Healing Conference
June 1 – 3, 2005

Registration Fee: \$670.00 Paid in FULL

Thank you,

A handwritten signature in cursive script, appearing to read "Cheryl Meredith".

Cheryl Meredith
Conference Registrar
Calgary Health Region

APPLICANT COPY

Exploring Health & Healing Conference

Margaret Munsch:

Delta Lodge at Kananaskis - June 1 & 2, 2005 – Confirmation #1445634
(Guaranteed by Credit Card) (2 Queens - \$217.00/night)

Registration Confirmed and paid in full by Credit Card



INSTRUCTIONS:
 A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

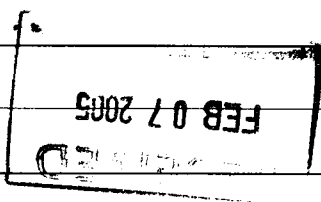
Date	January 31, 2005
Requested By (Please Print)	Lynn Gallow
Department	People & Learning
Site	Southport
Phone No (in full)	943-1393

MAKE CHEQUE PAYABLE TO: Margaret Munsch	
Employee/Supplier #	

MAILING ADDRESS (for forwarding of cheque)
 s.17(1), 17(4)(g)(i)

Canada Post:
 City: _____ Province: _____ Postal Code: _____
 Department: People & Learning
 Site: Southport

Purpose of Request
 SPECIAL HANDLING INSTRUCTIONS



CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
017112000005	62410	610	\$1,292.98	Expenses - November 2004 - January 2005
				GST \$

TOTAL AMOUNT OF CHEQUE: \$1,292.98
 CDN US Other

Expenditure Officer Authorization
 Authorizer's Employee Number: s.17(1), 17(4)(g)(i)
 Print Name: Kay Best, Chief Financial Officer
 Authorizer Phone # (in full): 943-1140

ACCOUNTS PAYABLE ONLY

Invoice # _____
 Supplier # _____
 Recurring Payment: _____
 Start Date _____
 End Date _____
 # of Payments _____
 Cycle _____

Comments: _____

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
FOR THE PERIOD OF November 2004 - January 2005

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
--------------------	--	--------

January 8, 2005	Calling Card (21.55 U.S.)	26.75
-----------------	---------------------------	-------

Parking (See Attached Receipts) 61.00

GRAND TOTAL

\$ 1,292.98

Date January 27, 2005

Approved by Kay Best, FCA
Executive Vice-President, Risk Management
Risk Management & CFO

Margaret Munsch
Senior Vice-President
People & Learning

PLEASE COME AGAIN!
THANK YOU!

Online Shopping Award Program
Member Set # 1-800-474-4678

1/05/2005 15:42 (191 of 274 201)

ORDER NUMBER: 047111
TOTAL NUMBER OF ITEMS ORDERED: 2

CHARGE \$ 50.00
CASH \$ 0.00

1 PHONE CARD(S)

Best Copy Possible

COSTCO WHOLESALE
1000 B STREET
SPOKANE, ID 83402

(2675 CAD)

(USD)

Calligraphy Card - 19.99 + Tax 7.8% = 19.99 + 1.56 = 21.55

Flight Ticket Change

Expense

Call to 644115

APPLICANT COPY

INSTRUCTIONS:
 A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date: October 6, 2006
 Requested By (Please Print): Lynn Gallow

Department: People & Learning
 Site: Southport
 Phone No (in full) 943-1393

MAKE CHEQUE PAYABLE TO: Margaret Munsch
 Employee/Supplier #: s.17(1), 17(4)(g)(i)

MAILING ADDRESS (for forwarding of cheque): 38347
 Canada Post:

City: _____ Province: _____ Postal Code: _____

Interoffice Mail: Department: People & Learning

Site: Southport

Purpose of Request:

SPECIAL HANDLING INSTRUCTIONS

RECEIVED
 OCT 16 2006
 FINANCE

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
01	711200000005	69600000	1182.93	Meeting Expenses - July - Sept 2006
01	711200000005	62410000	222.75	Parking & Taxi Expenses
				GST \$
TOTAL AMOUNT OF CHEQUE:			\$ 1405.68	

Print Name: Kay Best, Chief Financial Officer
 Expenditure Officer Authorization: *Kay Best*
 Authorizer's Employee Number: s.17(1), 17(4)(g)(i)
 Authorizer Phone # (in full) 943-1140

ACCOUNTS PAYABLE ONLY

Invoice # _____
 Supplier # _____
 Recurring Payment: _____
 Start Date _____
 End Date _____
 # of Payments _____
 Cycle _____

Comments: 1229.99
 175.69
KB

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch

FOR THE PERIOD OF July - Sept 2006

REASON FOR THE

EXPENSE (Receipts Attached)

AMOUNT

DATE OF OCCURRENCE

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
July 10, 2006	Lunch Meeting re: UNA Negotiations Strategy	51.58
July 11, 2006	Dinner Meeting - TSS	45.58
July 13, 2006	Lunch Meeting - Brenda Fischer re: Workforce	55.23
July 19, 2006	Lunch Meeting - Tom Collins re: Wellness	33.19
Aug 16, 2006	Lunch Meeting J Humphrey re: Behavioural Instruments & Executive Coaching	32.69
Aug 18, 2006	Lunch Meeting - Nancy Guebert	36.04
Aug 22, 2006	CHA Discussion Mtg - Joan McGregor, Susan Cassidy, Marlene Raasok	41.84
Aug 23, 2006	Lunch Meeting - Elizabeth Aitken re: Library Outsourcing	280.69
Aug 29, 2006	Dinner Meeting - TSSI/CHR	36.84
Aug 30, 2006	Dinner Meeting re: Community Relations	37.30
Sept 8, 2006	Lunch Meeting - Lindy Weisby - Leadership Coaching	256.93
Sept 27, 2006	Dinner Meeting - Lynne Wood - P&L Strategy & Structure	159.92
		37.58
		144.94

Parking (See Attached Receipts)
Taxi (See Attached Receipts)

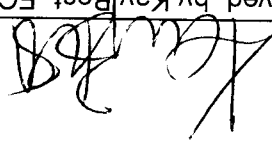
R 109.75
10800 113.00

GRAND TOTAL

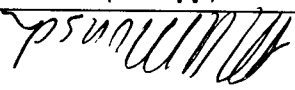
\$ 1,405.68

Date October 6, 2006

Approved by Kay Best, FCA
Executive Vice-President, Risk Management
Risk Management & CFO



Margaret Munsch
Senior Vice-President
People & Learning



Taxi Airport to Tees
Town

MERCHANT COPY

FELLOW (GST) (780) 462-3456
PRESTIGE (780) 462-4444
ADMINISTRATION (780) 465-8500

AUTH. NO.	DRIVER	UNIT NO.
	W	807
TIME	DAY	MO
	07	06
		07

FARE	INT'L	GRATUITY	TOTAL
25.00			69.00

G.S.T.# 125473280

FROM

TO *airp*

PRINT NAME *L. L. L.*

CUSTOMER'S SIGNATURE *[Signature]*

X

THE ASSOCIATION OF THE CARD IDENTIFIED ON THIS ITEM IS AUTHORIZED TO PAY THE AMOUNT SHOWN AS TOTAL UPON THIS RECEIPT PRESENTATION. I PROMISE TO PAY SUCH TOTAL TOGETHER WITH ANY OTHER CHARGES DUE THEREON SUBJECT TO AND IN ACCORDANCE WITH THE AGREEMENT COVERING THE USE OF SUCH CARD.

PRESTIGE

10135 - 31 Avenue
Edmonton, Alberta T6N 1C2

GAERS
462-4444
THANK YOU/MERCI

ADMIN. 465-8500
FAX: 462-2722

Date: 07/07 Amount/Montant \$ 52 Car/Voiture # 934

Driver/Chauffeur: *[Signature]* G.S.T. #
From/De: *MAC* To/A: *CAR*

PLEASE CALL AGAIN
AU PLAISIR DE VOUS REVOIR

s.17(1), 17(4)(e.1)

Best Copy Possible

PRE AUTH
VISA

GRATUITY
TOTAL

75
55.23

Cardholder's name and address
amount paid should be the same as on card

OF APPROVAL PLEASE ADD 627



5158
19

APPLICANT COPY

Thank You For Dining With Us.
GST # 819584947RT0001

** CUSTOMER COPY **

MARGARET MUNSCHE
MARGARET MUNSCHE

CARDHOLDER WILL PAY TOTAL AMOUNT SHOWN
TO CARD ISSUER ACCORDING TO CARDHOLDER
AGREEMENT.

THANK YOU

01 APPROVED 027

AUTH. # 089687

TOTAL \$ 159.92

TIP \$ 20-

SUBTOTAL \$ 139.92

256.93
83-

TOTAL AMOUNT

TIP

\$223.93

AMOUNT

RECEIPT NUMBER

580553455-734-020

DATE/TIME

2006/08/29 22:02:14

CARD TYPE

VISA

EXPIRY DATE

6368

VISA s.17(1), 17(4)(e.1)
MUNSCHE/MARGARET
AUTH 089687
MERCHANT# 9999 ONLINE

Server: S-Megan E. Table: 335
Date: 08/30/2006 Time: 21:27

REDWATER RUSTIC GRILLE
9223 McLeod Tr. South
Tel: 403-253-4266
Check: 15372
s.17(1), 17(4)(e.1)

ANNIE/S/THE RANCHE
BOY VALLEY RANCH FISH CRE
CALGARY AB

Handwritten signature

REDWATER RUSTIC GRILLE

3223 McLeod Tr. South
Tel: 403-253-4266
Check: 18632

Server: S-Megan E. Date: 08/30/2006
Table: 335 Time: 21:27

s.17(1), 17(4)(e.1)

MUNSCHE/MARGARET
AUTH 061316 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 139.92
TIP \$ 20-
TOTAL \$ 159.92

** CUSTOMER COPY **

Thank You For Dining With Us.
GST # 819584947RT0001

APPLICANT COPY

0027

Server: WILLIAMS
08/16/06 13:46:52
Terminal: 1

Rec: 36

Terminal: 1

BP MACLEOD TRAIL
10456 MACLEOD TRAIL
(403) 253-1222
MERCHANT #: 220123

Duplicate Copy

Transaction Record

Tran #: 5183
Visa PreAuth and Hold

s.17(1), 17(4)(e.1)

Amount: \$28.69

Tip: 4-

total 32.69

APPROVED 084924
00-001 084924
BP013101/BPT31C01
010001001064
2006/08/16-13:45:16

X *M. Munsch*
Cardholder Signature

0075

Server: TIM, 0 (#122)
08/22/06 20:52, Swiped I: 80 Term: 3

Rec: 41

Terminal: 3

BONTERRA RISTORANTE
1016 - 8 ST S.W.
CALGARY, ALBERTA
(403) 262-8480
MERCHANT #: 45025332192

s.17(1), 17(4)(e.1)

CARD 17/01 ACCOUNT NUMBER
VISA

Name: MARGARET MUNSCH
00 TRANSACTION APPROVED
AUTHORIZATION #: 023433
Reference: 000075
TRANS TYPE: Credit Card SALE

CHECK: 250.69

TIP: 30-

TOTAL: 280.69

X *M. Munsch*

Duplicate Copy

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
MERCHANT COPY

earls

GREAT FOOD GREAT PEOPLE

Date: 23 Aug '06 01:12 PM

Card Type: Visa

Acct #

Exp Date

Auth Code: 064400

Check: s.17(1), 17(4)(e.1)

Tab

Server: 2 J

Station

Card Number

MAC

Subtotal: 37.30

Tip: 5-

Total: 42.30

I agree to pay above total
according to my card issuer
agreement.

*****Customer Copy*****

60793 McDougall
 451 - 6 Street SW
 PAN-12P #A2 Calgary, AB
 Tax code: GST #119457869
 POF 1 (12) 2009/06 13:05
 Receipt 035585
 Short-term parking tkt
 Lot - No. 053569
 20/09/06 13:08
 20/09/06 13:08
 Parcel 0601008
 (GST) \$6.75
 Gross total \$6.75
 Payment \$6.75
 Net total \$6.37
 GST 0.38
 All amounts in CAD.
 Netiv. date: Receipt date

RECEIPT
 Thank you for
 your patronage

Calgary Health Region
 Foothills Medical Centre
 Parking Fee Receipt
 s.17(1), 17(4)(e.1)
 REPT# 59750
 07/21/06 11:24 LH 1 AM 8 TKN#259711
 07/21/06 08:44 In 07/21/06 11:24 Out
 TKN 375521
 CRHA 1 \$ 7.50
 Total Fee \$ 7.50
 CASH PAID \$ 7.50
 Cash Tender \$ 10.00
 Change Due \$ 2.50
 Thank-You!
 GST #R107392557

PAUSER PARKADE
 CALGARY AB
 RECEIPT ONLY C3
 PAY STATION: C3
 ENTRY DATE/TIME:
 17/08/06 07:41
 PAY DATE/TIME:
 17/08/06 09:47
 PARK DUR.: HRS:MIN
 0:02:06
 PAID: \$ 10.00
 VISA
 AUTH. CODE 0359567
 REF. 17
 * YOU MUST TAKE *
 * ORIGINAL TICKET *
 * WITH YOU AND USE *
 * IT TO EXIT *
 GST INCLUDED
 GST No. R142201449
 1
 THANK YOU FOR YOUR
 VISIT!

PAUSER PARKADE
 CALGARY AB
 RECEIPT ONLY C3
 PAY STATION: C3
 ENTRY DATE/TIME:
 17/08/06 07:41
 PAY DATE/TIME:
 17/08/06 09:47
 PARK DUR.: HRS:MIN
 0:02:06
 PAID: \$ 10.00
 VISA
 AUTH. CODE 062282
 REF. 2
 * YOU MUST TAKE *
 * ORIGINAL TICKET *
 * WITH YOU AND USE *
 * IT TO EXIT *
 GST INCLUDED
 GST No. R142201449
 1
 THANK YOU FOR YOUR
 VISIT!

APPLICANT COPY
 s.17(1), 17(4)(e.1)

PLACE THIS SIDE UP ON DASH
 IMPERIAL PARKING
 PHONE 248-7275
 IMPARK
 \$22.00
 6:00P THU
 IMPARK
 TICKET VOID IF RE-SOLD

PLACE THIS SIDE UP ON DASH
 IMPERIAL PARKING
 PHONE 248-7275
 EVENING PARKER
 IMPARK
 Trans: 20014133
 Time: 5:29P JUL 18
 Price: \$12.00 \$12.00
 CARD:
 EXPI:
 Expires:
 6:00A WED
 JUL 19 06
 VOID IF RE-SOLD

PLACE THIS SIDE UP ON DASH
 IMPERIAL PARKING
 PHONE 248-7275
 EVENING PARKER
 IMPARK
 Trans: 20014133
 Time: 5:29P JUL 18
 Price: \$12.00 \$12.00
 CARD:
 EXPI:
 Expires:
 6:00A WED
 JUL 19 06
 VOID IF RE-SOLD

PLACE THIS SIDE UP ON DASH
 IMPERIAL PARKING
 PHONE 248-7275
 EVENING PARKER
 IMPARK
 Trans: 20014133
 Time: 5:29P JUL 18
 Price: \$12.00 \$12.00
 CARD:
 EXPI:
 Expires:
 6:00A WED
 JUL 19 06
 VOID IF RE-SOLD

PLACE THIS SIDE UP ON DASH
 IMPERIAL PARKING
 PHONE 248-7275
 EVENING PARKER
 IMPARK
 Trans: 20014133
 Time: 5:29P JUL 18
 Price: \$12.00 \$12.00
 CARD:
 EXPI:
 Expires:
 6:00A WED
 JUL 19 06
 VOID IF RE-SOLD

3CARS

SE

te: 07/19/2006

mer: 13:28

ILINE

04

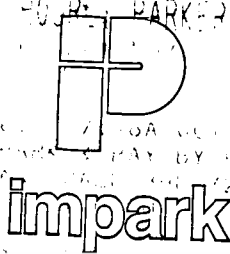
5
11.04

JPY **

ar's

er.

impark
United Way
IMPERIAL PARKING
PHONE 299-7275
DAILY PARKER



www.impark.com

INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM

s.17(1), 17(4)(e.1)
8:58A TUE
OCT 03 06

INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM

www.impark.com

TICKET VOID IF RE-SOLD

ON DASH

PLACE THIS SIDE UP ON

PLACE THIS S

TOP Green Comp
Talent Pool Bay
impark

IMPERIAL PARKING
PHONE 299-7275
DAILY PARKER

Meter: LOT 400
Time: 7:40A SEP 28
PARK & PAY BY PHONE
CALL 393-7275
www.imparkwireless.com
Price: \$24.00

Card
Exp: 11/03

6:00P THU
SEP 28 06

INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM

TICKET VOID IF RE-SOLD


ON DASH

PLACE THIS SIDE UP ON

PLACE TH

Parking for Nubs
& Day Mat

IMPERIAL PARKING
PHONE 299-7275
DAILY PARKER



\$10.00

9:18A WED
SEP 06 06

INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM

s.17(1), 17(4)(e.1)

TICKET VOID IF RE-SOLD

ON DASH

PLACE THIS SIDE UP ON

PLACE THIS

s.17(1), 17(4)(e.1)

4-
33.19

BROKEN PLATE
590 10016 MACLEOD T2J8N8
CALGARY AB
22799973

09-08-2006
Acct #
Exp Date
Name MARGARET HUNSCH
Inv # 2570 Operator 444
T22799973001
Auth # 050712 RRR 001556004
P. Auth Purchase \$5-
Tip
Total 41.84

s.17(1), 17(4)(e.1)

BROKEN PLATE
590-10016 MACLEOD T2J8N8
CALGARY AB
22799973

09-08-2006
Acct #
Exp Date
Name MARGARET HUNSCH
Inv # 2570 Operator 444
T22799973001
Auth # 050712 RRR 001610043
P. Auth Purchase \$5-
Tip
Total 42.58

s.17(1), 17(4)(e.1)

Customer copy

APPLICANT COPY
CHEQUE REQUISITION

INSTRUCTIONS:

A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date	September 10, 2007
Requested By (Please Print)	Lynn Gallow
Department	People & Learning
Site	Southport
Phone No (in full) 943-	1393
Employee/Supplier #	s.17(1), 17(4)(e.1)
MAKE CHEQUE PAYABLE TO:	Margaret Munsch
MAILING ADDRESS (for forwarding of cheque)	Canada Post:
City	Province
Postal Code	
Interoffice Mail:	Department: People & Learning
Site	Southport
Purpose of Request	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS	

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
01	7112000005	69600000	1133.91	Expenses - July-August 2007
01	7112000005	62410000	73.00	Expenses - Parking & Taxi
01	7112000005	69500002	206.41	Expenses - Recognition
TOTAL AMOUNT OF CHEQUE:				\$1,413.32
				GST \$
				CDN <input checked="" type="checkbox"/> US <input type="checkbox"/> Other <input type="checkbox"/>
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer		
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140		

ACCOUNTS PAYABLE ONLY

Invoice #	
Supplier #	
Recurring Payment:	
Start Date	
End Date	
# of Payments	
Cycle	
Comments:	

APPLICANT COPY

WILD
ORCHID

The Nosegay Inc.
313 17th Avenue S.W.
Calgary, AB. T2S 0A5
67261
INVOICE

FAX-943-1400

TEL: (403) 541-1800 FAX: (403) 541-9007 TERMS: Net 30 days

SOLD TO: MARGARET ANN MUNSCH DATE: JULY 12-07

LYNN GALLOP TEL: 1943-1393
YASE ARRANGEMENT 6000

s.17(1), 17(4)(e.1)
s.17(1), 17(4)(e.1)

PERCHANT/MARCHAND
THE NOSEGAY INC CALGARY
313 17TH AVE SW
ID: A059451
SLIP #: 0672
STORE: 4059451
EMPL #: 000001
SALE \$79.50

APPROVED AUTH 072910
SEQ 044001001005 ISO -001
JUL 12 2007 1:35 PM
SIGNATURE X
M

DEL	10.00
WIRE	5.00
GST	4.50
TOTAL	79.50

DELIVER TO: JACK DAVIS, DR. AUSTIN
KARLE SARET HUBBARD, MARGARET MUNSCH
HEATHER SMITH

UNDA
900, 10611-98 AVE
EDMONTON 780-425-1025
CASH CHGB DEBT ON ACCT. VISA M.C. AMX WHEN DELIVERED
X
TODAY

G.S.T. No. R121083331

THANK YOU

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch

FOR THE PERIOD OF July - Aug 2007

DATE OF OCCURRENCE REASON FOR THE EXPENSE (Receipts Attached) AMOUNT

July 3, 2007	Retirement Dinner for	s.17(1), 17(4)(g)(i)	534.26
July 4, 2007	Lunch Meeting -	s.17(1), 17(4)(g)(i)	60.53
July 9, 2007	Dinner Meeting - Brenda Fischer		20.00
July 10, 2007	Lunch Meeting - Carol Gray		35.69
July 12, 2007	Flowers for Heather Smith (UNA)		79.50
July 23, 2007	Lunch Meeting - Rob Armstrong		39.98
July 25, 2007	Dinner Meeting - Deb Goodfellow		145.20
August 2, 2007	Dinner Meeting - Don Winn <i>(re: Transition Issues)</i>		171.46
August 14, 2007	Recognition - Carol Graham/Kim LeBlanc <i>(re: Future Contract)</i>		206.41
August 16, 2007	Lunch Meeting - Andrea Robertson		47.29
	Parking & Taxi (See Attached Receipts)		73.00
GRAND TOTAL			\$ 1413.32

Date September 13, 2007

Approved by Kay Best, FCA
Executive Vice-President, Risk Management
Risk Management & CFO

Margaret Munsch
Senior Vice-President
People & Learning

Best Copy Possible

39.98

5-

Thank you for using BTH US.
Please join us on
GSI #619584947810001

** CUSTOMER COPY **

TOTAL \$ 6053

TIP \$ 2

SUBTOTAL \$ 6053

AMOUNT PAID
BY CARD
\$ 6053
TAX \$ 17.17
TOTAL \$ 6070.17

DATE: 07/19/2017
TIME: 14:20
VISA

REDWATER FRONTIER
GRILLE
25300 E. SOUTH
MOUNTAIN AVENUE
DENVER, CO 80231
TEL: 303.751.1266
FAX: 303.751.1449

APPLICANT COPY

THE UNIVERSITY OF CHICAGO
LIBRARY

UNIVERSITY OF CHICAGO

62.7h
-9

17(1)

17(4)

17(1), 17(4)(e.1)

s.17(1), 17(4)(e.1)

UNIVERSITY OF CHICAGO

UNIVERSITY OF CHICAGO
LIBRARY

1 (continued copy)

2 (continued copy)

3 (continued copy)

M. Mansel

3569

5-

Best Copy Possible

APPLICANT COPY

0075

Server: RICHELLE 1 (#170) Rec: 6,
08/02/07 21:06, Swiped T: 71 Term: 1

BONTERRA RISTORANTE

1016 - 8 ST SW,

CALGARY, ALBERTA

(403)262-8480

MERCHANT #: 45025332192

CARD TYPE ACCOUNT NUMBER

VISA

s.17(1), 17(4)(c.1)

Name: MARGARET MUNSCH

00 TRANSACTION APPROVED

AUTHORIZATION #: 013032

Reference: 000075

TRANS TYPE: Credit Card SALE

CHECK: 149.46

22-

TIP:

171.46

TOTAL:

M. Munsch X

Duplicate Copy

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
MERCHANT COPY

PLEASE PRINT OR TYPE IN BLOCK LETTERS
LAST NAME, FIRST NAME, MIDDLE INITIAL

*** INFORMATION COPY ***

00571

00571

- 81

10000000

10000000

10000000

DATE OF BIRTH (MM/DD/YYYY)
SEX (M/F)
RACE (W/B/O/A)

s.17(1), 17(4)(c.1)

DATE OF BIRTH (MM/DD/YYYY)
SEX (M/F)
RACE (W/B/O/A)

INFORMATION COPY
DATE OF BIRTH (MM/DD/YYYY)
SEX (M/F)
RACE (W/B/O/A)

s.17(1), 17(4)(e.1)

APPLICANT COPY

PLACE THIS

SIDE ON DASH

TICKET VOID

TICKET VOID IF RE-SOLD

Impark

Impark

PLACE THIS SIDE UP ON DASH

12:12:39P MED
AUG 29 07
FD

IF RE-SOLD

PLACE THIS SIDE UP ON

imparc
FD
imparc

TICKET VOID IF RE-SOLD

UP ON DASH

imparc
APPLICANT COPY

TICKET VO

s.17(1), 17(4)(c.1)

TERMS SHEET
 00 11 00
 067
 811.00
 11.11
 07/26/2000
 11.11

APPLICATION COPY
 PARTIAL
 THANK YOU
 851 888 710998

APPLICANT COPY

RECEIVED AT THE OFFICE OF THE
 DIRECTOR OF REVENUE SERVICES
 1700 BROADWAY, SUITE 1700
 CHARLOTTE, NC 28202
 TEL: (704) 359-4400
 FAX: (704) 359-4401
 WWW.DOR.NC.GOV

CARD NO. 00000000000000000000
 CARD TYPE VISA
 CARD HOLDER JOHN D. SMITH
 CARD EXPIRES 12/31/2018 - 12/31/2019
 CARD SECURITY CODE 1234567890

CHARGE TO ACCOUNT NO. 1234567890
 CHARGE TO ACCOUNT NAME JOHN D. SMITH
 CHARGE TO ACCOUNT ADDRESS 1234 MAIN ST
 CHARGE TO ACCOUNT CITY CHARLOTTE NC 28202
 CHARGE TO ACCOUNT STATE NC
 CHARGE TO ACCOUNT ZIP 28202

MERCHANDISE TOTAL \$100.00
 SALES TAX \$1.77
 TOTAL \$101.77
 TIP \$3.60
 TOTAL \$105.37

AUTHORIZED BY JOHN D. SMITH
 AUTHORIZED SIGNATURE [Signature]
 AUTHORIZED DATE 12/15/2018

THANK YOU
 HUNTER HARRIS
 HUNTER@HARRIS.COM

CHITR CARD NUMBER [REDACTED]
APPROVED
 HUNTER HARRIS
 THANK YOU
 CHITR CARD NUMBER [REDACTED]

s.17(1), 17(4)(e.1)

CUSTOMER COPY
APPROVED
Aug 14 2007 8:17 pm
041040

s.17(1), 17(4)(e.1)

2064
27
5179 41

Best Copy Possible

your copy

APPLICANT COPY

TICKET

APPLICANT COPY

IDE UP ON DASH

TEMPORARY

IMPERIAL PARKING

DAILY PARKER

Lot 400

Meter: []

Trans: []

Time: []

Rate: []

Vehicle: []

License: []

Plate: []

EXP: []

REG: []

TICKET VOID IF RE-SOLD

PLATE THIS SIDE

2017

2017

SOLD

s.17(1), 17(4)(c.1)



calgary health region

APPLICANT COPY

CHEQUE REQUISITION

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date	July 4, 2007
Requested By (Please Print)	Lynn Gallow
Department People & Learning	Site Southport
Phone No (in full) 943-1393	Employee/Supplier # s.17(1), 17(4)(g)(i)

MAILING ADDRESS (for forwarding of cheque)

Canada Post: _____

City: _____ Province: _____ Postal Code: _____

Department: People & Learning

Site: Southport

Purpose of Request: _____

SPECIAL HANDLING INSTRUCTIONS

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
0 1	7 1 1 2 0 0 0 0 0 5	6 9 6 0 0 0 0 0	\$965.16	Meeting Expenses - Apr-June 2007
0 1	7 1 1 2 0 0 0 0 0 5	6 9 5 0 0 0 0 2	\$403.47	Recognition Expenses 1998 ²
0 1	7 1 1 2 0 0 0 0 0 5	6 2 4 1 0 0 0 0	\$120.00	Parking & Taxi Expenses
TOTAL AMOUNT OF CHEQUE:				\$1,488.63
<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other				
Expenditure Officer Authorization				
Authorizer's Employee Number: <u>Tom Best</u>				
Authorizer Phone # (in full) 943-1140				

ACCOUNTS PAYABLE ONLY

Invoice # _____	Supplier # _____	Recurring Payment: _____
Start Date _____	End Date _____	# of Payments _____
Cycle _____	Comments: _____	

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
FOR THE PERIOD OF April - June 2007

DATE OF OCCURRENCE REASON FOR THE EXPENSE (Receipts Attached) AMOUNT

Apr 11, 2007	P & L Leaders Business Meeting	254.14
Apr 30, 2007	Lunch Meeting - Pat Schneider (Consultant)	11.64
May 3, 2007	Lunch Meeting - Brenda Fischer	36.86
May 9, 2007	P & L Meeting (Post Retreat) <i>(to discuss P & L Strategy)</i>	49.79
May 15, 2007	Lunch Meeting - Brenda Spilker (CBE)	34.63
May 22, 2007	Lunch Meeting - Thelma Inkson s.17(1), 17(4)(g)(i)	33.15
May 24, 2007	Dinner Meeting - (Interview)	87.32
May 30, 2007	Dinner Meeting - Lindy Welsby - Linke Associates <i>(Discuss/Debrief Coaching Pilot)</i>	121.00
June 5, 2007	Recognition Dinner - Clerical Conference Team	239.09
June 6, 2007	Lunch Meeting - Tracy Wasylak	41.57
June 11, 2007	Dinner Meeting - Lynne Wood (RANA Group) <i>(Discuss P&L Model & Progress)</i>	166.22
June 13, 2007	Recognition Dinner (re Global Video)	79.91
June 28, 2007	Dinner Meeting - Diane Pollo (re Transition Plan)	128.84
July 3, 2007	PeopleFirst Luncheon (Sharooz Nabavi)	84.47
	Total	1,368.63
	Parking & Taxi (See Attached Receipts)	120.00
	GRAND TOTAL	\$ 1,488.63

Date July 4, 2007

Approved by Kay Best, FCA
Executive Vice-President, Risk Management
Risk Management & CFO

Margaret Munsch
Senior Vice-President
People & Learning

APPLICANT COPY

BROKEN PLATE
590-10016 MACLEOD T2J5N6
CALGARY AB
22799973

PRE AUTH PURCHASE
05-22-2007 12:57:59
Acct # C
Exp Date Card Type VI
Name: MUNSCH/MARGARET
A000000031010 RBC VISA AVION

s.17(1), 17(4)(e.1)

Trace # 110004 Operator 555
FS2279997301
Inv. # 2086
Auth # 044297 RRH 001110004

P. Auth Purchase \$29.15
Tip 4
Total 33.15
Customer copy

WELLINGTONS/OSCAR'S

10325 Bonaventure Dr. SE
Tel: 403-278-5250

Server: Lucas Table: 18
Date: 07/03/2007 Time: 13:32

MUNSCH/MARGARET
AUTH 044584 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 74.47

TIP \$ 10

TOTAL \$ 84.47

** CUSTOMER COPY **

Wellington's/Oscar's
Please pay server.
Thank-you.

WELLINGTONS/OSCAR'S

10325 Bonaventure Dr. SE
Tel: 403-278-5250

Server: Gary Table: 21
Date: 06/13/2007 Time: 13:43

MUNSCH/MARGARET
AUTH 082685 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 69.91

TIP \$ 10

TOTAL \$ 79.91

** CUSTOMER COPY **

Wellington's/Oscar's
Please pay server.
Thank-you.

43

s.17(1), 17(4)(e.1)

WALK
-7275
MAY 18

BY BY PHONE
1 888-1278
RELEASE DATE

FRI
11 07
park

PLEASE (THIS SIDE UP ON DASH

PL

HIS SIDE UP ON DASH

s.17(1), 17(4)(e.1)

WELLINGTONS/OSCARS

10325 Bonaventure Dr. SE
Tel: 403-278-5250

Server: Scott Date: 06/28/2007
Table: 13 Time: 20:20

VISA

s.17(1), 17(4)(e.1)

MUNSCH/MARGARET
AUTH 010463 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 112.84

TIP \$ 16

TOTAL \$ 128.84

** CUSTOMER COPY **

Wellington's/Oscar's
Please pay server.
Thank-you.

WELLINGTONS/OSCARS

10325 Bonaventure Dr. SE
Tel: 403-278-5250

Server: Tom K Date: 04/11/2007
Table: 8 Time: 20:27

44

VISA

s.17(1), 17(4)(e.1)

MUNSCH/MARGARET
AUTH 050104 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 224.14

TIP \$ 30

TOTAL \$ 254.14

** CUSTOMER COPY **

Wellington's/Oscar's
Please pay server.
Thank-you.

THANK YOU
R863510996

07 9:28AM 01
882 CLERK01

10
\$12.00
\$12.00
0.68
\$12.00

Server: CASSANDRE C Rec: 20
05/09/07 16:51. Swiped 1: 420 Term: 1
Duplicate Copy

BOOMTOWN PUB & PATIO
135 Southland Drive
Calgary, AB
T2J 5X5

May 09 2007 04:51 pm Trans#00125

TRANSACTION RECORD

Card # s.17(1), 17(4)(e.1)

Card Entry : SWIPE
Account : VISA

Trans Type : PRE-AUTHORIZATION

Amount : \$44.79

Tip : 5

Total : 49.79

Auth # : 070621 s.17(1), 17(4)(e.1)

Sequence # : 0018140100

Terminal # : 66065523

Date : 07/05/09

Time : 16:49:02

01/07 APPROVED - THANK YOU

Cardholder Signature

Cardholder will pay Card issuer
above amount pursuant
to Cardholder Agreement

BROKEN PLATE
590-10816 MACLEOD T2J5N6
CALGARY AB
22799973

PRE AUTH PURCHASE

05-03-2007 13:35:31
05-15-2007 12:51

Acct # C
Exp Date 05-08 Card type VI
NAME: MURSCH/MARGARET
A00000000011010 RBC VISA AV10B

Trace # 920009 Operator 555
FS2279997301 3.633

Inv. # 1090
Auth # 062903 RRH 001092009

P. Auth Purchase \$32.86

Tip 4

Total 36.86

Customer copy

**

Thank You For Dining With Us.
Please Join Us On
Mother's Day, Sunday May 13th
For Lunch!

APPLICANT COPY

**REDWATER RUSTIC
GRILLE**
9223 McLeod Tr. South
Tel: 403-253-4266
Check: 48747

Server: S Jammy
Table: 112
Date: 06/11/2007
Time: 20:51

VISA s.17(1), 17(4)(e.1)
MUNSLI/MARGARET
AUTH 622593 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 145.22

TIP \$ 21-

TOTAL \$ 166.22

Signature: *M. Mansel*

I agree to pay this amount in accordance with the cardholder agreement.

**** MERCHANT COPY ****

PLACE THIS SIDE UP ON DASH

Pg 123
Pre-Club press

IMPERIAL PARKING
PHONE 299-7275

EVENING PARKER
IMPERIAL PARK
Meter: 100-400

Trans: 00014530
Time: 4:10P JUN 05
TO PARK & PAY BY PHONE
PLEASE CALL 398-7275
Price: \$25.00

Card:
Exp.:
Expires:

6:00A WED
JUN 06 07

INSTRUCTIONS: **FLIP BACK**
GST REG # R123456789
WWW.IMPARK.COM
WWW.IMPARKWIRELESS.COM

PLACE THIS SIDE UP ON DASH

TICKET VOID IF RE-SOLD

TICKET VOID IF RE-SOLD

s.17(1), 17(4)(e.1)

**Redwater Rustic
Grille**
11223 McLeod Tr. South
Calgary, Alberta

VISA s.17(1), 17(4)(e.1)
Type: Credit
Card #: 0000 0000 0000 0000
Date/Time: 06/11/2007 20:51
Reference #: 00000000000000000000000000000000
Check #: 493
Table #: 112
Approval #: 00000000000000000000000000000000

SUBTOTAL \$ 145.22

TIP \$ 21-

TOTAL \$ 166.22

Signature: *M. Mansel*

Cardholder will pay card issuer above amount pursuant to cardholder agreement

01 Approved - Thank You 02/

* Customer

ALBERTA CHILDREN'S HOSPITAL

RECEIPT C1

ENTRY DATE/TIME: 04/05/07 07:27
PAY DATE/TIME: 04/05/07 09:45
PARK-DUR.: HRS:MIN 0:02:18

ALLOWED EXIT TO: 04/05/07 09:59

PAID: \$ 6.25
VISA

s.17(1), 17(4)(e.1)

AUTH. CODE 063751 REF. 86

* You Have ONLY *
* 15 MINUTES *
* To Exit Garage *

* NO IN/OUT *
* PRIVILEGES *

* Managed by *
* Standard Parking *
* of Canada *

* GST INCLUDED *

GST No. R124072513

ALBERTA CHILDREN'S HOSPITAL

RECEIPT C1

ENTRY DATE/TIME: 05/19/07 07:27
PAY DATE/TIME: 05/10/07 09:34
PARK-DUR.: HRS:MIN 0:02:07

ALLOWED EXIT TO: 05/10/07 09:49

PAID: \$ 5.00
VISA

AUTH. CODE 062715 REF. 38

* You Have ONLY *
* 15 MINUTES *
* To Exit Garage *

* NO IN/OUT *
* PRIVILEGES *

* Managed by *
* Standard Parking *
* of Canada *

* GST INCLUDED *

GST No. R124072513

REDWATER RESTAURANT

9223 McLeod Tr., South
Ed. 403-253-4266
Check: 47972

Server: BAK AM Date: 06/05/2007
Table: 353 Time: 13:41

VISA s.17(1), 17(4)(e.1)

AMOUNT OF PURCHASE
AUTH 01172 00000000000000000000
MERCHANT 3059

SUBTOTAL \$ 209.09

TIP \$ 30
TOTAL \$ 239.09

** CUSTOMER COPY **

Thank you for dining with us.
Please join us for
GST #R124072513

Thank you for dining with us.
Please join us for
GST #R124072513

TA CHILDREN'S HOSPITAL

PT H1

ER NO. 1
5/06/07 15:23
5/06/07 17:43
\$ 6.25
\$ 6.25

124072513
ANK YOU
erated by
ard Parking
f Canada
NTS/CONCERNS,
403-955-7947

TICKET VOID IF RE-SOLD

E-SOLD

M. Munsey
impark

IMPERIAL PARKING
PHONE 299-7275
EVENING PARKER

Meter: LOT 480
Trans: 00015963
Time: 5:09P JUN 27
TO PARK & PAY BY PHONE
PLEASE CALL 398-7275
Price: \$15.00

Card Expires: s.17(1), 17(4)(e.1)
6:00A THU
JUN 28 07

INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM
WWW.IMPARKWIRELESS.COM

DE UP ON DASH PLACE THIS SIDE UP

TICKET VOID IF RE-SOLD

impark

SOFTEN MEMBERSHIP

IMPERIAL PARKING
PHONE 299-7275
EVENING PARKER

Meter: LOT 422
Trans: 00015963
Time: 5:09P JUN 27
TO PARK & PAY BY PHONE
PLEASE CALL 398-7275
Price: \$15.00

s.17(1), 17(4)(e.1)
6:00A THU
JUN 28 07

INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM
WWW.IMPARKWIRELESS.COM

DE UP ON DASH PLACE THIS SIDE UP

TA CHILDREN'S HOSPITAL
124072513
5/06/07 15:23
5/06/07 17:43
\$ 6.25
\$ 6.25
erated by
ard Parking
f Canada
NTS/CONCERNS,
403-955-7947
M. Munsey
impark
IMPERIAL PARKING
PHONE 299-7275
EVENING PARKER
METER: LOT 422
TRANS: 00015963
TIME: 5:09P JUN 27
TO PARK & PAY BY PHONE
PLEASE CALL 398-7275
PRICE: \$15.00
CARD EXPIRES: s.17(1), 17(4)(e.1)
6:00A THU
JUN 28 07
INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM
WWW.IMPARKWIRELESS.COM
TA CHILDREN'S HOSPITAL
124072513
5/06/07 15:23
5/06/07 17:43
\$ 6.25
\$ 6.25
erated by
ard Parking
f Canada
NTS/CONCERNS,
403-955-7947
M. Munsey
impark
IMPERIAL PARKING
PHONE 299-7275
EVENING PARKER
METER: LOT 480
TRANS: 00015963
TIME: 5:09P JUN 27
TO PARK & PAY BY PHONE
PLEASE CALL 398-7275
PRICE: \$15.00
CARD EXPIRES: s.17(1), 17(4)(e.1)
6:00A THU
JUN 28 07
INSTRUCTIONS ON BACK
GST REG # R102466000
WWW.IMPARK.COM
WWW.IMPARKWIRELESS.COM

49 Parking WP

BROKEN PLATE
500-10016 TRACTOR 1215NO
CALGARY AB
27799372

PRE AUTH PURCHASE
06-06-2007 12:15:09
Acc # C

s.17(1), 17(4)(e.1)

Exp Date 09 09 Card Type VI
Name BROOKH MARGARET
#00000000110101 ABC VISA ALTON

Trace # 260004
FS227899730
Inv # 2399
Auth # 009271

P Auth Purchase \$36.57
Tip 5-
Total 41.57

Customer copy

impark
MAY 08 07
impark
MAY 08 07
www.impark.com

THIS SIDE UP ON DASH

PLACE THIS SIDE UP ON DASH

PL

Best Copy Possible

s.17(1), 17(4)(e.1)

07MAY14 13:23 001 002
07MAY14 12:09
/ 1:14 #010441
RATE 1 \$7.50
TOTAL \$7.50
CASH \$7.50

GRAND CATHAY PARKING
307 1ST STREET S.E.
GST #R138698162

lunch meeting
of Pet Schneider



CANADA SAFEWAY
GST #R119347672

DEBIT

985 99 CHICKEN SANDWICH 10 98 G
Reg Price 11.98 Card Sav 1.00
**** 6% GST .66
**** TAX .66 BAL 11.64
CASH 12.00

CHANGE 36
TOTAL SAVINGS 1.00

NUMBER OF ITEMS = 2
4/30/07 11:57 0292 02 0023 8265

s.17(1), 17(4)(g)(i)

LYNN GALLOU

Club Card Savings \$ 1.00
Total Savings Value 8% \$ 1.00

LET US HEAR FROM YOU!
1-800-723-3929 OR VISIT SAFEWAY.COM

REDWATER RUSTIC
GRILLE

9223 McLeod Tr. South
Tel: 403-733-4266
Check: 46599

Server: H. Allen
Table: 711

Date: 05/24/2007
Time: 20:00

VISA

MUNSH/MARGARET
AUTH 08/962
MERCHANT# 0099

ONLINE

SUBTOTAL \$ 76.32

TIP \$ 11-

TOTAL \$ 87.32

*** CUSTOMER COPY ***

Thank You For Dining With Us.
Please Join Us On
G.I. #61928494/RT0001

s.17(1), 17(4)(e.1)

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date	February 22, 2006
Requested By (Please Print)	Lynn Gallow
Department	People & Learning
Site	Southport
Phone No (in full)	943-1393
Employee/Supplier #	s.17(1), 17(4)(g)(i)
MAILING ADDRESS (for forwarding of cheque)	Canada Post:
City	Province
Postal Code	
Department	People & Learning
Site	Southport
Purpose of Request	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS	

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	GL DESCRIPTION
0 1	7 1 1 2 0 0 0 0 0 5	6 9 6 0 0 0 0	Meeting Expenses - December 2005
0 1	7 1 1 2 0 0 0 0 0 5	6 9 5 0 0 0 0 2	- February 2006 Recognition Expense
0 1	7 1 1 2 0 0 0 0 0 5	4 9 0 1 0 0 0 2	Book
0 1	7 1 1 2 0 0 0 0 0 5	6 2 4 1 0 0 0 0	Parking Expenses
			GST \$
TOTAL AMOUNT OF CHEQUE:			\$1,841.60
<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other			
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer	
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140	

ACCOUNTS PAYABLE ONLY

Invoice #	
Supplier #	
Recurring Payment:	
Start Date	
End Date	
# of Payments	
Cycle	
Comments:	

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
 FOR THE PERIOD OF December 2005 - February 2006

DATE OF OCCURRENCE REASON FOR THE EXPENSE (Receipts Attached) AMOUNT

December 8, 2005	Deb Goodfellow Lunch Meeting	✓ 36.64
December 9, 2005	Barb Boyer - Library Outsourcing Issues Discussion	✓ 48.69
December 12, 2005	Exec Leaders Discussion re: Pandemic, Int'l	✓ 161.44
December 12, 2005	Women's Forum, Women in Lead Database	
December 12, 2005	AH&W Meeting (Edmonton)	✓ 27.75
December 15, 2005	Leadership Team Meeting 2005/06 Review	✓ 576.02
January 6, 2006	Deb Goodfellow Dinner Meeting	✓ 81.38
January 23, 2006	Lunch Meeting with HSAA Exec & P&L Exec	✓ 179.50
January 30, 2006	Deb Goodfellow/Lynne Wood re: Accountability Alignment	
February 8, 2006	SAIT - CHEA Meeting/RHA Leaders	✓ 157.76
February 9, 2006	P & L Staff - Clean-Up Day Lunch	✓ 256.45

Other

December 17, 2005	Indigo Books (World is Flat)	✓ 228.84
February 18, 2006	Don Winn - Recognition (for P&L Quarterly Report)	✓ 45.81

Parking

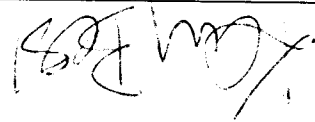
	Parking Pass - Banff	✓ 102.00
	Parking (See Attached Receipts)	✓ 30.00

GRAND TOTAL

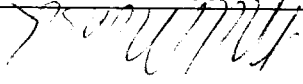
\$ 1841.60

Date February 22, 2006

Approved by Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO



Margaret Munsch
 Senior Vice-President
 People & Learning



s.17(1), 17(4)(e.1)

BRUNER PLATE
530-10816 MACLEOD T2J2G6
CALGARY AB
22755973

01-30 2006
Acct #
Exp Date
Name MARKET MUNSCH
Card Type VI

Inv # 830
Auth # 079057
P Auth Purchase
Tip
Total

Operating
T22 359733
RRN 001-34017
\$137.76
20
157.76

Customer copy

** CUSTOMER COPIENT **

s.17(1), 17(4)(e.1)

CILANTRO
338 17 AVE SW
CALGARY, AB
T2S 0A8

GST/TPS 864659628
MER/MAR #: 9321097967
TERM #: 04337404
DATE: 12/12/05 HR: 22:35
AUTH#: 052615 TRANS#: 0042
B/L #: 637

CARD/CARTE: UI
NO.:
EXPIR
HOLL
ATTENTE

AMT/MONT: \$140.44

TIP/POURB: \$ 21

TOTAL: \$ 161.44

s.17(1), 17(4)(e.1)

HOLL
ATTENTE

\$140.44

\$ 21

\$ 161.44

WILLIAMS/COOKS
1032 BOULEVARD W. #2
CALGARY AB T2S 0A8

DATE: 12/12/05
TIME: 22:35

0177

NUMERICAL
AUTH: 04337404
RECHARGE: 0000

SUBTOTAL \$ 48.69

TIP \$ 21

TOTAL \$ 69.69

53

HOLL
ATTENTE

s.17(1), 17(4)(e.1)

BROKEN PLATE
590-10816 MACLEOD T2J5N8
CALGARY AB
22799973

PRE AUTH PURCHASE

12-08-2005 13-12-49

Acct #

Exp Date

Name: MARGARET MUNSCH

Inv. # 11853 Operator 383

Auth # 07498 RRN 001345007

P. Auth Purchase \$32.64

Tip 4

Total 36.64

Customer copy

BROKEN PLATE
590-10816 MACLEOD T2J5N8
CALGARY AB
22799973

PRE AUTH PURCHASE

12-15-2005 20:50:43

Acct #

Exp Date

Name: MARGARET MUNSCH

Inv. # 12264 Operator 696

Auth # 015570 RRN 001352064

P. Auth Purchase \$576.02

Tip

Total 576.02

Customer copy

8138
Munsch

54

WAVE GROVE PT
11-16-74 STRE
PHOENIX

s.17(1), 17(4)(e.1)

CARD NUMBER
 EXP. DATE
 AUTH. DATE
 CARD TYPE
 CARD NUMBER
 CARD NUMBER
 AUTH. NUMBER
 AMOUNT

s.17(1), 17(4)(e.1)
 4-
 27.75

\$756.45

TOTAL AMOUNT

256.45

BT APPROVED - 027
THANK YOU AUTH. # 025170

CARDHOLDER COPY

M. Williams

10

FRASER/LES EM MAPLEDE
CALDWAY

2206 MAPLEDE TR SW

ID: 8799540
SLIP #: 3151
STORE: 8799540

PVE AUTH \$157.50

22-

FOURDIRE/TIP \$

17950

TOTAL \$

MillMunsk.

SIGNATURE X. *S

9906 *S

s.17(1), 17(4)(e.1)

APPROVED AUTH 065552
100 -001
369 2410610017
JAN 23 2006 2:23 PM

MERCHANT COPY

5

SALT HOSPITALITY CAREERS
1301 16 AVE. NW
CALGARY AB

STORE 8888987 TERM 8888987
SLIP # 8888

* VISA # PURCHASE P/A
AMOUNT \$54.32

15.01

TIP/FOURDIRE

s.17(1), 17(4)(e.1) 109.32

TOTAL

9006

APPROVED

FEES /25/05 10:00
025961001005 005982 001

MillMunsk.

SIGNATURE X.

56

s.17(1), 17(4)(e.1)

*Making
Down four*

PALLISER PARKADE
CALGARY AB

RECEIPT ONLY!
PAY STATION: C3

ENTRY DAT/TIME:
26/01/06 11:27
PAY DATE/TIME:
26/01/06 13:37
PARK-DUR.: HRS:MIN
0:02:10

PAID: \$ 10.00

s.17(1), 17(4)(e.1)

AUTH. CODE022380 72
REF. *****
* YOU MUST TAKE *
* ORIGINAL TICKET *
* WITH YOU AND USE *
* IT TO EXIT *

GST INCLUDED
GST No. RT12201449
1

THANK YOU FOR YOUR
VISIT!

LAKE BONAVISTA LIQUOR STORE
155-755 LAKE BONAVISTA DR
CALGARY AB

s.17(1), 17(4)(e.1)

CARD NUMBER
EXPIRY DATE
CARD TYPE VISA 4123
DATE/TIME 2006/02/15 11:16:00
RECEIPT NUMBER S78011374-001
PURCHASE
TOTAL AMOUNT \$45.81

01 APPROVED - 027
THANK YOU

CARDHOLDER COPY

APPLICANT COPY



Store# 00288 Indigo South Centre
 100 Anderson Rd South East
 Calgary, AB T2J 3V1
 Phone: (403) 225-0033
 Fax: (403) 225-0620

* Thank you for shopping at Indigo *
 Store# 00288 Term# 006 Trans# 3721
 Operator: 603MM 12/17/2005 14:00

SALE

 WORLD IS FLAT \$26.95
 0374292884
 Original Price \$38.50
 Bestseller 30% off \$-11.55

Items: 1
 Subtotal: \$26.95
 GST: 7.0% \$1009
 Total: \$28.84
 VISA: \$28.84

You Saved: \$11.55

 All Holiday Returns accepted until
 January 15, 2006 Items accompanied
 by a gift receipt and returned in
 store bought condition may be returned
 for a credit note for the value
 of the item on the receipt

If, for any reason, you purchase an

** CUSTOMER COPY **

060119/19:34

TRANSACTION RECORD

BANFF EAST GATE
 BANFF ADMINISTRATION
 BANFF, AB
 T0L 000 s.17(1), 17(4)(e.1)

CARD OP ID: 002 PLUNGE

ACCOUNT TYPE: VISA
 REFERENCE #: 0004791

TOTAL \$102.00

(001) APPROVED
 AUTH #016036
 THANK YOU

TERMINAL ID: 02424275
 MERCHANT #: 00724162

PALLISER PARKADE
 CALGARY AB
 RECEIPT ONLY!

PAY STATION: C3

ENTRY DAT/TIME:
 16/02/06 11:45
 PAY DATE/TIME:
 16/02/06 13:40
 PARK-DUR.: HRS:MIN
 0:01:55

 PAID: \$ 10.00
 VISA

s.17(1), 17(4)(e.1)

AUTH. CODE072967
 REF. 43

 * YOU MUST TAKE *
 *ORIGINAL TICKET *
 WITH YOU AND USE
 * IT TO EXIT *

GST INCLUDED
 GST No. RT12201449
 1

 THANK YOU FOR YOUR
 VISIT!

APPLICANT COPY

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date	March 31, 2006
Requested By (Please Print)	Lynn Gallow
Department	People & Learning
Site	Southport
Phone No (in full) 943-	1393
Employee/Supplier #	s.17(1), 17(4)(g)(i)
MAKE CHEQUE PAYABLE TO:	Margaret Munsch
MAILING ADDRESS (for forwarding of cheque)	
Canada Post:	
City	Province
Postal Code	
Interoffice Mail:	Department: People & Learning
Site	Southport
Purpose of Request	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS	

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
0 1	7 1 1 2 0 0 0 0 0 5	6 9 6 0 0 0 0 0	\$165.15	Meeting Expense
0 1	7 1 1 2 0 0 0 0 0 5	4 9 0 1 0 0 0 2	3.20	Misc Expense
0 1	7 1 1 2 0 0 0 0 0 5	6 2 4 1 0 0 0 0	20.00	Parking
				GST \$
TOTAL AMOUNT OF CHEQUE:			\$188.35	
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer		
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140		

ACCOUNTS PAYABLE ONLY

Invoice #	
Supplier #	
Recurring Payment:	
Start Date	
End Date	
# of Payments	
Cycle	
Comments:	

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
FOR THE PERIOD OF March 2006

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
March 27, 2006	Special Fabric Pen (for Gift - Stephen Bayliffe)	3.20
March 28, 2006	Dinner Meeting: Carol Graham/Susan Cassidy re: Accountability Agreements/Collaboration	165.15
	Parking (See Attached Receipts)	20.00
GRAND TOTAL		\$ 188.35

Date March 31, 2006

MJM
Dr Bob Schuster

Approved by Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO

L Gellman/for

Margaret Munsch
 Senior Vice-President
 People & Learning

FARRICLAND
 ELDM DR #64
 TEL# 403-271-8244
 TILL #02
 GST#H01725779
 NO EXCHANGE/REFUND
 W/O RECEIPT & PKG INTACT

2006-03-27 #2

#3542 2.99 F
 NOTIONS 2.99
 SUBTL 2.99
 GST TXEL 0.21
 GST 3.20
 TOTAL 20.00
 CASH 16.80
 CHANGE

451 - McDougal SW
 CAN-TSP #42 Calgary AB
 Tax Code CA GST #119459869
 CT 1 (82) Cashier 74
 24/03/06 16:19
 Receipt 083847

Short-term Parking tkt
 McDougal Parkade
 24/03/06 13:42
 Period 082532, \$10.00
 (GST) \$10.00
 Gross total \$10.00
 Payment Cash \$10.00
 Net total \$9.35
 GST (7%) \$0.65
 All amounts in CAD.
 Deliv. Date=Receipt Date

MURRIETA'S CALGARY
 #200 808 1st St
 Tel: 403-269-7117
 Check: 128/67

Server: 31
 06
 Table: 91

VISA s.17(1), 17(4)(e.1)
 MCA #, PARKADE: ONLINE
 AUTH 052721
 MERCHANT# 4512014753

SUBTOTAL \$ 141.11

TIP: 20
 16515

**** CUSTOMER COPY ****

Visit us in Canmore & Edmonton
 GST #RT0001893347518
 www.murrietas.ca

PALLISER PARKADE
 CALGARY AB
 RECEIPT ONLY!
 PAY STATION: C3

 ENTRY DATE/TIME:
 28/03/06 17:00
 PAY DATE/TIME:
 28/03/06 21:20
 PARK-DUR.: HRS:MIN
 0:04:20

 PAID: \$ 10.00
 VISA

AUTH. CODE 002557
 REF. 41

 * YOU MUST TAKE *
 * ORIGINAL TICKET *
 * WITH YOU AND USE *
 * IT TO EXIT *

 GST INCLUDED
 GST No. R112201449
 1

 THANK YOU FOR YOUR
 VISIT!



APPLICANT COPY

CHEQUE REQUISITION

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. **ORIGINAL DOCUMENTS MUST BE ATTACHED**

Date August 16, 2005	
Requested By (Please Print) Lynn Gallow	Department People & Learning Site Southport Phone No (in full) 943-1393

<p>MAKE CHEQUE PAYABLE TO: Margaret Munsch</p> <p>Employee/Supplier # S.17(1), 17(4)(g)(i)</p>	
<p>MAILING ADDRESS (for forwarding of cheque)</p> <p>Canada Post:</p> <p>City: _____ Province: _____ Postal Code: _____</p> <p>Interoffice Mail: Department People & Learning Site Southport</p> <p>Purpose of Request _____</p> <p><input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS</p>	

RECEIVED
AUG 19 2005
FINANCE

CODING & AUTHORIZATION			
ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT
0	1 7 1 1 2 0 0 0 0 0 5	6 9 6 0 0 0 0 0	\$ 206.35
Expenses - June/July 2005			
			38,554
			178,802
			GST \$
<p>TOTAL AMOUNT OF CHEQUE: \$ 206.35</p> <p><input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other</p>			
Expenditure Officer Authorization <i>Margaret Munsch for Lynn Gallow</i>		Print Name Kay Best, Chief Financial Officer	
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140	

ACCOUNTS PAYABLE ONLY			
Comments:			
Invoice # _____ Supplier # _____ Recurring Payment: _____ Start Date _____ End Date _____ # of Payments _____ Cycle _____			

00074

APPLICANT COPY

MISCELLANEOUS EXPENSES
 INCURRED BY Margaret Munsch
 FOR THE PERIOD OF June & July 2005

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
June 14, 2005	Lunch Meeting - Lynne Wood re: P&L Presentation	23.05
July 4, 2005	LR Team Meeting re: Success of Bill 27	39.31
July 6, 2005	Dinner Meeting - re: Presentation to Q&S	130.49
	Parking (See Attached Receipts)	13.50
GRAND TOTAL		\$ 206.35

Date August 16, 2005

Approved by Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO

Margaret Munsch
 Senior Vice-President
 People & Learning

CARDHOLDER SIGNATURE

M. Munsal

CARDHOLDER WILL PAY TOTAL AMOUNT SHOWN TO CARD ISSUER ACCORDING TO CARDHOLDER AGREEMENT.

THANK YOU

01 APPROVED-027

AUTH. # 096257

TOTAL AMOUNT

13049

TIP

16-

AMOUNT

\$114.49

AUTHORIZATION

S47160235-251-016

RECEIPT NUMBER

1

CLERK NUMBER

2005/07/06 20:56:38

DATE/TIME

CARD TYPE

VISA

2329

EXPIRY DATE

CARD NUMBER

CIAO BABY'S RESTAURANT
5920 MACLEOD TRAIL UNIT 1
CALGARY AB

s.17(1), 17(4)(e.1) Tip

Amount : \$35.31

Trans type : PRE AUTHORIZATION

Account : VISA

Card Entry : SWIPE

Card #

s.17(1), 17(4)(e.1)

TRANSACTION RECORD

JUL 04 2005 06:34 pm Trans#00055

BOOMTOWN PUB & PATIO
135 Southland Drive
Calgary, AB
T2J 5X5

Duplicate Copy

0065 Server: NICK V 07/04/05 18:38, Swiped T: 211 Term: 6
Rec: 14

DELTA BOW VALLEY
PARKING
THANK YOU
GST R80551096

06/17/2005 1:42PM 01
0000007891
CERNOT

AMOUNT \$6.00
MISE ST \$6.00
GST 0.39

ITEMS 10
***TOTAL \$96.00
CASH \$20.00
CHANGE \$14.00

M. Munsal

01/027 APPROVED THANK YOU

Auth # : 097089
Sequence # : 001130110
Terminal # : 6606733
Date : 05/07/04
Time : 18:36:40

Total 39.31

4-

DATE 06/14/05
TIME 18:19
MID 45024025996
65704 402599

JACK ASTOR'S - CALGARY
9823 MacLeod Trail SW
CALGARY
ALBERTA
403-252-2246
s.17(1), 17(4)(e.1)

VISA
AUTH 063101
PURCHASE COCKTAIL
AMOUNT 16.73
PAUL'S TAX 1.32
MOLE 112 CHECK 2249
SEPTEMBER

SUBTOTAL \$ 20.05
TIP \$ 3.00
TOTAL \$ 23.05

CUSTOMER COPY

PALLISER PARKADE
CALGARY AB

RECEIPT ONLY!
PAY STATION: C3

ENTRY DATE/TIME:
27/06/05 11:46
PAY DATE/TIME:
27/06/05 13:18
PARK-DUR.: HRS:MIN

0:01:32
PAID: \$ 7.50
CASH

* YOU MUST TAKE *
* ORIGINAL TICKET *
* WITH YOU AND USE *
* IT TO EXIT *

GST INCLUDED
GST No. R12201449

1
THANK YOU FOR YOUR
VISIT!

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date	December 18, 2006
Requested By (Please Print)	Lynn Gallow
Department People & Learning	Site Southport
MAKE CHEQUE PAYABLE TO: Margaret Munsch	Employee/Supplier # 1393

MAILING ADDRESS (for forwarding of cheque) s.17(1), 17(4)(g)(i)

Canada Post: _____

City: _____ Province: _____ Postal Code: _____

Interoffice Mail: Department People & Learning

Site Southport

Purpose of Request _____

SPECIAL HANDLING INSTRUCTIONS _____

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
0 1	7 1 1 2 0 0 0 0 0 0 5	6 9 6 0 0 0 0 0	1083.27	Meeting Expenses - Oct - Dec 2006
0 1	7 1 1 2 0 0 0 0 0 0 5	6 9 5 0 0 0 0 2	1050.88	Recognition Expenses 10211 P. 948.77
0 1	7 1 1 2 0 0 0 0 0 0 5	6 2 4 1 0 0 0 0	21.00	Parking & Taxi Expenses
TOTAL AMOUNT OF CHEQUE: \$ 2155.15				
<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other				
Expenditure Officer Authorization <i>[Signature]</i> Authorizer's Employee Number s.17(1), 17(4)(g)(i)				
Print Name Kay Best, Chief Financial Officer Authorizer Phone # (in full) 943-1140				

ACCOUNTS PAYABLE ONLY

Invoice # _____	Supplier # _____	Recurring Payment: _____
Start Date _____	End Date _____	# of Payments _____
Cycle _____	Comments: _____	

Wellington's/Oscar's
Please pay server.
Thank-you.

**** CUSTOMER COPY ****

TOTAL \$ 11.57

TIP \$ 5

SUBTOTAL \$ 36.57

MUNSCHE/MARGARET
AUTH 060383
MERCHANT# 9999
ONLINE

Server: Denis
Table: 3
Date: 10/11/2006
Time: 19:00

WELLINGTONS/OSCARS
10225 Bonaventure Dr. SE
Tel: 403-278-5250

L. W. 11.57

s.17(1), 17(4)(e.1)

CARDHOLDER'S TOTAL AMOUNT SHOWN
ACCORDING TO CARDHOLDER'S
AGREEMENT.

M. Munsch

01 APPROVED BY AUTH.# 079243
THANK YOU

TOTAL AMOUNT

39.98

TIP

5

AMOUNT

\$34.98

AUTHORIZATION

2570
VISA
EXPIRES DATE
03/12/10
05/12/10
RECEIVED AMOUNT
52005.495

s.17(1), 17(4)(e.1)

ANNIE @ THE RANCHE
BOW VALLEY RANCH FISH CRE
CALGARY AB

BROKER PLATE
590-18816 HALLING T-1580
CALGARY AB
22799973
PRE AUTH PURCHASE
12-12-2006 11:24:55
Auth # 054461
Exp Date - 09/01 Card Type VI
Name: MARGARET MUNSCH
Inv # 1664 Special 066
122799973001
Auth # 054461 Inv 001704007

P. AUTH PURCHASE 345.98
Tip 9
Total 51.58

Customer Copy

Fisch

Fruits & Passion

100 Anderson Rd. S.E. (403) 278-7044
Calgary T2J 3V1 Alberta

REDWATER RUSTIC GRILLE

9223 McLeod Tr. South
Tel: 403-253-4266
Check: 20128

Trans #: 15834
Oper: 5353

RECEIPT

Qty Unit Pr. Price Tx

Sales Associate : Cindy

FR00026-06 DUO HAND CARE ORANGE C

1 25.00 25.00 F

FR00026-06 DUO HAND CARE ORANGE C

1 25.00 25.00 F

Sub Total: 50.00

GST/TPS 6% : 3.00

Total ==> 53.00

Payments

CARTE VISA : 53.00

VISA : 53.00

VISA Rate : 53.00 @

APPLICANT COPY

Server: S-Valeria S Date: 10/11/2006
Table: 111 Time: 20:30

VISA

s.17(1), 17(4)(e)

MUNICH/MAKIGAKEI

AUTH 086746

MERCHANT# 9999

SUBTOTAL \$ 155.03

TIP \$ 22-

TOTAL \$ 177.03

535

Southcentre

10/20/2006

15834

Sales Associate : Cindy

19:36

Découvrez notre nouvelle gamme

Sous Visage qui offre des produits

performants concentrés en actifs

naturels !

Discover our new Face Care Line,

which offers performance driven products

made from natural active ingredients

** CUSTOMER COPY **

Thank You For Dining With us.

GST # 81958494RT0001

Recognition Loans
S. Cassidy

Convention Centre
727 - 11 Street SE
Calgary, AB
Tax code: CAGST #119457869
CT 2: (103) 14/09/06 14:51
Cashier 32
Receipt 093237

REDWATER RUSTIC
GRILL

9223 McLeod Blvd
Tel: 403 243 1266
Check: 25613

Short-term Parkings tkt
L60 - No. 096875
14/09/06 08:49 -
14/09/06 14:51
Period 0006h03.
(GST) \$16.00
Gross total \$16.00
Payment C:

JACK ASHLEY
9873 McLeod Blvd SW
CALGARY
ALBERTA

PACKING s.17(1), 17(4)(e.1) 493 252 2246

Server: J Mark K.
Table: 121

Date
Time

ISA s.17(1), 17(4)(e.1)

MUNICH/MARCAI
AUTH ONLINE
MERCHANT#

VISA AUTH 029646 TABLE 115 CHECK 6415
PURCHASE SEPT
SEPT
SEPT

AMOUNT 46.36
G.S.T 2.78

SUBTOTAL \$ 49.14

TIP \$ 8-

TOTAL \$ 65.30

TIP \$ 7.69
TOTAL \$ 56.14

CUSTOMER COPY **

CUSTOMER COPY

Thank you for Dining With Us.
019584947RT0001

APPLICANT COPY

REDWATER RUSTIC GRILLE

The Jaycees 4610 Irish Pub
 (51) 2745211/2749061
 506 24th Ave
 Calgary, AB
 403-241-9116

9223 McLeod Tr. South
 Tel: 403-253-4266
 Check: 27769

REDWATER RUSTIC GRILLE
 9223 McLeod Tr. South
 Tel: 403-253-4266
 Check: 24329

Server: Patti
 06:14 PM
 Table 7477

Server: Jason K.
 Table: 233

Server: S-Mark K.
 Table: 233
 Date: 11/16/2006
 Time: 13:28

s.17(1), 17(4)(e.1)

s.17(1), 17(4)(e.1)

VISA
 Card
 Margaret
 Approval # 76

052599
 9999

MUNSCH/MARGARET
 AUTH 023811
 MERCHANT# 9999

100.14

SUBTOTAL \$ 287.79

SUBTOTAL \$ 125.08

14.40

TIP \$ 40.00

TIP \$ 18.00

166.00

TOTAL \$ 327.79

TOTAL \$ 143.08

M. Munsch

** CUSTOMER COPY **

** CUSTOMER COPY **

Must be used on every Monday Night
 for our 10th Anniversary Party - 10:00
 every Saturday, the best
 of traditional & contemporary
 music for
 everyone

Thank You For Dining With Us.
 GST # 81958434 (0001)

Thank You For Dining With Us.
 GST # 819584947RT0001

Customer Copy

4

PASQUALES ON MACLEOD
6806 MACLEOD TR SW
CALGARY

ID: 80999540
SLIP #: 1924
STORE: 0999540

PRE-AUTH \$155.24

POURBOIRE/TIP \$ 22.00

TOTAL \$ 177.24

SIGNATURE X *M. Munsch*

S.17(1), 17(4)(e.1) 0908 *\$
Visa

APPROVED AUTH 0203507
SER 528001001063 ISO -001
NOV 06 2006 8:57 PM

MERCHANT COPY

REDWATER RUSTIC
GRILLE

9223 McLeod Tr. South
Tel: 403-253-4266
Check: 27441

Date: 10/17/2006
Time: 21:33
Table: 335

s.17(1), 17(4)(e.1)

SERVER: S-LINDSAY C.
TABLE: 335

DATE: 10/17/2006

SUBTOTAL \$ 146.28

TIP \$ 21.00

TOTAL \$ 167.28

** CUSTOMER COPY **

Thank You For Dining With Us.
GST # 819584947R10001

** CUSTOMER COPY **

Thank You For Dining With Us.
GST # 819584947R10001

REDWATER RUSTIC
GRILLE

9223 McLeod Tr. South
Tel: 403-253-4266
Check: 20833

Server: S-Lindsay C.
Table: 335
Date: 10/17/2006
Time: 21:33

VTSA s.17(1), 17(4)(e.1)

MUNSCH/MARGARET
AUTH 075942 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 146.28

TIP \$ 21.00

TOTAL \$ 167.28

** CUSTOMER COPY **

Thank You For Dining With Us.
GST # 819584947R10001

WELLINGTON'S/OSCAR'S

10325 Bonaventure Dr. SE
Tel: 43-272-5200

ATER RUSTIC
GRILLE

3 McLeod Tr. South
tel: 403-253-4266
check: 25717

Server: Skupper
Table: 26

Date: 11/28/2006
Time: 13:40

VISA

s.17(1), 17(4)(e.1)

MUNICH/MARGARET

AUTH 072643 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 29.68

TIP \$ 4.00

TOTAL \$ 33.68

s.17(1), 17(4)(e.1)

** CUSTOMER COPY **

BAR ONE WEST
105 BOMFOOT ROAD N.W.
CALGARY AB

OCT

3
4
0
7
8
0
1

PRE-AUTHORIZATION
AMOUNT \$48.88

TIP 7.00
TOTAL CHG 55.68

vid S Date: 11/28/2006
Time: 20:46

0000
REF 047560 ONLINE
9999

TAL \$ 187.89

TIP \$ 27.00

TAL \$ 214.89

TOMER COPY **

APPROVED

AUTH# 062537 01-027
THANK YOU

CARDHOLDER COPY

Wellington's/Oscar's
Please pay server.
Thank you.

od For Dining With Us.
81958494/RT0001

APPLICANT COPY

BEST WESTERN VILLAGE PARK INN
1804 CROWCHILD TRAIL NW
CALGARY AB S.17(1), 17(4)(e.1)

CARD NUMBER 131
CARD TYPE VISA
CARD DATE/TIME 2006/11/06 08:11:09
RECEIPT NUMBER S80510188-096-004
AUTHORIZATION AMOUNT \$34.19

TIP 5
TOTAL AMOUNT 39.19

AUTH. # 033546
01 APPROVED 027
THANK YOU

CARDHOLDER COPY

2

PASSUALES ON HACLEDD
CALGARY
6886 HACLEDD TR SW

ID: 8899548
SLIP #: 9529
STORE: 8999548

PRE-AUTH \$40.39
POURBOIRE/TIP \$ 6
TOTAL \$ 46.39

SIGNATURE *M Munsch*
s.17(1), 17(4)(e.1) 988 \$5

APPROVED AUTH 035567
SER 583801001032 ISO 001
OCT 12 2006 1:44 PM
MERCHANT COPY

Nov

Exp Date 09/08 Card Type VI
Name MARGARET MUNSCH
Inv # 1223 Operator 555
Auth # 68760 T22739973001 RPN 001671008

P. Auth
Tip
Total
Customer Copy

73

5-
4316



Travel/Education Expense Claim

MAR 2 2006

RECEIVED

Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

Employee Name (Print) Michele Massoli		Calgary Health Region E-Mail Address S.17(1), 17(4)(g)(i)		Employee Number																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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<table border="1"> <thead> <tr> <th>Expense</th> <th>Description</th> <th>Exchange</th> <th>Rate/GST</th> <th>Total Funds</th> </tr> </thead> <tbody> <tr> <td></td> <td>Tuition</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Air paid by Calgary Health Region via Health Region</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Mileage</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Mileage If travel is by car</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Accommodation</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Meals Based on per diem rate</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Meals</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Ground</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Transport</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Other (Specify)</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Total</td> <td></td> <td></td> <td></td> </tr> <tr> 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Hilton Toronto
 145 Richmond Street West,
 Toronto, Ontario, Canada M5H 2L2
 Telephone: (416) 869-3456 Fax: (416) 869-1478

Honors points for this stay, upon verification of eligibility by HHonors, will be up

For billing inquiries, please email us at "billings.toronto@hilton.com"

Signature: _____

The credit card presented on arrival will be used today to process your No-Stop Check-Out. Any additional charges posted after 5 a.m. will also be added to this folio. Thank you for using Hilton No-Stop Check-Out.
 Valid with computer print only.

Date	Description	Debit	Credit
02/20	Room Charge	130.00	
02/20	Destination Marketing Fe	3.64	
02/20	-Room GST 7% (133.64)	9.35	
02/20	-Room PST 5% (130.00)	6.50	
Total		149.49	
Balance			149.49 CAD

Hilton Toronto, 02/20/06 00:39
 *****INFORMATION BIL*****
 Room Number 1816
 No of Person(s) 1
 Cashier /FRASER
 Page 1
 Rate CDN 130.00
 Frequent Flyer: AC
 Honors Number: s.17(1), 17(4)(g)(i)

Canada
 Ms. Margaret Munsch
 10101 Southport Road
 Calgary, AB T2W 3N2



APPLICANT COPY

Subject: Fwd: Ms Margaret Munsch - Booking confirmation
Date: Tue, 14 Feb 2006 09:11:13 -0700

From: Travel CHR <travel.chr@calgaryhealthregion.ca>
To: margaret.munsch@calgaryhealthregion.ca,
Lynn Gallow <Lynn.Gallow@CalgaryHealthRegion.ca>

Subject: Ms Margaret Munsch - Booking confirmation
Date: Tue, 14 Feb 2006 16:07:55 +0000 (GMT)

From: Air Canada <confirmation@aircanada.com>
To: travel.chr@calgaryhealthregion.ca

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****



Itinerary/Receipt

Your booking is confirmed.

Please print this itinerary/receipt for your reference.

Thank you for choosing Air Canada and we look forward to welcoming you on board.
Booking Date: Feb 14, 2006 Passengers: Ms Margaret Munsch

Agent Name: erin

Agent ID: 6051246

Booking Information

Booking Reference: LZRB6BM

Electronic Ticketing confirmed. This is your official

itinerary/receipt.

Main Contact:

UNIGLOBE Custom Travel
travel.chr@calgaryhealthregion.ca
1-403-2721000

Online Services

Alert me of flight status changes directly to my email, page or mobile phone.

Flight Arrivals & Departures - check online if my flight is on time.

Check-in online and print my boarding pass.

* Can my booking be changed online?

Flight Itinerary

1-888-422-7533

Flight Arrivals and Departures

1-888-712-7786

Questions about your booking or Air Canada online services?

Customer Care

APPLICANT COPY

Flight From To Stops Duration Airfare Type Fare Type Meal Service*

ACI64	Mon 20-Feb 2006	11:00	16:45 - Terminal 1	0	3hr45	320	Tango	F	
ACI25	Tue 21-Feb 2006	16:00	16:00 - Terminal 1	0	4hr20	320	Tango	F	

Reasonably priced food choices are available for purchase onboard in Hospitality Class (special meals are not available on these flights). Latitude and Latitude Plus customers will receive a complimentary snack selection on our short haul flights between 1.5 and 2 hours, and a complimentary snack and sandwich selection on flights of more than 2 hours within Continental North America. Please present your boarding pass to our flight attendants during meal service for the complimentary offer. More information and sample menus

* Meal legend:
F = Food for purchase

Passenger Information

Passenger 1: Adult
 Name: Ms Margaret Munsch
 Frequent Flyer: Air Canada Aeroplan
 Pgm: Program Number: s.17(1), 17(4)(g)(i)
 Ticket Number: 0142132931022
 Meal Preference: None
 Seat Selection: None
 Credit Card: s.17(1), 17(4)(e.1)

Purchase Summary

Passenger Type Adult
 Flight 1 - Departing airfare (Tango) 334.00
 Flight 2 - Returning airfare (Tango) 381.00
 Navcan and Surcharges 46.00
 Taxes, Fees and Charges 30.00
 Canada Airport Improvement Fee 10.00
 Canada Security Charge
 Canada Goods and Services Tax (GST/HST #10009-2287) EXEMPT
 Total airfare (per passenger) 801.00
 Number Of Passengers 1
 Total airfare (1 passenger) 801.00
Grand Total - Canadian Dollars \$ 801.00

Fare Rules

G.S.T. 1023663181 VV

To:
 From:
 \$3.69

Best Copy Possible
1.00
1.45
1.00
3.45
0.24
69
3.45
0.24
69

02/21/06 18:57:45
02/20/06 12:07:18
02/21/06 18:57:45
02/20/06 12:07:18
02/21/06 18:57:45
02/20/06 12:07:18
02/21/06 18:57:45
02/20/06 12:07:18

RECEIPT
H4
ENTRY DATE/TIME: 02/20/06 12:07:18
EXIT DATE/TIME: 02/21/06 18:57:45
PAID: \$ 32.00
(GST INCLUDED)
LENGTH OF STAY: 1 06:50
METHOD OF PAYMENT: CASH
THANK YOU FOR YOUR VISIT
CALGARY AIRPORT
Terminal Parkade
GST No. R122556194

DATE: 21-2-06
FROM: _____
TO: _____
DRIVER'S NAME: *[Signature]*
CAB# 2439
FARE INCLUDES GST
AMT: \$ 51.00
416-366-6868
www.diamondtaxi.ca
DIAMOND TAXI CAB DISPATCH SERVICE 416 366-6868
THANK YOU
The driver is an Independent Contractor, any GST input credit may be claimed as "notional" or applied to the driver's GST registered number, not Diamond Taxi Inc.

APPLICANT COPY TRAVEL/EDUCATION EXPENSE CLAIM

INSTRUCTIONS

- This form must be completed prior to booking travel.
- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be E-Mailed to your CRHA E-Mail address OR mailed to your home address (if a valid E-Mail address doesn't exist).
- Please consult the CRHA Travel Policy for clarification.
- See back of form for additional instructions.

Employee Name (Print) **MICHAEL MARSCH**
 Department/Site **People Learning**
 CRHA E-Mail Address **s.17(1), 17(4)(g)(i)**
 Tuition Paid To (if tuition to be paid directly to institution, use Cheque Requisition form #00074.) **Health Board Conference**
 Destination **COMO**
 Departure Date **Mar 19/05**
 Return Date **Mar 14/05**
 Course Title **2005 Health Board Conf**

ESTIMATED/ACTUAL EXPENSES

Expense Description	Expense Rate/GST	Total Funds (Cdn)	Expense Description	Expense Rate/GST	Total Funds (Cdn)
Tuition			Tuition only if		
Air paid by CRHA via CRHA Travel Agent			Mileage		
Mileage			If travel is by car		
Meals based on per diem rate			Accommodation		
Ground Transport			Meals		
Other (Specify)			Ground Transport		
			Other (Specify)		
TOTAL		\$ 875.00	TOTAL		\$ 276.50

Advance Requested (80% of estimated expenses & advance exceeds \$250.00) \$ (Cdn)

Less Advance or Unfunded Portion \$ (Cdn)

Employee Signature **M. Marsch** Date **Mar 8/05**

Expenditure Officer Authorization **M. Marsch** Date **Mar 8/05**

Authorizer Employee Number

Employee Signature **M. Marsch** Date **Mar 19/05**

Expenditure Officer Approval **M. Marsch** Date **Mar 19/05**

FINANCIAL CODE

Org 01711200000562412000

Functional Centre

Account

Authorizer Employee Number

Comments/Other Sources of Funding

79

1998.00

47.00

Trip Summary - Alaska Health Care

APPLICANT COPY

Sunday, 13 March 15

Best Copy Possible

- 1. NE 8155 17.55 Taxi from incidental costs for hotel (receipt)
- 2. Skipper 50 per Hotel
- 3. Breakfast & lunch (receipt)
- 4. Incidentals (receipt)
- 5. Breakfast & lunch (receipt)
- 6. Breakfast & lunch (receipt)
- 7. Sub cash in hotel (receipt)
- 8. Parking Airport in city (receipt)

157.87

17.55 (receipt)
57.55 (receipt)
20.55

Total \$246.87

10135 100th Street * Edmonton, AB CAN T5J 0N7 * Ph (780)426-3636 Fax (780)428-1454

Ms. Margaret Munsch

s.17(1), 17(4)(g)(i)

Arrival 03/13/05
 Departure 03/14/05
 Payment Method MC

Room 1041
 Cashier 46
 Page 1
 Starwood Pref.#
 Airline Partner
 Folio No. 354086

Guest Account The Westin Edmonton, 03/14/05

Date	Description	Room	Charges	Credits
------	-------------	------	---------	---------

03/13 Room Charge 1041 140.00

03/13 Room Tax 5% 7.00

03/13 Room GST 7% 9.80

03/14 Mastercard -

Capture method:swiped

Total

156.80

Balance

\$ 0.00

Room GST 9.80
 F&B GST 0.00
 Other GST 0.00
 Total GST 9.80
 GST Vendor R101577591

PRESTIGE
 10135 - 31 Avenue
 Edmonton, Alberta T6N 1C2

ADMIN. 465-8500
 FAX: 462-2722
 THANK YOU/MERCI

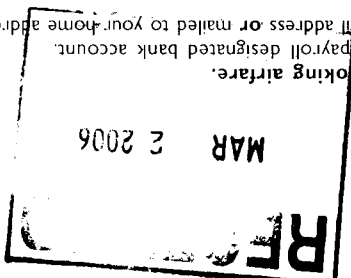
Date: 14
 Amount/Montant \$ 156.80
 Car/Voiture # 906

Driver/Chauffeur: [Signature]
 G.S.T. # [Signature]

From/De: [Signature]
 To/A: [Signature]

PLEASE CALL AGAIN
 AU PLAISER DE VOUS REVOIR

Travel/Education Expense Claim



Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

Employee Name (Print) Mr. Robert Munnich

Department/Site Core Learning

Phone Number 948-1166 Date Feb 26

Tuition Paid To (if tuition to be paid directly to institution, use Payment Requisition form #100074.) Destination Vancouver BC

Course Title Discussion (2006) - Introduction to Health Care

Departure Date Feb 26 Return Date Feb 26

Actual Expenses Paid by Employee

Expense Description	Expense	Exchange Rate/GST	Total Funds	Tuition	Air paid by Calgary Health Region via Calgary Health Region Travel Agent	Mileage	If travel is by car	Accommodation	Meals Based on per diem rate	Ground	Transport	Other (Specify)	Total
Expense													\$ 617.57
Mileage						317.09							
Accommodation								200.00					
Meals													
Ground													
Transport													
Other (Specify)													
Less Advance or Unfunded Portion	\$												\$ 257.14
Advance Requested (80% of estimated expenses & advance exceeds \$250.00)	\$												\$
Employee Signature	Date												
Departmental Authorization	Date												
Out of Province Authorization	Date												
Departmental Authorization	Date												
Employee Signature	Date												
Balance Due To Employee	Date												
Calgary Health Region (cheque attached)	Date												
Departmental Authorization	Date												

Financial Code

Org Functional Centre 01711200000562414000 Account 12

Comments/Other Sources of Funding

244.14 13.00



The Sutton Place Hotel

APPLICANT COPY

Ms Margaret Munsch
10101 Southport Road
Calgary, AB T2W 3N2
Canada

INVOICE

Membership No. :

Room Number : 0812
Arrival Date : 02-09-06
Departure Date : 02-10-06
Page : 1 of 1
Folio Number : 16090
Confirmation : 743333
Cashier : 118

Company Name : FEDERAL GOVERNMENT

GST No. : 135760569 RT 000

Date	Description	Charges CAD	Credits CAD
------	-------------	----------------	----------------

02-09-06	Room Charge	100.00	
02-09-06	Room PST	10.00	
02-09-06	Room GST	7.00	
02-10-06	Visa		117.00

Total		117.00	117.00
Balance		0.00	CAD

Room GST	7.00
F&B GST	0.00
Misc GST	0.00
Total	7

Guest Signature:

I agree that I am personally liable for the final disposition and payment of any services rendered or goods supplied by The Sutton Place Hotel and further authorize the use of my credit card to facilitate full payment. I accept responsibility in the event the indicated third-party, company or association fails to render full payment of this account, and also for any loss or damage to the premises or its contents.

A MEMBER OF THE SUTTON PLACE GRANDE HOTELS GROUP - CHICAGO, EDMONTON, TORONTO, VANCOUVER

845 Burrard Street, Vancouver, BC Canada V6Z 2K6 Tel 604.682.5511 Fax 604.682.5513 • 1.866.378.8866
email: info.vancouver@suttonplace.com website: www.suttonplace.com

Subject: Fwd: Your Ticketless Itinerary - Thank you and have a great flight.
Date: Mon, 30 Jan 2006 14:41:31 -0700
From: Travel CHR <travel.chr@calgaryhealthregion.ca>
To: Lynn Gallow <Lynn.Gallow@CalgaryHealthRegion.ca>

Subject: Your Ticketless Itinerary - Thank you and have a great flight.
Date: Mon, 30 Jan 2006 14:31:31 -0700
From: itinerary@westjet.com
To: travel.chr@calgaryhealthregion.ca

WESTJET
5055 11 ST NE
CALGARY, AB T2E 8N4
Agent Number: INET *****
BZTHCB *****
Confirmation Number:

UNIGLOBE CUSTOM TRAVEL LTD
2424 4TH STREET SW
SUITE 800
CALGARY, AB
T2S 2T4
Welcome Aboard: Margaret Munsch

Date	Flt	Depart	Seat	Arrive	Stops
Thu 09Feb06	411	CALGARY	5:00pm	VANCOUVER	0
Fri 10Feb06	168	VANCOUVER	2:00pm	CALGARY	0

Total for 01 guest(s)
Fare: 221.00
NAV/INS: 36.00
CALGARY AIF: 15.00
VANCOUVER AIF: 15.00
ATSC: 9.34
GST/HST: 20.75

Total \$317.09 CA
Visit our Website at www.westjet.com
American Express: \$317.09-
Balance Due: \$0.00 CA

QST# 1202807956TQ0001
Rules and other stuff:
GST# 866112535

* For Domestic Flights: Identification will be checked for adults 16 years of age and older. Please check-in a minimum of 90 minutes prior to scheduled departure. Although we will do our best to assist, guests arriving less than 20 minutes prior to the scheduled departure may be denied boarding.
* Check in early and choose your own seat. Use Westjet's Web check-in service from 12 hours to 1 hour before you fly and print your boarding pass before you even get to the airport. Find out more at



604 681-1111
604 876-5555

DATE 12/10/06

RECEIVED FROM _____
TO _____
CAB NO. _____
DRIVER _____
\$33.00

AIRPORT SERVICE • 24 Hour Courier • Serving you since 1921
AT A PAYPHONE? CALL: 1-800-898-TAXI(8294) **NO COINS NEEDED**
TTY LINE (hearing impaired) 604 286-4747 GST INCLUDED

CASH RECEIPT
SURDELL KENNEDY TAXI LTD.
Unit #103-12975-84th Ave.
Surrey, BC V3W 1B3
588-8888 588-6565
G.S.T. # R 12183 8809
Date 09-02-06
From AD
To _____
Driver PKS
Cab # 71
Phone # _____
Thanks For Riding With Us

DATE 07/03/06
MID 00040340027
50273

DATE 07/03/06
MID 00040340027
50273

DATE 07/03/06
MID 00040340027
50273

DATE 07/03/06
MID 00040340027
50273

Date: 12/10/06
Chauffeur: _____
Unit No.: 517 Amount: 33.00 (G.S.T. INCLUDED)
G.S.T. No.: _____

DATE 07/03/06
MID 00040340027
50273



INSTRUCTIONS

- This form must be completed prior to booking travel.
- Submit "Pink Copy" to Accounts Payable immediately upon booking all fare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be E-Mailed to your CRHA E-Mail address. OR mailed to your home address (if a valid E-Mail address doesn't exist).
- Please consult the CRHA Travel Policy for clarification.
- See back of form for additional instructions.

RECEIVED
 FINANCE
 DEC 21 2005

Employee Name (Print) MARCO ANTONIO MANSOURI
 Department/Site PEOPLE & COMMUNITY
 Phone Number 595-1100 Date 04/19/05
 Tuition Paid To (if tuition to be paid directly to institution, use Cheque Requisition form #00074) n/c
 Course Title COURT REPORT COURSE
 Destination TORONTO, ONTARIO
 Departure Date 04/19/05
 Return Date 04/19/05

ESTIMATED/ACTUAL EXPENSES

Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)
Tuition	Air paid by CRHA via CRHA Travel Agent		
Mileage	If travel is by car		
Accommodation	If travel is by car		
Meals	Based on per diem rate		
Ground Transport			
Other (Specify)			
TOTAL			\$ 8,370.00

Advance Requested (80% of estimated expenses & advance exceeds \$250.00) \$ (Cdn)

Less Advance or Unfunded Portion \$ (Cdn)

Employee Signature L. Gosselin / Mansouris Date 04/19/05
 Expenditure Officer Authorization Date 04/19/05
 Authorizer Employee Number

Employee Signature Date
 Expenditure Officer Approval Date 05-12-05
 Authorizer Employee Number

FINANCIAL CODE
 Org Functional Centre Account

Comments/Other Sources of Funding

86

250.70
 46.90



The Sutton Place Hotel

APPLICANT COPY

Ms. Margaret Munsch

s.17(1), 17(4)(g)(i)

Page: 1
Room Number: 1421
Arrival Date: 11/08/05
Departure Date: 11/09/05
GST#: R135760569

Cashier: 19 / NATALIEFF

I N V O I C E N O . 379030 The Sutton Place Hotel Toronto, 11/09/05 11:19

DATE	DESCRIPTION	ROOM	CHARGES	CREDITS
11/08	Room Service Dinner	1421	59.32	
	->#1421 : CHECK #4460			
11/08	Room Revenue		169.00	
11/08	Room DMF		4.73	
11/08	Room PST		8.45	
11/08	Room GST		11.83	
11/08	Room DMF 7% GST		0.33	
11/09	Visa			253.66
			Total	253.66
			s.17(1), 17(4)(e.1)	253.66
			Balance	0.00 \$

Room GST: 11.83
F&B GST: 2.87
Other GST: 0.00
Total GST: 14.70

I agree that I am personally liable by the Sutton Place Hotel and further responsibility in the event the Ino account, and also for any loss or d

Signature: _____
Make your next res

CALGARY AIRPORT
TERMINAL PARKADE
GST NO. R135564394
RECEIPT
HS
ENTRY DATE/TIME: 11/08/05 14:59:00
EXIT DATE/TIME: 11/09/05 21:10:34
PAID: \$ 32.00
LENGTH OF STAY: 1 04:11
METHOD OF PAYMENT: CASH
THANK YOU FOR YOUR VISIT

A MEMBER OF THE SUTTON
955 BAY STREET, TORONTO,

924-1778

87

Car No. **5** Date 11/09/05
From _____ To _____
Fare Amount \$ 253.66
Tip 155
Total 408.66
GST No. _____
Received with Thanks
Signature _____
Fares
Inc
Ren

APPLICANT COPY

CHEQUE REQUISITION

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date June 13, 2005	Requested By (Please Print) Lynn Gallow
Department People & Learning	Site Southport
Phone No (in full) 943-1393	Employee/Supplier #

MAKE CHEQUE PAYABLE TO: Margaret Munsch

Employee/Supplier # s.17(1), 17(4)(g)(i)

MAILING ADDRESS (for forwarding of cheque)

Canada Post:

City _____ Province _____ Postal Code _____

Department: People & Learning

Site: Southport

Purpose of Request _____

SPECIAL HANDLING INSTRUCTIONS

RECEIVED
 JUN 21 2005
FINANCE

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
01	7112000005		\$ 365.35	Expenses - March, April, May 2005
				169,332
				196,022
				GST \$
TOTAL AMOUNT OF CHEQUE:			\$ 365.35	<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer		
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140		
s.17(1), 17(4)(g)(i)				

ACCOUNTS PAYABLE ONLY

Invoice # _____

Supplier # _____

Recurring Payment: _____

Start Date _____

End Date _____

of Payments _____

Cycle _____

Comments: _____

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
 FOR THE PERIOD OF March, April & May 2005

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
March 29, 2005	Lunch Meeting - Don Winn	38.83 - 2.21
March 31, 2005	Lunch Meeting - J Vanderkaay/C Graham	53.08 - 3.08
April 4, 2005	Staples (Report Covers)	14.47, 15
May 4, 2005	Lunch Meeting - Wendy Griffin	14.45 95
May 17, 2005	Lunch Meeting - F Girard (Follow-Up to Departure)	38.63 - 2.23
May 20, 2005	Phase I Stabilization "Recognition" Lunch	180.57 -
May 24, 2005	Lunch Meeting - Lynne Wood	16.32 1.07

Parking (See Attached Receipts)

9.00

GRAND TOTAL

\$ 365.35

Date June 13, 2005

Approved by Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO

Margaret Munsch
 Senior Vice-President
 People & Learning

PLL

DISPLAY THIS SIDE UP ON DASHBOARD

EXPIRATION DATE

EXPIRATION TIME

11/04 02:57 PM

AMOUNT PAID

\$ 5.00 2032000001:17 PM



NON TRANSFERABLE

4742061

DISPLAY THIS SIDE UP ON DASHBOARD

EXPIRATION DATE

EXPIRATION TIME

12/05 03:02 PM

AMOUNT PAID

\$ 4.00 2032000001:42 PM



NON TRANSFERABLE

4725483

THE PITA PLI
403-258-1008
SOUTHLAND CROSSING
WE DELIVER
OPEN LATE

05-04-2005 MC #:1234

CH CAESAR *6.75TX
CH CAESAR *6.75TX
*0.95TX

TOTAL *14.45
AMOUNT *20.00
CHANGE *5.55

AM11-03 0006

HAVE A NICE DAY
PLEASE COME AGAIN

06

THE PITA PIT
403-258-1008
SOUTHLAND CROSSING
WE DELIVER
OPEN LATE

05-24-2005 MC #: 1234

CH CAESAR *6.75TX
CH CAESAR *6.75TX
WATER *1.75TX
*1.07TX

TOTAL *16.32
AMOUNT *20.00
CHANGE *3.68

AM11-44 0025

HAVE A NICE DAY
PLEASE COME AGAIN

 DATE 03/29/05 TIME 13:18
 MID 45024025996 00304722
 71522

JACK ASTOR'S - CALGARY
 9823 MacLeod Trail SW
 CALGARY
 ALBERTA
 403-252-2246 s.17(1), 17(4)(e.1)

MASTCH S 06/06
 AUTH 151405 TABLE 29 CHECK 5310
 PURCHASE DINING ROOM J.R.
 AMOUNT 31.62
 PAUL'S TAX 2.21

SUBTOTAL \$ 33.83
 TIP \$ 5.50
 TOTAL \$ 38.83

CUSTOMER COPY

 TO WIN OUR WEEKLY DRAWING
 ARE YOU LOOKING FOR A PARTNERSHIP
 OR FUNDRAISING OPPORTUNITY GROUP?
 SPEAK TO ONE OF OUR MANAGERS ABOUT OUR
 10% SOLUTION.

WELLINGTONS/OSCAR
 10325 Bonaventure Dr. SE
 Tel: 403-278-5550

Server: Gareth Date: 05/00/00
 05
 Table: 5 Time: 13:48
 VISA s.17(1), 17(4)(e.1)

MUNSCH/MARGARET 092474 ONLINE
 AUTH 9999
 MERCHANT#

SUBTOTAL \$ 138.57

TIP \$ 22.00

TOTAL \$ 180.57

** CUSTOMER COPY **

Wellington's/Oscar's
 Please pay server.
 Thank-you.

STAPLES Business Depot
 Store # 132
 140-350R Shawville Blvd S.E.
 Calgary, AB T2Y3S4
 403-509-2260
 Sale 00089 2 001 81024
 0132 04/04/05 02:39

1 PORTFOLIO:POLY REA 3.026
 078787986084
 1 CLEAR FOLDER 1.246
 065479085514
 1 PROJECT ORGANIZER 3.466
 078787987029
 1 'WAVE' SLASH PKTS 5.806
 078787329003
 Subtotal 13.52
 GST 7.00% 0.95
 Total \$14.47

Visa s.17(1), 17(4)(e.1) 14.47

Visa Swiped Purchase
 Authorization Number 082701
 0010010430 81024 66058783
 89 04/04/05 14:34:55
 01/027 APPROVED - THANK YOU

 Thank you for shopping at
 STAPLES Business Depot!
 We will not be undersold!

 FOR CUSTOMER SERVICE CALL 1-866-STAPLES
 OR EMAIL TO customer_service@busdep.com
 INTERESTED IN EXPLORING A CAREER WITH US?
 VISIT WWW.GREATERCAREERSATSTAPLES.CA

THE BROKEN PLATE
 #580 10816 MacLeod Trail SE
 Tel: 403-225-9650
 Check #: 45716

Server: Sheryl
 Table: 13
 Date: 03/31/2005
 Time: 13:53
 Client: 3

- 2 Feature Soup 10.00
- 1 Dolmades 8.00
- 1 Calamari 9.00
- 2 Calamari Salad 11.00
- 1 Tea 4.00
- 1 Coffee 2.00

SUB-TOTAL: 44.00
 G.S.T.: 3.08
TOTAL: 47.08

Thank You for Dining at Broken Plate!
 GST # 86395426

BROKEN PLATE
 590-10816 MACLEOD TRAIL SE
 CALGARY AB
 50011998

PRE AUTH PURCHASE
 03-31-2005 13:53:30
 Acct # S
 Exp Date
 Name: M MUNSCH
 Inv. # 4229 Operator 112
 T22799973001
 Auth # 155407 RRN 001096014

P. Auth Purchase \$47.08
 Tip
Total

53.08
 Customer copy

WELLINGTONS/OSCAR'S
 10325 Bonaventure Dr. SE
 Tel: 403-278-5250

S.17(1), 17(4)(e.1)

Server: LUCAS
 05

Date: 05/17/20

Table: 1
 Time: 13:16

VISA

s.17(1), 17(4)(e.1)

MUNSCH/MARGARET

AUTH 038844
 MERCHANT# 9999

ONLINE

92

SUBTOTAL \$ 34.13

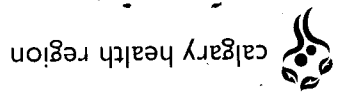
TIP \$ 4.56

TOTAL \$ 38.63

**** CUSTOMER COPY ****

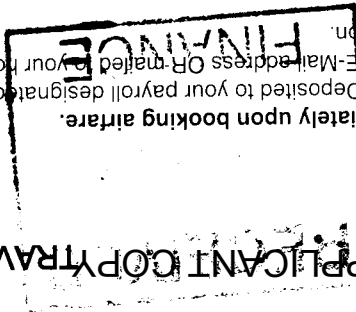
Wellington's/Oscar's
 Please pay server.
 Thank-you.

APPLICANT COPY TRAVEL/EDUCATION EXPENSE CLAIM



INSTRUCTIONS

- This form must be completed prior to booking travel.
- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be E-Mailed to your CRHA E-Mail address OR mailed to your home address (if a valid E-Mail address doesn't exist).
- Please consult the CRHA Travel Policy for clarification.
- See back of form for additional instructions.



Employee Name (Print) **MARGARET MUMFORD**
 Department/Site **People Learning**
 Tuition Paid To (if tuition to be paid directly to institution, use Cheque Requisition form #00074) **THE SENIOR LEADERS CONFERENCE**
 Destination **ITHMIRBY O CANADIA**
 Employee Number **s.17(1), 17(4)(e.1)**
 CRHA E-Mail Address
 Phone Number **543-1166**
 Date **Sept 6/05**
 Course Title
 Departure Date **Sept 11/05**
 Return Date **Sept 18/05**

ESTIMATED/ACTUAL EXPENSES

Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)	Tuition	Air paid by CRHA via CRHA Travel Agent	Mileage	If travel is by car	Accommodation	Meals based on per diem rate	Ground Transport	Other (Specify)	TOTAL
Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)	Tuition only if paid by employee	Mileage	If travel is by car	Accommodation	Meals	Ground Transport	Other (Specify)	TOTAL	\$ 857.32
Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)	Tuition only if paid by employee	Mileage	If travel is by car	Accommodation	Meals	Ground Transport	Other (Specify)	TOTAL	\$ 519.32
Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)	Tuition only if paid by employee	Mileage	If travel is by car	Accommodation	Meals	Ground Transport	Other (Specify)	TOTAL	\$ 337.92

Advance Requested (80% of estimated expenses & advance exceeds \$250.00) \$
 Less Advance or Unfunded Portion \$
 Balance Due To Employee CRHA (cheque attached)

Employee Signature **L. Gallan / L. Mumford** Date **Sept 12/05**
 Expenditure Officer Authorization **L. Gallan / L. Mumford** Date **Sept 12/05**
 Employee Signature **L. Gallan / L. Mumford** Date **Sept 12/05**
 Expenditure Officer Approval **[Signature]** Date **05-19-05**
 Authorizer Employee Number **[Signature]**

FINANCIAL CODE
 Org **017112000000562414000**
 Functional Centre
 Account

Comments/Other Sources of Funding
33593 12
3302
93

Kittling Ridge Winery Inn
 4 Windward Drive
 Grimsby, ON
 L3M 4E8

Telephone: 905-309-7171 Fax: 905-309-7172

Margaret Munsch
 403-943-0309

Page # 1
 Res. # 061294
 Checked in Sun Sep 11/05 - 1:41 pm
 Checked out Tue Sep 13/05 - 12:30 pm
 Nights 2
 Room Rate 119.00
 Room 211

Group: Hamilton Health Sciences

Date	Description	Reference	Charges	Credits
Sep11	Long Distance Charges	18006460000#114-1415	1.00	
Sep11	GST	18006460000#114-1415	0.07	
Sep11	PST	18006460000#114-1415	0.08	
Sep11	Dining Room Charge	18006460000#114-1415	20.96	
Sep11	Long Distance Charges	18006460000#114-1821	1.00	
Sep11	GST	18006460000#114-1821	0.07	
Sep11	PST	18006460000#114-1821	0.08	
Sep11	Group Rates	18006460000#114-1821	119.00	
Sep11	GST	18006460000#114-1821	8.33	
Sep11	PST	18006460000#114-1821	5.95	
Sep12	Group Rates		119.00	
Sep12	GST		8.33	
Sep12	PST		5.95	
Sep13	PAID BY VISA - Thank you		289.82	289.82

Thank you for choosing Kittling Ridge Winery Inn and Suite
 Our G.S.T. # is 881057822

Charge Summary:
 Long Distance Charges 16.80
 GST 2.00
 PST 12.06

RECEIPT FOR CAB FARE
 Date: Sep 11, 2005
 Amount: 16.80
 From: Kittling Winery Inn
 To: Driver 55 Rtc
 Cab No. 525-BLUE
 THANK YOU

CORNER CAFE
 GST #898544416
 09/13/2005 4:04PM 1010
 000001#4994 LARA

CUSTOMER/CLIENT
 KILLING RIDGE WINERY INN
 4 WINDWARD DRIVE
 GRIMSBY ON
 ID: A5289632
 STORE: 5289632
 SLIP #: 9220
 PRE-AUTH \$300.00
 POURBOIRE/TIP \$
 TOTAL \$ 289.82
 COFFEE \$1.45
 MUFFIN \$1.25
 KAISER SAND \$3.50
 DASAHI \$2.00
 MDSE ST \$8.20
 FOOD PST \$0.50
 GST \$0.43
 **TOTAL \$9.13
 CASH \$20.00
 CHANGE \$10.87
 VISA *S
 APPROVED
 SEQ #99001001064 AUTH 086403 ISO -001
 DATE Sep 11 2005 TIME 1:39 pm



Travel/Education Expense Claim

Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

Employee Name (Print) **Michelle Mansel**
 Department/Site **People Learning**
 Tuition Paid To (if tuition to be paid directly to institution, use Payment Requisition form #100074) **Health Book/ABC Summit - 4/25/07**
 Course Title **Health Book/ABC Summit - 4/25/07**
 Departure Date **1/05/07** Return Date **1/05/07**
 Destination **Calgary**
 Phone Number **593-1116** Date **1/05/07**
 Employee Number **1405107**
 Calgary Health Region E-Mail Address **mgsel.mansel@calgaryhealthregion.ca**
 Employee Number **1405107**

Original Receipts Must Be Attached

Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)
Tuition	Air paid by Calgary Health Region via Calgary Health Region Travel Agent		153.95
Mileage	Mileage		279.00
Accommodation	Accommodation		521.34
Meals Based on per diem rate	Meals		20.95
Ground Transport	Ground Transport		81.00
Other (Specify)	Other (Specify)		
Total	Total		1023.29

Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)
Less Advance or Unfunded Portion			\$ 423.29
Advance Requested (80% of estimated expenses & advance exceeds \$250.00)			\$ 532.95

Employee Signature	Date	Balance Due To	Date
<i>Lillian Mansel</i>	1/05/07	<input checked="" type="checkbox"/> Employee <input type="checkbox"/> Calgary Health Region (cheque attached)	1/13/07

Departmental Authorization	Date	Employee Signature	Date
<i>Lillian Mansel</i>	1/05/07	<i>Lillian Mansel</i>	1/05/07

Financial Code	Org	Functional Centre	Account
	01	011	20000000000000000000

Comments/Other Sources of Funding
 39769
 85.60



UNION BANK INN

Renaissance Inn

GUEST ACCOUNT

MUNCH MARGARET
10101 SOUTH PORT SW
CALGARY, AB
T2W 3N2
CALGARY HEALTH REGOIN

Room # 409 Folio # 58525

DATE CLERK DEPARTMENT DESCRIPTION AMOUNT

DATE	CLERK	DEPARTMENT	DESCRIPTION	AMOUNT
04/12/07	XXX	5-Room Servi	103/1096/GST 0.48	11.48
04/12/07	AA	2-Room charg		279.00
04/12/07	AA	41-Tourism Le		11.16
04/12/07	AA	42-DMF	On Room Charge	11.16
04/12/07	AA	91-Visa	On Room Charge	2.96
04/13/07	DB		GST On Room Charge	-321.34
			GST Reg. # R897343794	16.74

Expenses
① Bus Market Place
Susanne, Carol, Don. \$254.14

② Trip to Eden
Cab to Hip
Flight.

Dinner + Cuffee
with indiv who picked
me up from airport + dress

to hold
17.13

Hotel
Cab -
321.34
29.00



10053 Jasper Avenue, Edmonton, AB, Canada T5J 1S5
Phone: 780.423.3600 • Fax: 780.423.4623
E-mail: info@unionbankinn.com • Web: unionbankinn.com

96

nt
je
00

APPROVED AUTH 040343
17(1), 17(4)(e.1)

COMPLETION
\$271.94

ATTEN

COMP

From: McArthur ✓
 To: Stewart ✓
 Driver: JD
 Car #: 747
 Date: 13-n-07
 Amount: 29.00

GST# 100403070
 10135 - 31 Avenue
 Edmonton, Alberta T6N 1C2

YELLOW CAB
 (780) 462-3456

777-2222
 777-1111
 "It is our pleasure to serve you. Please call again."
 G.S.T. No.
 Unit No.
 Amount: (G.S.T. Included)
 Date: 13-07
 Driver:

RECEIVED AT EXPIRES
 10055 / 78 AVENUE
 EDMONTON, AB
 T6N 1C2
 * * * * *
 10055 / 78 AVENUE
 EDMONTON, AB
 T6N 1C2
 * * * * *

417.13

3.82

Starbuck



Travel/Education Expense Claim

RECEIVED
FINANCE
1996-10-30

Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

s.17(1), 17(4)(g)(i)

Employee Name (Print) MILLICENT MANNING		Calgary Health Region E-Mail Address manningm@calgaryhealthregion.ca	Employee Number 111111111
Department/Site People's Health	Phone Number 942-1111	Date 2/2/06	
Tuition Paid To (If tuition to be paid directly to institution, use Payment Requisition form #100074.) CALGARY STATE COLLEGE		Departure Date 04/18/06	Return Date 04/19/06
Course Title CORPORATE START COURSE			
Estimated/Actual Expenses			
Actual Expenses Paid by Employee Original Receipts Must Be Attached			

Expense Description	Expense	Exchange	Total Funds	Expense Description	Expense	Exchange	Total Funds
Air paid by Calgary Health Region via Calgary Health Region Travel Agent				Mileage			
If travel is by car				If travel is by car			
Accommodation				Accommodation			
Meals Based on per diem rate				Meals (see notes)			
Ground Transport				Ground Transport			
Other (Specify)				Other (Specify)			
Total	\$ 807.50		\$ 445.22	Total			\$ 445.22
Advance Requested (80% of estimated expenses & advance exceeds \$250.00)	\$			Less Advance or Unfunded Portion	\$		
Employee Signature: [Signature]	Date: 03/1/06			Balance Due To Employee	\$		
Employee Signature: [Signature]	Date: 03/1/06			Employee Signature			
Departmental Authorization: [Signature]	Date: 03/1/06			Departmental Authorization			
Out of Province Authorization: [Signature]	Date: 03/1/06			Date			
Financial Code	Org Functional Centre	Account	Comments/Other Sources of Funding	Date			

118-51	32671		
118-51	32671		



The Sutton Place Hotel

APPLICANT COPY

Ms. Margaret Munsch
Calgary Health Regia
10101 Southport Rd. SW
Calgary, AB T2W3N2
CANADA

Page: 1
Room Number: 2207
Arrival Date: 10/18/06
Departure Date: 10/19/06
GST#: R135760569

Cashier: / ANNMARIEC

INFORMATION PRINTOUT The Sutton Place Hotel Toronto, 10/18/06 01:11

DATE	DESCRIPTION	ROOM	CHARGES	CREDITS
10/18	Room Service Beverage	2207	14.15	
10/18	->#2207 : CHECK #8667			
10/18	Room Revenue		200.00	
10/18	Room DMF		5.66	
10/18	Room PST		10.00	
10/18	Room GST		12.00	
10/18	Room DMF GST		0.34	
Total			242.15	
Balance			242.15	\$

Room GST: 12.00
 F&B GST: 0.54
 Other GST: 0.00
 Total GST: 12.54

I agree that I am personally liable for the final disposition and payment of any services rendered at this hotel and that the Sutton Place Hotel and further authorize the use of my credit card to facilitate full payment of same. I hereby release, defend, hold harmless, and also for any loss or damage to the premises or its contents.

Signature :

Make your next reservation on the web at www.suttonplace.com

A MEMBER OF THE SUTTON PLACE GRANDE HOTELS GROUP

955 BAY STREET, TORONTO, ONTARIO CANADA M5S 2A2 TEL: (416) 924-9221 FAX: (416) 924-1778
 e-mail: info@tor.suttonplace.com
 www.suttonplace.com

AUTH. CODE 052119
REF. 52
THANK YOU FOR
YOUR VISIT

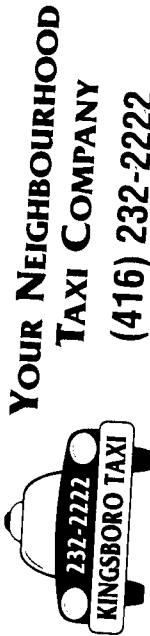
s.17(1), 17(4)(e.1)

EXIT No. A1
IN: 10/18/06 12:01
OUT: 10/19/06 21:09
DURATION: 1 09: 08
PAID: \$ 36.00
(GST INCLUDED)
CREDITCARD

RECEIPT
GST NO. R122556194

12-1
97.67
MUMUND

MILESTONE'S
RESTAURANT



Amount \$ 55.00 Date
From
To
Cab No. Driver

INSTRUCTIONS

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- Notification of deposit will be E-Mailed to your CRHA E-Mail address OR mailed to your home address (if a valid E-Mail address doesn't exist).
- Please consult the CRHA Travel Policy for clarification.
- See back of form for additional instructions.

s.17(1), 17(4)(g)(i)

APPLICANT COPY TRAVEL/EDUCATION EXPENSE CLAIM

Employee Name (Print) MARGARET MUNSCH	CRHA E-Mail Address	Employee Number
Department/Site People & Learning	Phone Number 943-1166	Date Mar 5/05
Tuition Paid To (if tuition to be paid directly to institution, use Cheque Requisition form #00074) Hotel City Inn & Suites Conference	Course Title	
Destination Victoria, BC	Departure Date Apr 6/05	Return Date Apr 8/05

ESTIMATED/ACTUAL EXPENSES

Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)	Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)
Tuition				Tuition only if paid by employee			
Air paid by CRHA via CRHA Travel Agent				Mileage			
Mileage				If travel is by car			
Accommodation + taxes				Accommodation			
Meals Based on per diem rate				Meals			
Ground Transport				Ground Transport			
Other (Specify)				Other (Specify)			
TOTAL				TOTAL			

Advance Requested (80% of estimated expenses & advance exceeds \$250.00)	\$	(Cdn)
Less Advance or Unfunded Portion	\$	(Cdn)

Employee Signature	Date
Munsch	Mar 5/05

Expenditure Officer Authorization	Date
Munsch	Mar 5/05

Authorizer Employee Number	Expenditure Officer Approval	Date
	Munsch	05-05-04

Org	Functional Centre	Account
		6171200000562414000

Comments/Other Sources of Funding

37500
8124



463 Belleville Street, Victoria, BC, Canada V8V 1X3 Tel: (250) 386-0450 Guest Fax: (250) 380-4473

Reservations 1-800-663-7550
 Member of Preferred Hotels® & Resorts Worldwide

Ms. Margaret Munsch
 10101 Southport Road SW
 Calgary, AB T2W 3N2
 CANADA

Company: Western Canada Health Authority
 Arrival 04/06/05
 Departure 04/08/05

Room 0208
 Cashier 68
 Page 1
 Time 13:08:00
 Cont# 241574
 Invoice# 148199

Hotel Grand Pacific, Victoria, 04/08/05

Guest: Munsch

Date	Description	DEBIT	CREDIT
04/06/05	Pacific Restaurant	24.24	
04/06/05	#208 : CHECK #1321		
04/06/05	Room Charge	100.00	
04/06/05	Room Tax *Room Charge	10.00	
04/06/05	GST Room Tax *Room Charge	7.00	
04/07/05	Room Charge	100.00	
04/07/05	Room Tax *Room Charge	10.00	
04/07/05	GST Room Tax *Room Charge	7.00	
04/08/05	Mastercard		258.24

Balance: \$0.00 s.17(1), 17(4)(e.1)

Total Room GST - \$14.00
 Total Other GST - \$0.00
 GST # 122212624

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.

Signature: _____



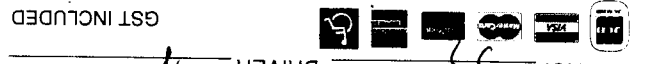
CUSTOMER COPY *****

APPOINTMENT \$ 28.00
SUBTOTAL \$ 28.00
TIP \$ 28.00
TOTAL \$ 56.00

RESTAURANT
102 BEACH BLVD
VICTORIA BC
MAY 17 2005
DATE TIME 21:18

THANK YOU FOR YOUR VISIT

CASH
METHOD OF PAYMENT: 2 06:11
LENGTH OF STAY: \$ 48.00
PAID: 04/08/05 22:02:13
EXIT DATE/TIME: 04/06/05 15:51:21
ENTRY DATE/TIME: H4
RECEIPT
GST NO. R122556194
CALGARY AIRPORT
Terminal Parkade



RECEIVED FROM \$ 48.00
DATE 6/15/05
Toll Free 1-800-808-6881 anywhere in North America
Box 487
Victoria, BC Canada V8W 2N8
COMMITTED TO YOUR SERVICE 24 HOURS A DAY
TAXI
Empress

(250) 381-2222

GST # 870660644RT0001 Thank You

Date APR/08/05
Car # 8
Received \$ 50
Atlas Taxi (250) 213-6942 & SIGHTSEEING

GST # 869614099 RT Thank You

Date
Car # 8
Received Paid cash
Concorde Taxi (250) 598-5655 & SIGHTSEEING LTD. \$15.00

\$ 4.00

BELMONT / CUGRAC

\$ 5.00

MISC. COFFEE / MUFFIN @ AIRPORT

PALLISER, PARKADE

CALGARY AB

RECEIPT ONLY!

PAY STATION: C3

ENTRY DATE/TIME:

20/10/05 07:27

PAY DATE/TIME:

20/10/05 09:24

PARK-DUR.: HRS:MIN

0:01:57

PAID: \$ 10.00

UTSA

s.17(1), 17(4)(e.1)

TRANSACTION RECORD

Carriage House Inn 9030 Macleod Tr South

Calgary, AB - Bristol Rest.

s.17(1), 17(4)(e.1)

ENTRY: SWIPED

AUTHORIZATION: 064176

STORE #: 0

TERMINAL: 4

REFERENCE: 245733

PURCHASE

\$10.59

TIP

7.25
12.59

TOTAL

THANK YOU

OCTOBER 6, 2005 18:04:11

Server's name : Wanda Lamp

CUSTOMER COPY

THANK YOU FOR YOUR

VISIT!

Bonavista Flowers
107, 155 Ave E, Bonavista Dr SE
(Calgary) AB T2N0N3

Date: 12/06/2005
Time: 03:25:06 PM

Terminal: 1
Session: 104

REF NUMBER: 9694

Qty	Description	Price
1	FLORESIDE BASKET W/ BASKET	\$ 60.00

Sub Total:	\$ 60.00
Delivery Charge:	\$ 0.00
GST/HST:	\$ 0.00
FST:	\$ 0.00
Total Amount Due:	\$ 60.00
Tendered:	\$ 72.59
Change Due:	\$ 12.59

Thank you for shopping at Bonavista Flowers

Print Date: 12/06/2005

Print Time: 03:25:06 PM

APPLICANT COPY

APPLICANT COPY

BROKEN PLATE
530-100316 RECLED T2J5N8
CALGARY AB
22799773

PRE AUTH PURCHASE 1111
12-07-2005 13:15:38
Acct # S
Exp Date 09/06 Carj type VI
Name: MARGARET HUNSCHE

s.17(1), 17(4)(e.1)

Inv. # 11796 Operator 112
T22799973001
Auth # 063222 RRN 001344011
P. Auth Purchase \$20.07
Tip
Total 34.07

Customer copy

late!

PALLISER PARKADE
CALGARY AB
RECEIPT ONLY
PAY STATION: C3
ENTRY DAT/TIME:
12/10/05 11:32
PAY DATE/TIME:
12/10/05 13:31
PARK DUR.: HRS:MIN
0:01:59
PAID: \$ 10.00
VISA

AUTH. CODE 00000
REF. 14
* YOU MUST TAKE *
* ORIGINAL TICKET *
* WITH YOU AND USE *
* IT TO EXIT *

GST INCLUDED
GST No. R112201449

THANK YOU FOR YOUR
VISIT!

s.17(1), 17(4)(e.1)

PALLISER PARKADE
CALGARY AB
RECEIPT ONLY
PAY STATION: C3
ENTRY DAT/TIME:
24/08/05 07:31
PAY DATE/TIME:
24/08/05 09:22
PARK-DUR.: HRS:MIN
0:01:51
PAID: \$ 10.00
CASH

* YOU MUST TAKE *
* ORIGINAL TICKET *
* WITH YOU AND USE *
* IT TO EXIT *

GST INCLUDED
GST No. R112201449

THANK YOU FOR YOUR
VISIT!

CASH

PLACE THIS SIDE UP ON DASH

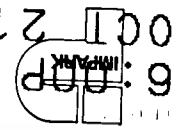
ING 5
-Nalbars
-Public Area
-From (Thu 2004)
OCT 21 7.2



Parking
-Nalbars
-Public Area
-From (Thu 2004)

PLACE THIS SIDE UP ON I

FRI 05



INSTRUCTIONS ON BACK
GST REG # R1024600
OUR CUSTOMERS ARE # 1

TICK

KEY VOID IF RE-SOLD

Conroy Moss

DISPLAY FACE UP ON DASH RECEIPT

Machine Serial # 000004200675

EXP 06:00am
OCT 19, 2005

TICKET# LOT#
 00021003 00030400

\$0004.00 C MACH# 002
 FOLLOW INSTRUCTIONS ON SIGNS, PICTED Purchase Time

Till 6 am \$4
GST REG# R102466000

DISPLAY FACE UP ON DASH RECEIPT

IMPERIAL PARKING
 PHONE 299-7275

WEEKEND PARKER

Time: 4.00

INSTR. ON DASH
 s.17(1), 17(4)(e.1)

TICKET VOID IF RE-SOLD

IMPERIAL PARKING
 PHONE 299-7275

WEEKEND PARKER

Time: 4.00

INSTR. ON DASH
 s.17(1), 17(4)(e.1)

TICKET VOID IF RE-SOLD

Convention Centre
 CAN 522 - 2695 St. Andrew St
 Tax Code CA GST # R119457869
 Main POF 29/11/05 12:22 Cashier 0

Receipt 925526

Short-term Parking
 Convention Centre
 29/11/05 07:22
 Per ticket 00030400
 (GST)

Gross total \$14.00
 Payment \$14.00

GST (7%) \$1.00
 Detiv. Date=Receipt Date

RECEIPT
GST NO. R122556194

EXIT No. A1
 IN: 09/11/05 05:40
 OUT: 09/16/05 21:07

Expense 1.00
 3 day @ \$15.00/da
 \$45.00

Parking at Airport

Port Parkade

EXIT No. A1
 IN: 09/11/05 05:40
 OUT: 09/16/05 21:07

Expense 1.00
 3 day @ \$15.00/da
 \$45.00

s.17(1), 17(4)(e.1)

INSERT THIS END UP

Hyd
 Pamedman

PALLISER PARKADE
 CALGARY AB

RECEIPT A2
 IN: 26/10/05 18:31
 OUT: 26/10/05 22:45
 PAID: \$ 5.00
 VTRCA

AUTH. CODE 092210 18
 REF. RT122014491
 GST No. RT122014491

**PAY AT
 PARKING PAYSTATION INSIDE
 JUST BEFORE LEAVING
 MUST TAKE TICKET TO EXIT!**

TICKET VOID IF RE-SOLD

IMPERIAL PARKING
 PHONE 299-7275

EVENING PARKER

INSTR. ON DASH
 s.17(1), 17(4)(e.1)

TICKET VOID IF RE-SOLD

Petro-Canada Centr
 CALGARY AB

RECEIPT A7
 IN: 31/10/05 14:48
 OUT: 31/10/05 16:32
 DURATION: 0:01:44
 PAID: \$ 12.00
 VTRCA

AUTH. CODE DB05112
 REF. R11102230770
 GST No. R11102230770

PLACE THIS SIDE UP ON DASH

6:00A FRI
 OCT 21 05

INSTR. ON DASH
 s.17(1), 17(4)(e.1)

APPLICANT COPY

BE UP ON DASH

PLACE THIS SIDE UP ON DASH

P

108

IMPERIAL PARKING
PHONE 289-7275
IMPA
DAILY PARKER

Time: 9:24A NOV 02
S.17(1), 17(4)(e.1)
PRICE: \$18.00

Card:
Exp:
Expires:

6:00P WED
NOV 02 05

TICKET VOID

TICKET VOID IF RE-SOLD

HS DISPLAY FACE UP ON DASH DISPLAY FACE U

RECEIPT

Machine Serial #: 000004201003

EXP 06:00pm
OCT 18 2005

TICKET#
00020943 00030400

LOT# 00030400
MACH# 002
TIC# 00020943
CC \$0020.00
OCT18,2005 07:17am
Purchase Time

EXP 06:00pm
OCT 18 2005

TICKET#
00020943 00030400

LOT# 00030400
MACH# 002
TIC# 00020943
CC \$0020.00
OCT18,2005 07:17am
Purchase Time

Till 6 pm \$20
GST REG# R102466000

RECEIPT

DIS DISPLAY FACE UP ON DASH CE UP ON DASH



BELLA BIRCH VALLEY
PARKING
THANK YOU
GST REG# R10996

11/18/05 11:40 AM 01
11:40 AM 11:40 AM

AMOUNT 15.00
MISC ST 15.00
GST 0.98

ITEMS IN 15.00

***TOTAL 15.00
CASH 20.00
CHANGE 5.00

Fedex Package
From Toronto
Nov. 9/05
\$59.39

REG 10-18-2005 13:17

KING'S RESTAURANT
GST NO. 100096866

APPLICANT COPY

APPLICANT COPY

CHEQUE REQUISITION

INSTRUCTIONS:

A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date March 21, 2005	Requested By (Please Print) Lynn Gallow	Department People & Learning	Site Southport	Phone No (in full) 943-1393
MAKE CHEQUE PAYABLE TO: Margaret Munsch Employee/Supplier # s.17(1), 17(4)(g)(i)				
MAILING ADDRESS (for forwarding of cheque) Canada Post: _____ City _____ Province _____ Postal Code _____ Department People & Learning Site Southport				
Purpose of Request _____ <input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS				
ENTERED MAR 29 2005				

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION													
0	1	7	1	1	2	0	0	0	0	0	5	6	9	6	CC		
			\$ 475.65	Expenses - February-March 2005													
			15.25 R														
			428.40 R														
			33.00 R														
				GST \$													
TOTAL AMOUNT OF CHEQUE:			\$ 475.65	X <input type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other													
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer		Authorizer's Employee Number s.17(1), 17(4)(g)(i)													
Authorizer's Employee Number s.17(1), 17(4)(g)(i)		Authorizer Phone # (in full) 943-1140															

ACCOUNTS PAYABLE ONLY

Invoice # _____	Supplier # _____	Recurring Payment: _____	Start Date _____	End Date _____	# of Payments _____	Cycle _____
Comments: _____						

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
 FOR THE PERIOD OF February - March 2005

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
February 9, 2005	Business Meeting - Lynne Wood	125.96 ²
February 11, 2005	HRMS Phase II Reposition Meeting	63.37 ²
February 14, 2005	Meeting with Pam Hillier re Return to Work	40.92 ²
February 15, 2005	S. Lee (Suncor) (Executive Compensation Mtg)	127.35 ²
March 7, 2005	Edmonton Conference (Dinner in Red Deer)	15.25 ²
March 11, 2005	Transition Meeting & Thankyou Lunch (Norma Wood)	41.27 ²
March 16, 2005	Lunch Meeting - Joy Humphrey (Consultant)	29.53 ²

Parking (See Attached Receipts) 32.00²

GRAND TOTAL

\$ 475.65

Date March 21, 2005

Approved by Kay Best
 Executive Vice-President, Risk Management
 Risk Management & CFO

Margaret Munsch
 Senior Vice-President
 People & Learning

000111

Server: Empty 0 Rec: 00
02/15/05 12:57, Swiped Terminal: 2

BP MACLEOD IRAIL
10456 MACLEOD IRAIL
(403)293-1222
MERCHANT #: 220123

Duplicate Copy

Transaction Record

Issue #: 1726
MasterCard s.17(1), 17(4)(e.1)
Payment and Hold

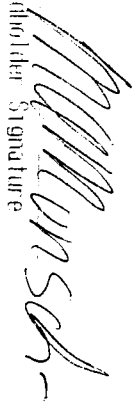
Amount: \$25.53

TIP: 4-

Total 29.53

Approved 150037

Server: 1500
Merchant #: 31301
0430031001043
2004/03/16 12:59:34

X
Cardholder Signature


WELLINGTONS/OSCAR'S

10325 Bonaventure Dr., SE
Tel: 403-278-5250

Server: Gareth Date: 02/11/20

05 Table: 10 Time: 13:19

MASTERCH s.17(1), 17(4)(e.1)

MUNSCHE/M A.

AUTH 151534 ONLINE
MERCHANT# 9999

SUBTOTAL \$ 55.37

TIP \$ 8-

TOTAL \$ 63.37

*** CUSTOMER COPY ***

Wellington's/Oscar's
Please pay server.
Thank-you.

0110

Server: GABRIEL D Rec: 51
02/15/05 20:13, Swiped Terminal: 2

WILLIHOUD BREWING COMPANY
2417 - 4TH STREET S.W.
CALGARY, ALBERTA
(403)228-0100
MERCHANT #: 450241/0190

CARD TYPE ALLIUMI NUMBER

MASTER CARD

Name: M A. MUNSCHE

DU TRANSACTION APPROVED s.17(1), 17(4)(e.1)

AUTHORIZATION #: 220726

Reference: 000110

TRANS TYPE: Credit Card SALE

CHECK : 112.37

TIP : 15-

TOTAL : 127.37
APPLICATION COPY

X


PHONE: ()
Duplicate Copy

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
Please leave Signed Copy :)

11

BROKEN PLATE
 590-10816 MACLEOD TRUSNO
 CALGARY AB
 50911898

PRE AUTH PURCHASE

s.17(1), 17(4)(e.1)

02 14 2005 43.43
 Act # S
 Exp Date Card Type MC
 Name: H HUNSCHE

Inv. # 2191 Operator 112
 T22799973001
 Auth # 154411 RRN 001052012

P. Auth Purchase \$36.92
 Tip 4

Total

Customer copy

Glenn's Restaurant
 37424 Hwy 2 Red Deer County
 Alberta, T4E 1B2
 Tel: (403) 346-5446
 Fax: (403) 340-2199
 GST# 102115490

117 TONI

Td1 34/1 Chk 4453 Gst 2
 Mar07'05 05:05PM

1 CHICKEN CAESAR 10.55
 1 LIVER 10.95
 1 24OZ LIVER 5.99

Food 21.50
 Beverages 3.99
 Tax 1.78
 27.27
 25.43 Amount Du

Please pay ~~27.27~~ ^{30.50} LIVER

502 = 15.25

M: Douglas
 401
 Tax Code 128
 C/PN-128
 Cashier 3
 Receipt # 023425
 Receipt # 023425
 27/01/05 16:19
 Cashier 3
 27/01/05 16:19
 Receipt # 023425
 401
 Tax Code 128
 C/PN-128
 Cashier 3
 27/01/05 16:19
 Receipt # 023425
 401
 Tax Code 128
 C/PN-128
 Cashier 3
 27/01/05 16:19
 Receipt # 023425
 401
 Tax Code 128
 C/PN-128
 Cashier 3
 27/01/05 16:19
 Receipt # 023425

C190 BABY'S RESTAURANT
 5920 MACLEOD TRAIL UNIT 1
 CALGARY AB

s.17(1), 17(4)(e.1)

CARD NUMBER
 EXPIRY DATE
 CARD TYPE
 DATE/TIME
 CLERK NUMBER
 RECEIPT NUMBER
 AUTHORIZATION
 AMOUNT

5681
 2005/02/09 20:45:01
 3
 S47160235-145-036
 \$110.96

TIP
 TOTAL AMOUNT

15
 125.96

01 APPROVED-027 AUTH. # 224607
 THANK YOU

CARDHOLDER WILL PAY TOTAL AMOUNT SHOWN
 TO CARD ISSUER ACCORDING TO CARDHOLDER
 AGREEMENT.

CARDHOLDER SIGNATURE

APPLICANT COPY

*No Wood
Traveller
Meeting &
Thank you bond*

PRECISE PARKLINK NON TRANSFERABLE 3203203

Parking - Veg & Redus Bowd Ma

Impark Lot 400
Machine Serial # 000014201013

EXP 08:29am
EXPIRY DATE AND TIME
EXP 108 29am
MAR 16 2005

MAR 16, 2005
TICKET# 00006093 LOT# 0003040C

\$10008.00 C
FOLLOW INSTRUCTIONS ON SIGNS POSTED

1 hour \$8
GST REG# R102466000

PRECISE PARKLINK RECEIPT 3203203

PRECISE PARKLINK RECEIPT 3203203

30 min

Impark Lot 400
Machine Serial # 00014201013

EXP 08:02am
EXPIRY DATE AND TIME
EXP 108 02am
MAR 16 2005

MAR 16, 2005
TICKET# 00006094 LOT# 0003040C

\$10004.00 C
FOLLOW INSTRUCTIONS ON SIGNS POSTED

30 min \$4
GST REG# R102466000

PRECISE PARKLINK RECEIPT 3203203

DISPLAY THIS SIDE UP ON DASHBOARD

EXPIRATION DATE
16/02 11:38 AM

EXPIRATION TIME
16/02 11:38 AM

AMOUNT PAID
\$ 6.00 2005020000099:38 AM

DETACH RECEIPT FROM TICKET

DATE ISSUED TIME ISSUED AMOUNT PAID
16/02/05 09:38 AM \$ 6.00

CREDIT CARD NUMBER



Travel/Education Expense Claim

Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

Employee Name (Print) MARGARET MANSFIELD

Calgary Health Region E-Mail Address s.17(i), 17(4)(g)(i)

Employee Number 1111111111

Department/Site Public Health

Phone Number 403-243-1111

Date Dec 6/06

Tuition Paid To (if tuition to be paid directly to institution, use Payment Requisition form #100074.) University of Alberta

Course Title Leadership for Health Professionals

Departure Date 12/18/06

Return Date 12/19/06

Estimated/Actual Expenses

Expense	Expense	Exchange	Total Funds	Description	Expense	Exchange	Total Funds
				Tuition			
				Air paid by Calgary Health Region via Calgary Health Region			
				Travel Agent			
				Mileage			
				If travel is by car			
				Accommodation			
				Meals Based on per diem rate			
				Ground			
				Transport			
				Other (Specify)			
				Total			
				Less Advance or Undeveloped Portion			
				Advance Requested (80% of estimated expenses & advance exceeds \$250.00)			
				Employee Signature			
				Date			
				Balance Due To			
				Employee			
				Calgary Health Region (cheque attached)			
				Employee Signature			
				Date			
				Departmental Authorization			
				Date			
				Out of Province Authorization			
				Date			
				Financial Code			
				Org			
				Functional Centre			
				Account			
				Comments/Other Sources of Funding			



TORONTO DOWNTOWN
EATON CENTRE

GUEST FOLIO

525 Bay Street, Toronto, ON M5G 2L2
4161 597 9200 Marriott.com/YYZEC
APPLICANT COPY

1512 MUNSCH/MARGARET
ROOM NAME
149.00 01/16/07 12:00 10640 11185 RATE DEPART TIME
ACCT# GROUP
01/14/07 18:46 ARRIVE TIME
PASSPORT: s.17(1), 17(4)(g)(1)
ROOM CLERK
77
TYPE
NSKG
ROOM NAME
1512 MUNSCH/MARGARET
ADDRESS
MR#: s.17(1), 17(4)(e.1)

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE
------	-----------	---------	---------	-------------

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE
01/14	ROOM	1512, 1		149.00
01/14	GST	1512, 1		8.94
01/14	RM TX	1512, 1		8.94
01/14	DM FEE	1512, 1		7.45
01/14	DMF GST	1512, 1		4.22
01/14	DMF GST	1512, 1		2.25
01/15	STARBUCK	92871512		6.92
01/15	LBY LNGE	26861512		4.00
01/15	ROOM	1512, 1		149.00
01/15	GST	1512, 1		8.94
01/15	RM TX	1512, 1		8.94
01/15	D.M. FEE	1512, 1		7.45
01/15	GST	1512, 1		4.22
01/16	VS CARD	1512, 1		.25
G				
C				
B				
A				
DE				
G				
C				
B				
A				
CURRENT BALANCE .00				

THANK YOU FOR CHOOSING MARRIOTT! TO EXPEDITE YOUR CHECK-OUT,
PLEASE CALL THE FRONT DESK, OR PRESS "MENU" ON YOUR
TV REMOTE CONTROL TO ACCESS VIDEO CHECK-OUT.

----- TAXES & FEE SUMMARY -----

DESCRIPTION	TAXED AMOUNT
GST ROOM	18.38
GST OTHER	.21
PROVINCIAL SALES TAX (B/FJ/KL)	15.18
DESTINATION MKT FEE (C)	8.44
NET CHARGES	308.43
TAX	42.21
CREDITS	.00
FOLIO	350.64

GET ALL YOUR HOTEL BILLS BY EMAIL BY UPDATING YOUR MARRIOTT
REWARDS PREFERENCES. OR, ASK THE FRONT DESK TO EMAIL YOUR
BILL FOR THIS STAY. SEE "INTERNET PRIVACY STATEMENT" ON
MARRIOTT.COM

MARRIOTT REWARDS ACCOUNT # XXXXX3184
DATE 01/14/07 - 01/16/07 REVENUE IF APPLICABLE \$272.56
BASE POINTS EARNED: 2726 ADDITIONAL POINTS MAY APPLY
FOR ACCOUNT ACTIVITY CALL 801-468-4000
OR LOG ON TO MWM.MARRIOTTREWARDS.COM.

Marriott
TORONTO DOWNTOWN
EATON CENTRE

525 Bay Street, Toronto, ON M5G 2L2
4161 597 9200 Marriott.com/YYZEC

FOR RESERVATIONS AT ANY MARRIOTT HOTEL CALL 1-800-228-9290

SALES DRAFT - CLIENT RECEIPT

MARGARET ANN MUNSCH

YAMATO JA TORONTO CA
 4700304001
 4074968005

\$500 (only) due to M. Munsch

M. Munsch

EXPIRY DATE CHECKED

18 89

83309

DE NOTE

138.89

TOTAL \$ CDN CAN

VISA MasterCard

PLEASE RETAIN THIS COPY AS RECORD OF YOUR TRANSACTION
 CONSERVEZ CETTE COPIE COMME PREUVE DE VOTRE TRANSACTION

CUSTOMER COPY
 COPIE DU CLIENT

Chauffeur HARS Date Jan 13 07

Car # 2002 Amount \$5900

GST Included 876895020

Toronto Pearson Int'l Airport
 Retail Id: MA1234

Shift/Seq, #: 126/18825
 Entry lane 26: 01/13/07 14:53:00
 Payment lane 46: 01/13/07 15:08:05
 Exit Before: 01/13/07 15:53:00

PURCHASE
 Amount: \$3.00

Sub Total: \$2.63
 GSTTIPS: \$0.16
 PSTTVP: \$0.21

Card: \$3.00
 Visa

s.17(1), 17(4)(e.1)

Exp.: **/**
 Terminal ID: GTAAPF12
 Host date: 01/13/07 15:07:11
 Auth.: 022502
 Response code: 001
 ISO:
 Ref. #: 003001001023
 APPROVED

Thank You
 GST/TPS #: 139759708

TORONTO PARKING AUTHORITY
 CARPARK #15 YORKVILLE/CUMBERLAND GARAGE
 THANK-YOU
 GST # R122981541

Transaction No. 904938
 N11E-1 Out: 18:37 Jan/14/07
 In: 14:29 Jan/14/07

1 PARKING FEE \$6.00
 GST \$0.32
 PST \$0.42

BALANCE DUE \$6.00
 CASH \$20.00
 CHANGE \$14.00

116

Airport Pick-up Procedure
 PLEASE MAKE SURE PRIOR ARRANGEMENTS HAVE BEEN MADE

1. Clear Customs
2. Pick-up Luggage
3. Go to counter when at the terminal

ARRANGED BY: [unclear] AIRLINK (inquire from the counter #416-392-0117)
 We'll see you at the airport

Check your receipt

DESIGNATED POSTS
 Terminal 1 - Section 17.1
 Terminal 2 - Post 21
 Terminal 3 - Post 12

Corporate Accounts Welcome

Car No: 1368
 Chauffeur: S. J. J.
 Date: 7-16-07
 Amount: 60
 Repair-Hem \$60.00 x 2

INSTRUCTIONS:
 A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date February 6, 2008
 Requested By (Please Print) Lynn Gallow
 Department People & Learning
 Site Southport
 Phone No (in full) 943-1393
 Employee/Supplier #

MAILING ADDRESS (for forwarding of cheque) s.17(1), 17(4)(g)(i)
 Canada Post:
 City _____ Province _____ Postal Code _____
 Department People & Learning
 Site Southport
 Purpose of Request
 SPECIAL HANDLING INSTRUCTIONS

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
0 1 7 1 1 2 0 0 0 0 0 5	6 9 6 0 0 0 0 0	\$240.76	Meeting Expenses January 2008	276-12-2200
0 1 7 1 1 2 0 0 0 0 0 5	6 9 5 0 0 0 0 2	\$430.32	Recognition Expenses	276-12-2200
0 1 7 1 1 2 0 0 0 0 0 5	6 2 4 1 0 0 0 0	\$25.00	Parking & Taxi Expenses	
TOTAL AMOUNT OF CHEQUE:				
			\$696.08	
<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other Print Name Kay Best, Chief Financial Officer Authorizer's Employee Number: 17(1), 17(4)(g)(i) Authorizer Phone # (in full) 943-1140				

ACCOUNTS PAYABLE ONLY

Invoice # _____
 Supplier # _____
 Recurring Payment: _____
 Start Date _____
 End Date _____
 # of Payments _____
 Cycle _____

Comments: < 99237

APPLICANT COPY

MISCELLANEOUS EXPENSES
 INCURRED BY Margaret Munsch
 FOR THE PERIOD OF January-February 2008

DATE OF OCCURRENCE REASON FOR THE EXPENSE (Receipts Attached) AMOUNT

Jan 9, 2008	Calling Card for Conference Calls	32.34 USD
Jan 18, 2008	Dinner Meeting - P&L Leaders (Discussion re 4 th Quarter)	98.15
Jan 31, 2008	Lunch Meeting - Brenda Fischer (SERP Discussion)	34.93
Feb 5, 2008	GSS Project Team Recognition Dinner	430.32
Feb 7, 2008	P&L Leaders Strategy Session - Breakfast Meeting	75.34
Jan 25, 2008	Cab Fare - Premier Steimach Luncheon (Meeting @ RCPK)	22.00
Jan 28, 2008	Parking - FMC B. Hamby - 60K D. Munsch 1-way.	3.00
GRAND TOTAL		696.08

Approved by Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO

Margaret Munsch
 Senior Vice-President
 People & Learning

Date February 8, 2008

APPLICANT COPY

Best Copy Possible 5-

3493

candidate will pay and receive
leave amount pursuant
to the attached agreement

Candidate Signature
[Handwritten Signature]

01-02 APPROVED THANKS YOU

Time : 18:35:36
Date : 08/01/16
Terminal # : 000529
Employee # : 00105000
Job # : 050415

10-
98.15

TRANSACT FOR PRINT
VLS

s.17(1), 17(4)(e.1)

BOOMTOWN PAPER & PASTE
135 Southern Drive
Calgary, AB
T2C 6X5

01/30
Server: KILIAN W
01/18/08 10:51 AM 400 Term 4

APPLICANT COPY

APPLICANT COPY

0044

Server: JACK F Rec: 10
02/07/08 09:05, Swiped T: 609 Term: 9

Duplicate Copy

Hospitality Inn
135 Southland Drive
Calgary, AB
T2J 5X5

FEB 07 2008 08:48 am Trans#00044

TRANSACTION RECORD

s.17(1), 17(4)(e.1)

Card #

Card Entry : SWIPED

Acct : VISA

Trans Type : PRE-AUTHORIZATION

Amount

: \$75.34

Tax

107
85.34

Total

Auth # : 023279

Source # : 001540130

Terminal # : 66095916

Date

: 08/02/07

Time

: 08:48:17

01/027 APPROVED - THANK YOU

Cardholder Signature

Cardholder will pay card issuer

above amount pursuant

to Cardholder Agreement



Callie Curd for APPLICANT CONF. 32.34

736 - CHANDLER, AZ

MEMBER #

s.17(1), 17(4)(g)(i)

Non-Responsive

PRE-PAID CARD # 50248451886
575 VERIZON INTL
8.89 C

SUBTOTAL 38.89
A 7.80% TAX 2.34
C 1.50% TAX .13

TOTAL 41.36
~~XXXXXXXXXXXXXXXXXXXX~~

Cash CHANGE 41.00

PRE-PAID CARDS ACTIVATED
50248451886 - ACTIVE

TOTAL NUMBER OF ITEMS SOLD = 2
REG# 8
CASHIER: LEON
DATE/TIME: 16:18 0736 08 0231 148

SHOP WWW.COSTCO.COM
THANK YOU!
PLEASE COME AGAIN!

APPLICANT COPY

ATRIUM CAFE & SKYLIGHT LOUNGE

0044 TABLE 609 #Party 5

JACK F SVCK: 10 8:35 02/07/08

ATRIUM CAFE

69.75 / Breakfast Buffet Adults
2.00 / COFFEE

Sub total: 71.75

GST: 3.59

02/07 08:35 TOTAL: 75.34

TIP: _____

TOTAL: _____

ROOM #: _____

PRINT NAME: _____

SIGNATURE: _____

PLEASE PAY SERVER

GST#: 895126332 RT

JOIN US FOR SUNDAY BRUNCH 10AM - 2PM

Driver #	6968	Car #	1355
To:			
From:			
Date:	Jan 25 08	Amount:	99.00
GST #	851829017		

Thank you

851829017

Best Copy Possible

851829017

851829017

851829017



Travel/Education Expense Claim

- Instructions
- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
 - Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
 - Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
 - See back of form for additional instructions.

Employee Name (Print) MICHAEL MANSCH		Calgary Health Region E-Mail Address s.17(1), 17(4)(g)(i)	
Employee Number	Phone Number 748-1116	Date Dec 24/07	Destination
Tuition Paid To (if tuition to be paid directly to institution, use Payment Requisition form #10074)			
Course Title The City of Calgary - (continued) course		Departure Date Jan 20/08	Return Date Jan 24/08

Estimated/Actual Expenses

Actual Expenses Paid by Employee

Original Receipts Must Be Attached

Expense Description	Exchange Rate/GST	Total Funds	Expense Description	Exchange Rate/GST	Total Funds
Air paid by Calgary Health Region via Calgary Health Region		2743.58	Tuition only if paid by employee		
Travel Agent		205.70	Mileage		
If travel is by car			If travel is by car		
Accommodation		453.72	Meals		
Meals Based on per diem rate		107.00	Ground Transport		
Ground Transport		107.00	Other (Specify)		
Other (Specify)			Total		\$ 6547.6
Total		\$	Less Advance or Unfunded Portion		\$
Advance Requested (80% of estimated expenses & advance exceeds \$250.00)		\$	Balance Due To		\$ 6547.6
Employee Signature	Date		Employee Signature	Date	
(Collector/Employee)	Dec 24/07		Michael Mansch	Dec 24/07	
Departmental Authorization	Date		Departmental Authorization	Date	
			Michael Mansch	Dec 24/07	
Out of Province Authorization	Date		Departmental Authorization	Date	
			Michael Mansch	Dec 24/07	

Org	Functional Centre	Account	Comments/Other Sources of Funding
			137.84
Financial Code			4979

146063

Toronto Pearson Int'l Airport

Retail ID: MA1234

(Parkway)

017/96 0
07/20/08 18:22
07/20/08 18:40
07/20/08 18:40:26

PURCHASE

Amount: \$4.00

Sub total: \$3.54
STPS: \$0.18
STVP: \$0.28

s.17(1), 17(4)(e.1)

Terminal ID: GTAAPP18
Date: 01/20/08 15:40:26
ID: 017441
se code: 001
ISO: 102001001173

Card: \$4.00

RECEIPT
GST NO. R122556194

139759708

EXIT NO. A1
IN: 01/20/08 07:40
OUT: 01/22/08 21:42
DURATION: 2 14: 02
PAID: \$ 63.00
(GST INCLUDED)

s.17(1), 17(4)(e.1)

AUTH. CODES/84
REF. 66
THANK YOU FOR
YOUR VISIT

RECEIPT # 12345
DATE: 01/20/08
TO: Restaurant
FROM: Hillier
Amount: \$4.00
Date: 01/20/08
Cab No. 1234
Driver: [Signature]

Hotel to Airport
\$56.00

Name & Address / Nom et Adresse

MUNSCH, MARGARET
 10101 SOUTHPORT RD. S.W.
 CALGARY, AB T2W 3N2
 CA

CONFIRMATION NUMBER : 3287045986

01/22/08 PAGE 1

APPLICANT COPY

Hilton
 Toronto

145 Richmond Street West
 Toronto, Ontario M5H 2L2
 Phone (416) 869-3456 • Fax (416) 869-3187
 Reservations
 www.hilton.com or 1 800 HILTONS

Room/Chambre 505/K1
 Arrival Date/Date d'arrivée 01/20/08 8:48PM
 Departure Date/Date de départ 01/22/08 8:48AM I
 Adult/Child/Adulte/Enfant 1/0
 Room Rate/Tarif 199.00

RATE PLAN L-L3
 HH#
 AL:
 BONUS AL:
 CAR:
 S.17(1), 17(4)(g)(i)

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
01/20/08	GUEST ROOM	RHARDI	767492	\$199.00		
01/20/08	DMF	RHARDI	767492	\$5.67		
01/20/08	DMF - GST	RHARDI	767492	\$0.31		
01/20/08	GST 5% - RM	RHARDI	767492	\$9.95		
01/20/08	PST 5% - RM	RHARDI	767492	\$9.95		
01/21/08	GUEST ROOM	MBEATO	769085	\$199.00		
01/21/08	DMF	MBEATO	769085	\$5.67		
01/21/08	DMF - GST	MBEATO	769085	\$0.31		
01/21/08	GST 5% - RM	MBEATO	769085	\$9.95		
01/21/08	PST 5% - RM	MBEATO	769085	\$9.95		
01/22/08	VS				\$449.76	
	BALANCE					\$0.00
CHARGE TOTAL						
ROOM & TAX						
TOTAL PAID				\$40.42		
				\$11.34		
TAX SUMMARY						
DMF SUMMARY						
SUMMARY OF TAXES						
				\$40.42		
				\$11.34		

Account No. / Numéro de compte

Card Member Name / Nom Du Membre

Establishment No. & Location
 #del établissement & Location

Card Member's SIGNATURE / SIGNATURE MEMBRE

Payment Due Upon Receipt / Paiement dû à la réception
 MONTANT TOTAL

Tips & Misc. / Pourboires & Divers

Taxes

Purchases & Services / Achats & Services

Authorization / Autorisation
 Date of Charge / Numéro de folio
 Date de la Charge
 Check No. / Numéro de folio
 149585 A

Initials

O
 I
 L
 O
 F

Travel/Education Expense Claim

Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

Employee Name (Print) **MARCUS MANSCH**
 Department/Site **Public Learning**
 Calgary Health Region E-Mail Address **s.17(1), 17(4)(g)(i)**
 Phone Number **743-1166** Date **1/5/07**
 Destination **Calgary**
 Course Title **CCRC Board Meeting/Forum**
 Departure Date **1/9/07** Return Date **1/10/07**
 Estimated/Actual Expenses

Expense Description	Expense	Exchange	Total Funds	Rate/GST (Cdn)	Description	Expense	Exchange	Total Funds
Air paid by Calgary Health Region via Calgary Health Region								
Mileage			1576.50		Mileage			
Accommodation			500.00		Accommodation			
Meals Based on per diem rate			100.00		Meals			
Ground Transport			100.00		Ground Transport			
Other (Specify)			1800.00		Other (Specify) Public Transport			
Total			2276.50		Total			
Advance Requested (80% of estimated expenses & advance exceeds \$250.00)	\$				Less Advance or Unfunded Portion	\$		
Employee Signature	Date	Balance Due To			Employee Signature	Date	Balance Due To	
<i>M. Mansch</i>	1/5/07	Employee			<i>M. Mansch</i>	1/5/07	Employee	
Departmental Authorization	Date	Employee Signature			Departmental Authorization	Date	Employee Signature	
<i>M. Mansch</i>	1/5/07	<i>M. Mansch</i>			<i>M. Mansch</i>	1/5/07	<i>M. Mansch</i>	
Out of Province Authorization	Date	Departmental Authorization			Out of Province Authorization	Date	Departmental Authorization	
<i>M. Mansch</i>	1/5/07	<i>M. Mansch</i>			<i>M. Mansch</i>	1/5/07	<i>M. Mansch</i>	
Financial Code	Org	Functional Centre	Account	Comments/Other Sources of Funding	Financial Code	Org	Functional Centre	Account

Employee Number **61956**
 Comments/Other Sources of Funding
No receipt for \$5.00 meal on flight
No receipt for \$3.00 snacks for luggage
125.85
61956
 Distribution: White - Accounts Payable - Actual Expenses Yellow - Initiator Pink - Accounts Payable - Airfare/Advance
 100035 © R(2005/03)

TRIP TO TORONTO
NORC Global Security Conf

April 6 - Calgary - Tor.

Apr 8
Marking @ Tor Aero 6.00
Hotel

Apr 9
Supper }
Hotel } 558.35 ✓
Breakfast }

Apr 9 Taxi to Miller Beach 3.00

* Star luggage 16.00

* Taxi to Airport 53.00

* Snacks @ Airport 16.00

* Parking @ Airport 8.48

s.17(1), 17(4)(e.1)

date	reference	desc (ption)	amount
08-APR-07	RT3036	Room Charge	229.00
08-APR-07	RT3036	DMF	6.48
08-APR-07	RT3036	GST Other DMF	0.39
08-APR-07	RT3036	Room GST 6%	13.74
08-APR-07	RT3036	Room PST 5%	11.45
08-APR-07	5275	In Room Dining	11.45
09-APR-07	RT3036	Room Charge	229.00
09-APR-07	RT3036	DMF	6.48
09-APR-07	RT3036	GST Other DMF	0.39
09-APR-07	RT3036	Room GST 6%	13.74
09-APR-07	RT3036	Room PST 5%	11.45
09-APR-07	5320	In Room Dining	24.78
10-APR-07	VI	Visa Settlement	558.35-

For Authorization Purposes Only

Ms Margaret Munsch
10101 Southport Rd. S.W.
Calgary, AB T2W 3N2
Canada
GPMC

3036
229.00
1
280626 A
08-APR-07 18:57
10-APR-07 10:49
VI

APPLICANT COPY

Ms Margaret Munsch
 10101 Southport Rd. S.W.
 Calgary, AB T2W 3N2
 Canada
 3036
 229.00
 1
 280626 A
 2
 08-APR-07 18:57
 10-APR-07 10:49
 VI

date reference description

EXPENSE REPORT SUMMARY

Date	Rm/Tx	GST Tax	Food/Bev	Telecom	Misc	Other	Total
08-APR-07	246.93	14.13	11.45	0.00	0.00	0.00	272.51
09-APR-07	246.93	14.13	24.78	0.00	0.00	0.00	285.84
10-APR-07	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total	493.86	28.26	36.23	0.00	0.00	0.00	558.35
08-APR-07	0.00						
09-APR-07	0.00						
10-APR-07	558.35-						558.35-

Thank you for choosing Starwood Hotels. We look forward to welcoming you back soon!

GST Summary for your stay:

Room Revenue GST	27.48
Food & Beverage GST	0.00
Phone/Fax/Copy Service GST	0.00
Other Revenue GST	0.78
Total GST for your stay:	28.26

Westin Harbour Castle GST Vendor # 861336493

As a Starwood Preferred Guest you have earned at least 67 Starpoints for this visit A722734078.

Ms Margaret Munsch

FOLIO 280626 08-APR-07

APPLICANT COPY

Toronto Pearson Int'l Airport

Retail Id: MA1234

/Seq, #: 114/21178
lane 26: 04/06/07 14:45:
lane 45: 04/06/07 15:23:
Before: 04/06/07 16:15:00

PURCHASE

Amount: \$6.00

\$5.26
S: \$0.32
PST/TP: \$0.42

Card: Visa \$6.00

s.17(1), 17(4)(e.1)

Exp: **/**
Terminal IC STAPP11
Host date: 04/06/07 15:22:32
Auth.: 073785
Response code: 001
Ret. #: 001001001117
APPROVED

Please Follow This Procedure To Reserve A Car At
Toronto Pearson Airport

Receipt

Date: 04/06/07
From: Washn
To: Home
Amount: \$3.00
Cab No:
Sign: BLOOMINGDALE EXECUTIVE TAXI & LIMO
Any change of the flight schedule. Please call our Toll Free
BLOOMINGDALE EXECUTIVE TAXI & LIMO be called in.
Give your name to the commissionaire and ask that your
Terminal 1 outside Lower Level
Terminal 2 Arrival post # 21
Terminal 3 Arrival Post # 23

416-366-6868

www.diamondtaxi.on.ca



DATE: Apr 09 2007
FROM: Washn
TO: Home
DRIVER'S NAME: [Signature]
CAB # 1344
AMT: \$8.00
FARE INCLUDES GST
THANK YOU

ROYAL TAXI (416) 777-9222

www.royaltaxi.ca

DATE: Apr 07
FROM: 77 King St
TO: [Signature]
DRIVER'S NAME: [Signature]
CAB # [Signature]
AMT: \$1.00
FARE INCLUDES GST
THANK YOU

The driver is an Independent Contractor, any GST input credit may be claimed as 'national' or applied to the driver's GST registered number, not Royal Taxi Inc.

THANK YOU
132

INSTRUCTIONS:

- A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date Oct 23, 2007

Requested By (Please Print) Lynn Gallow

Department People & Learning

Site Southport

Phone No (in full) 943-1393

Employee/Supplier #

MAILING ADDRESS (for forwarding of cheque) s.17(1), 17(4)(g)(i)

Canada Post:

City Province Postal Code

Department People & Learning

Site Southport

Purpose of Request

SPECIAL HANDLING INSTRUCTIONS

RECEIVED
OCT 29 2007
FINANCE

CODING & AUTHORIZATION

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
0 1	7 1 1 2 0 0 0 0 0 0 5	6 9 6 0 0 0 0 0 0	\$466.06	Meeting Expenses - Sept-Oct 2007
0 1	7 1 1 2 0 0 0 0 0 0 5	6 9 5 0 0 0 0 0 2	\$166.80	Recognition Expenses
0 1	7 1 1 2 0 0 0 0 0 0 5	6 2 4 1 0 0 0 0 0	\$118.75	Parking & Taxi Expenses
				GST \$
TOTAL AMOUNT OF CHEQUE:			\$751.61	
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer		
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140		

ACCOUNTS PAYABLE ONLY s.17(1), 17(4)(g)(i)

Invoice # _____

Supplier # _____

Recurring Payment: _____

Start Date _____

End Date _____

of Payments _____

Cycle _____

Comments: _____

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
 FOR THE PERIOD OF Sept - Oct 2007

DATE OF OCCURRENCE REASON FOR THE EXPENSE (Receipts Attached) AMOUNT

Sept 6, 2007 Dinner Meeting - Lindy Welsby re Coaching Program for Region 91.34

Sept 10, 2007 Dinner Meeting - Deb Apps re Community Relations Presentation 93.09

Sept 13, 2007 HR Leaders Forum Dinner 94.33

Sept 20, 2007 Lunch Meeting - Caroline Hatcher (Health Link) 22.61

Sept 30, 2007 Amazon Books - 5 Books for Practitioner of Change Graduates (Recognition) 166.80

Oct 10, 2007 Dinner Meeting - Bonnie Dupont/Sue Lee (to discuss Board Candidates) 164.69

Parking & Taxi (See Attached Receipts) 118.75

GRAND TOTAL

\$ 751.61

Date October 23, 2007

Approved by Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO

Margaret Munsch
 Senior Vice-President
 People & Learning



<http://www.amazon.ca>

Amazon.ca
 c/o Assured Logistics
 6110 Cantay Rd.
 Mississauga, ON L5R 3W5
 Canada

Billing Address/Adresse de correspondance:
 Margaret Munsch

Shipping Address/Adresse d'expédition:
 Margaret Munsch

s.17(1), 17(4)(g)(i)

s.17(1), 17(4)(g)(i)

Invoice and Receipt for/Facture et bon de livraison pour

Your order of/Votre commande du: September 24, 2007
 Order ID/N° commande: 701-8348708-8929914

Invoice number/N° bon de livraison cqu44492 September 30, 2007

Quantity/Quantité	Item/Article	Description/Description	Our Price/Notre prix	Total/Total
5	The HR Value Proposition Ulrich, Dave - 1591397073 24-17-04A, X19-63-02C	hardcover	\$31.47	\$157.35

Subtotal/Sous-total	\$157.35
GST/TPS	\$9.45
Order Total/Montant total	\$166.80
Paid via/Payé par Visa	\$166.80
Balance Due/Montant dû	0.00

This shipment completes your order.

You can always check the status of your orders from the "Your Account" link on our homepage.

Thanks for shopping at Amazon.ca, and please come again!

Cette livraison complète votre commande.

Vous pouvez à tout moment consulter l'état de votre commande grâce au lien "Votre compte" sur notre page d'accueil.
 Merci de faire confiance à Amazon.ca. Revenez nous voir!

Amazon.com.cn, Inc. 1200 12th Ave S, Seattle, WA 98144-2712



cqu44492

0033 102



HayGroup

Please send cheque to: HayGroup Limited
Suite 1350, 734 - 7th Avenue SW Calgary, AB T2P 3P8

Payment Details

Credit Card

Cheque

Payable to: HayGroup Limited

Office Use Only

TOTAL **\$94.33**

SubTotal **\$94.33**

Qty	Description	Unit Price	TOTAL
1	HR Leader's Forum Dinner September 13, 2007	\$94.33	\$94.33
TOTAL			\$94.33

Date **9/17/2007**

Customer

Name Ms. Margaret Munsch - Calgary Health Region

Address _____

City _____

Phone _____

Prov _____

PC _____

INVOICE

HayGroup
 Suite 1350, 734 - 7th Avenue SW
 Calgary, Alberta T2P 3P8
 403-215-6730 Fax 403-215-6749

Invoice No. **1**

APPLICANT COPY

s.17(1), 17(4)(g)(i)

MARGARET ANN MUNSCH

209

DATE 1 8 0 9 2 0 0 7
D D M Y Y Y

PAY TO THE ORDER OF

HayGroup Limited

\$ 99 33

Ninety Nine

100 DOLLARS



ROYAL BANK OF CANADA
BONAVISTA BRANCH
755 LAKE BONAVISTA DR. S.E.
CALGARY, AB T2J 0N3

Security features included. Details on back

MEMO

ABC Leaden Farm Drive

Mumunsch

MP

||

s.17(1), 17(4)(e.1)

Boardwalk ⁸¹⁷⁴⁶³

Instructions on Reverse Side: Boardwalk Authority is not responsible for loss or damage, however caused, to vehicles and/or to vehicle contents. Parking charge covers sale of parking privileges only and does not include bailee custody or liability for vehicles and/or their contents. **Vehicles parked at owner's risk.**



070741 5018/170020200/049949
. 12:21 28/09/07 EN 5th-R
McDougal Parkade

GST 0.25
4 50 12 WIS4
20/09/07 13:20

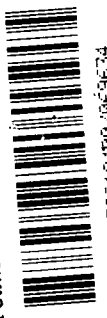


449909

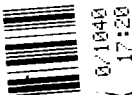
APPLY COPY

817463

Instructions on Reverse Side: Calgary Parking Authority is not responsible for loss of damage, however caused, to vehicles and/or to vehicle contents. Parking charge covers sale of parking privileges only and does not include bailee custody or liability for vehicles and/or their contents. **Vehicles parked at owner's risk.**



5000/170019400/065634
13/09/07 EN 1 L-2
Convention Center



07/10/08 17:20

Mr. M...L

GST 6% 0.23
\$ 4.00 17 VISA
13/09/07 21:05



364609

APPLICANT COPY



DISPLAY THIS SIDE UP ON DASHBOARD

EXPIRATION DATE

EXPIRATION TIME

19/09 11:12 AM

AMOUNT PAID

\$ 3.75 22060000 09:42 AM

CHARGES ARE FOR THE USE OF THE PARKING SPACE ONLY. WE WILL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE TO CAR OR CONTENTS, HOWEVER CAUSED, INCLUDING BUT NOT LIMITED TO FIRE, THEFT OR COLLISION

NON TRANSFERABLE



DETACH RECEIPT FROM TICKET

DATE ISSUED

TIME ISSUED

AMOUNT PAID

19/09 09:42 AM \$ 3.75

CREDIT CARD NUMBER

60114

RECEIPT

APPLICANT COPY

LEAVE ON DASH - THIS SIDE UP

EXPIRATION DATE

22 AUG 2019

EXPIRATION TIME

16:59:36.59

AMOUNT PAID

100.00

DETACH RECEIPT FROM TICKET

DATE ISSUED

22 AUG 2019

TIME ISSUED

16:59:36.59

AMOUNT PAID

100.00

CREDIT CARD NUMBER

2219

EXPIRATION DATE & EXPIRATION TIME

22 AUG 2019

UNIVERSITY OF CALGARY



GST #R106102864

TICKET VALID THIS LOT ONLY.

NON TRANSFERABLE

RECEIPT

APPLICATION COPY



LEAVE ON DASH - THIS SIDE UP

EXPIRATION DATE

2210071721

EXPIRATION TIME

AMOUNT PAID

4.25016200001651113521

DETACH RECEIPT FROM TICKET

DATE ISSUED

2210071721

TIME ISSUED

AMOUNT PAID

CREDIT CARD NUMBER

6014

EXPIRATION DATE & EXPIRATION TIME

2210071721

UNIVERSITY OF CALGARY



GST #R108102864

TICKET VALID THIS LOT ONLY.

NON TRANSFERABLE

RECEIPT

s.17(1), 17(4)(e.1)

PLACE THIS SIDE UP ON DASH

Impark

TICKET VOID IF RE-SOLD

PLACE THIS SIDE UP ON DASH

Impark

TICKET VOID IF RE-SOLD

APPLICANT COPY

W. Kelly

FACE UP

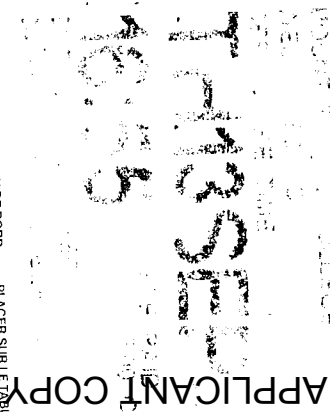
PLACE ON DASH FACE UP

PLACE ON DASH FACE UP

FAU DE BORD
SIBLE

PLACER SUR LE TABLEAU DE BORD
COTE VISIBLE

PLACER SUR LE TABLEAU DE BORD
COTE VISIBLE



APPLICANT COPY
TICKET VOID IF RE-SOLD
PHONE 252-7275
HOURLY PARKER

Meter: LOT 197
Trans: 00038889
Time: 08:00 SEP 21
To Park & Pay
By Phone
Call 252-7275
or 252-7275

PLACE THIS SIDE UP ON DASH
IP ON DASH
18:00 FRI
SEP 21 07

INSTRUCTIONS ON BACK
GST REG # R102458000
www.impark.com
www.imparkireless.com
D

s.17(1), 17(4)(e.1)

s.17(1), 17(4)(c.1)

INSTRUCTIONS ON BACK
GST REG # R102488002
WWW.IMPARK.COM
WWW.IMPARKIRELESS.COM

PLACE THIS SIDE UP ON DASH

SEP 08 11 07

Meter: LOT 400
Trans: 00020354
Time: 7:00 AM SEP 08
TO PARK & PAY BY PHONE
RESEV: 496-7375
Time: 11:07 AM '08

TICKET VOID IF RE-SOLD

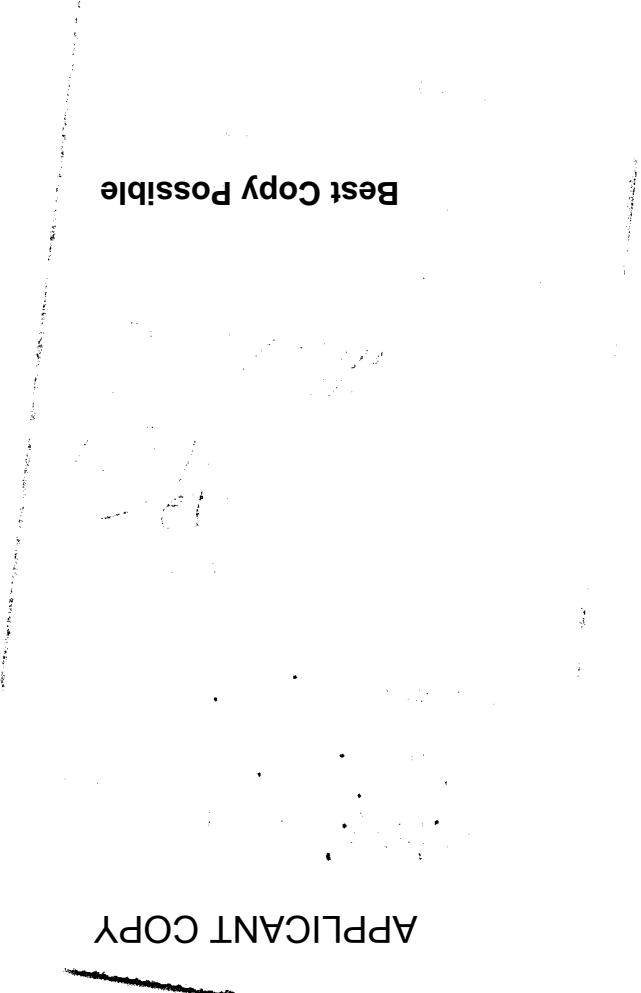
PLACE THIS SIDE UP ON DASH

IMPARK
PHONE 496-7375
DAILY PARKER

APPLICANT COPY

Impark
Marty

TICKET VOID IF RE-SOLD



Best Copy Possible

APPLICANT COPY

TICKET VOID IF RE-SOLD
 TICKET VOID I
 IMPERIAL PARKING
 PHONE 299-7275
 DAILY PARKER
 PLACE THIS SIDE UP /
 ON DASH
 IMPERIAL PARKING
 APPLICANT COPY
 Meter: Lot 420
 Trans: 02/20/2011
 Time: 11:00 AM
 TO PARK & PAY ONLINE
 PLEASE CALL 398-7275
 TO PARK & PAY ONLINE
 Price: \$30.00
 Enter: IMPERIAL PARKING
 Address:
 EXP: 02/20/2011
 P
 17(1), 17(4)(c.1)

APPLICANT COPY

WORKERS COMPENSATION
10203 - 01 - 10/10/10
10001111111111111111

s.17(1), 17(4)(e.1)

WORK NUMBER
EXPIRY DATE
0937

ISSUE DATE
14:00:155

ISSUE NUMBER
1474 586-047

ISSUE AMOUNT
\$10.00

ISSUE DATE
3-

ISSUE AMOUNT
0261

ISSUE APPROVED 027
ROUTING # 012914

THANK YOU

ISSUE AMOUNT WITH PAY TOTAL AMOUNT SHOWN

ISSUE AMOUNT WITH PAY TOTAL AMOUNT SHOWN

ISSUE AMOUNT WITH PAY TOTAL AMOUNT SHOWN

M. Munsch

MARGARET MUNSCHE

PLEASE PRINT IN INK
UNIT #01504934/10001

*** ADDED SUBJECTS ***

16469 \$ 19.00

20 \$ 1.00

144.00 \$ 19.00

UNIT #01504934/10001
UNIT #01504934/10001

s.17(1), 17(4)(c.1)

UNIT #01504934/10001

UNIT #01504934/10001
UNIT #01504934/10001
UNIT #01504934/10001

THE UNIVERSITY OF THE SOUTH ALABAMA
LIBRARY

93.09
12

Best Copy Possible

REDACTED
UNIVERSITY OF THE SOUTH ALABAMA
LIBRARY

APPLICANT COPY



Travel/Education Expense Claim

Instructions

- Submit "Pink Copy" to Accounts Payable immediately upon booking airfare.
- Payment of advances and expenses will be Directly Deposited to your payroll designated bank account.
- Notification of deposit will be e-mailed to your Calgary Health Region e-mail address or mailed to your home address (if a valid e-mail address doesn't exist).
- See back of form for additional instructions.

S.17(1), 17(4)(g)(i)

Employee Name (Print) **MARGARET MANNICH**

Department/Site **People & Learning**

Tuition Paid To (If tuition to be paid directly to institution, use Payment Requisition form #100074)

Course Title **CORE FORM**

Departure Date **March 10/08** Return Date **March 11/08**

Destination **Victoria BC**

Employee Number **41582**

Expense Description	Expense	Exchange Rate/GST	Total Funds (Cdn)
Air paid by Calgary Health Region via Calgary Health Region	415.82		415.82
Mileage	437.82		437.82
Meals Based on per diem rate	100.00		100.00
Accommodation	100.00		100.00
Meals	100.00		100.00
Ground Transport	100.00		100.00
Other (Specify)	480.00		480.00
Total	1155.60		1155.60
Less Advance or Unfunded Portion			\$ 773.91
Advance Requested (80% of estimated expenses & advance exceeds \$250.00)	\$		\$
Employee Signature	Date	Balance Due To	
<i>M. Mannich</i>	Feb 13/08		\$ 773.91
Out of Province Authorization	Date	Employee Signature	Date
<i>M. Mannich</i>	2008-03-13	<i>M. Mannich</i>	March 14/08

Financial Code

Org Functional Centre

Account

Comments/Other Sources of Funding



152



Distribution: White - Accounts Payable - Actual Expenses Yellow - Auditor Pink - Accounts Payable - Airfare/Advance

100035 © R(2005/03)

STANDARD MILEAGE
I AM NOT A RIDE SHARER
RIDE FROM
TO
DATE
DRIVER
CAR #

s.17(1), 17(4)(e.1)


Yellow Cab
 Toll Free: 1-800-808-6881 anywhere in North America
 381-2222 381-2242
 Date: 10/3/08 Amount: \$5.00
 Driver: [Signature] Car #: 43
 From: _____ To: _____



Yellow Cab
 Toll Free: 1-800-808-6881 anywhere in North America
 381-2222 381-2242
 Date: 10/3/08 Amount: \$5.00
 Driver: [Signature] Car #: [Signature]
 From: _____ To: _____


*****Customer Copy*****
I agree to pay driver for
accounting to my card etc
signature

68.48
- 9

Best Copy Possible

caris

Victoria

Cab Vict Air - Empress 55.00
 (B. Hensley + M. Must)

Meeting c. John Johnson
 (is friendly w/ M. Must)
 (included in hotel bill) 28.38

Hotel 131.13

Cab Empress - Airp. 55.00

Dinner Gaults (Bank + May) 68.48

Parking 48.00

APPLICANT COPY

CENTRE FOR
OUTSOURCING
RESEARCH
& EDUCATION

CORE

ABOUT CORE

RESEARCH &
CONFERENCES

EXECUTIVE
EDUCATION

MEMBERSHIP

NEWS

OUR
ORGANIZATION

CONTACT US

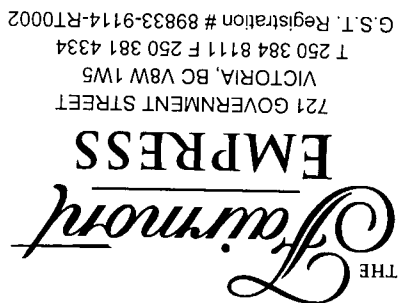
This event is being held on: March 11 2008.

Response code: Y:052195:1039d1b:M:U:NNN
 Transaction Time: Fri Feb 08 14:55:42 EST 2008
 OrderID: 2008020814554003456
 Event Registration fee: \$495.00
 CORE member Discount of 20% off: (\$99.00)
 Goods and Services Tax (GST): \$19.80
 Total Cost of Registration: \$415.80 *
 Transaction Reference Number: 1bdec4ab914f800
 Card ID Result: M
 Card Auth Number: 052195
 Card Reference Number: 1039d1b
 Card Type: VISA

PRIVACY POLICY



www.fairmont.com



Margaret Munsch
 10101 South Port Rd. SW
 Calgary, AB T2W 3N2
 CA

Room # : 592
 Folio # : 267439
 Cashier # : 34
 Page # : 1 of 1
 Arrival : 03/10/08
 Departure : 03/11/08

APPLICANT COPY

Date Description Additional Information Charges Credits

Date	Description	Additional Information	Charges	Credits
03/10/08	Bengal Lounge	#592 : CHECK #3195	28.38	
03/10/08	Package Charge		90.00	
03/10/08	Room PST		8.50	
03/10/08	Room GST	s.17(1), 17(4)(e.1)	4.25	
03/11/08	Room GST			131.13
03/11/08	Room GST			131.13

GST Summary

Room	F&B	Other	Total
4.25	1.08	0.00	5.33

Total	Balance Due
131.13	0.00

Guest signature

Signature du client **X**

For information or reservations, visit us at

www.fairmont.com or call Fairmont Hotels & Resorts from:

United States or Canada 1 800 441 1414

www.fairmont.com ou l'A@phoner au Ha'tels Fairmont de:

A%tats-Unis ou Canada 1 800 441 1414

Thank you for choosing to stay with Fairmont Hotels & Resorts
 Merci d'avoir choisi les Ha'tels Fairmont

155

I agree that my liability for this bill is not waived and I
 indicate person, company or association fails to pay
 for any part of the full amount of these charges.
 Overdue balance subject to a surcharge at the rate of
 1.5% per month after one month. (18.00% per
 annum.)
 I have accepted delivery of The Globe and Mail. Had I
 refused, I would have been eligible for a \$ 75 (Mon-Fri)
 and \$150 (Sat.) credit to my account. (At participating
 hotels.)
 Je me porte personnellement responsable du
 r@glement total de cette note au cas ou la
 compagnie, l'association ou son repr@sentant
 d@sign@ en r@fuserait le paiement. Les comptes en
 souf@rance sont sujets @ un int@r@t de 1,5% par mois
 apr@s un mois. (18,00% par ann@e.)
 J'ai accept@ la livraison du journal The Globe and
 Mail. Si j'avais refus@, j'aurais pu obtenir un cr@diti @
 mon compte de 0,75\$ par jour (du Lundi au Vendredi)
 et de 1,50\$ le Samedi. (Dans les ha'tels participants.)

Invoice # _____	Supplier # _____	Recurring Payment: _____	Start Date _____	End Date _____	# of Payments _____	Cycle _____
Comments: _____						

ACCOUNTS PAYABLE ONLY

Authorizer's Employee Number _____		Authorizer Phone # (in full) 943-1140 _____	
Expenditure Officer Authorization _____		Print Name Kay Best, Chief Financial Officer	
TOTAL AMOUNT OF CHEQUE: \$820.10			
<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other			
ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT
0171120000056960000	01711200000562410000		\$793.10
			\$27.00
			GST \$
			Parking & Taxi Expenses
			Meeting Expenses Oct-Dec 2007
GL DESCRIPTION			
FINANCIAL CODE			

CODING & AUTHORIZATION

<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS	
Purpose of Request _____	
Site	Southport
Department	People & Learning
Interoffice Mail:	
City	Province _____ Postal Code _____
Canada Post:	
MAILING ADDRESS (for forwarding of cheque) s.17(1), 17(4)(g)(i)	
MAKE CHEQUE PAYABLE TO: Margaret Munsch	
Employee/Supplier #	
Date	December 18, 2007
Requested By (Please Print)	Lynn Gallow
Department	People & Learning
Site	Southport
Phone No (in full)	943-1393

INSTRUCTIONS: A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

CHEQUE REQUISITION

APPLICANT COPY

calgary health region



APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
 FOR THE PERIOD OF Oct - Dec 2007

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
Oct 23, 2007	Lunch Meeting – Tom Collins	37.01
Dec 12, 2007	Lunch Meeting – Dr. Bob Johnston	40.51
Dec 13, 2007	P & L Leadership Team Meeting	660.88
Dec 18, 2007	Lunch Meeting – Lynn Gallow	54.70
	Parking (See Attached Receipts)	27.00
GRAND TOTAL		\$ 820.10

Date December 18, 2007

Kay Best
 Approved by Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO

M Munsch
 Margaret Munsch
 Senior Vice-President
 People & Learning

APPLICANT COPY

WELLINGTONS/OSCARS

10325 Donaventure Dr. SE

Tel: 403-278-5250

Server: Liamne
Table: 23
Date: 12/18/2007
Time: 13:44

VISA
MUNSCHE/MARGARET
AUTH 095463
MERCHANT# 9999
ONLINE
s:17(1),17(4)(e.1)

SUBTOTAL \$ 47.70

TIP \$ 7

TOTAL \$ 54.70

** CUSTOMER COPY **

Wellington's/Oscar's
Please pay server.
Thank-you.

Best Copy Possible

Charges are for the use of Parking space only.
We endeavour to protect the property of our
patrons but are NOT responsible for loss to or
damage to car or contents due to fire, theft,
collision by our negligence or otherwise.



977594

Report to Comm. Bc

s:17(1),17(4)(e.1)

Amount: \$ 54.70

Pre Auth

80

6688

WELLINGTONS/OSCARS
MOUNT ROYAL COLLEGE
WELCOMES YOU
DEPARTURE TIME 11 A
TUESDAY
FEE PAID \$ 3.00 C
ENTRY TIME 06 NOV 07:50
CARD NUMBER 4516011422
332801
PLACE ON DASH FACE UP

WELLINGTONS/OSCARS
MOUNT ROYAL COLLEGE
WELCOMES YOU
DEPARTURE TIME 11 A
MONDAY
FEE PAID \$ 4.00 C
ENTRY TIME 05 NOV 08:12
CARD NUMBER 4516011422
32499
PLACE ON DASH FACE UP

158

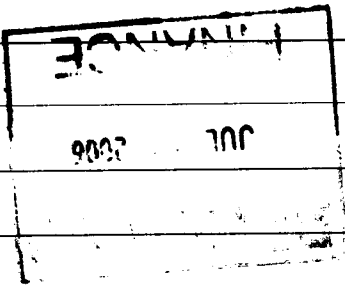
Invoice #	_____
Supplier #	_____
Recurring Payment:	_____
Start Date	_____
End Date	_____
# of Payments	_____
Cycle	_____
Comments:	_____

ACCOUNTS PAYABLE ONLY

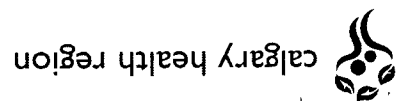
ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION
01	71120000005	6960000	316.74	Meeting Expenses - Mar-June 2006
01	71120000005	69500002	497.07	Recognition Expense
01	71120000005	62410000	74.00	Parking <i>GST</i>
				GST \$
TOTAL AMOUNT OF CHEQUE:			\$ 887.81	
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer		
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140		

CODING & AUTHORIZATION

Date	June 30, 2006
Requested By (Please Print)	Lynn Gallow
Department	People & Learning
Site	Southport
Phone No (in full) 943-	1393
Employee/Supplier #	
MAKE CHEQUE PAYABLE TO:	Margaret Munsch
Mailing Address* (for forwarding of cheque)	s.17(1), 17(4)(g)(i)
Canada Post:	
City	Province
Postal Code	
Department	People & Learning
Site	Southport
Purpose of Request	
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS	



INSTRUCTIONS: A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED



R - 658.97 GST / 2 - 154.91 GST

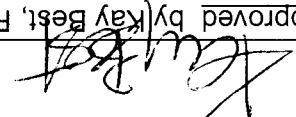
APPLICANT COPY

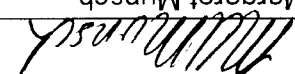
MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch
 FOR THE PERIOD OF March - June 2006

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
March 20, 2006	Scrubs (Gift - Stephen Bayliffe)	44.91
April 6, 2006	Coffee - P & L Leaders (Kananaskis Lodge)	54.08
April 21, 2006	CCHSE Breakfast Session (Coaching)	15.00
May 25, 2006	Working Lunch (Lynne Wood/Susan Cassidy)	19.95
June 1, 2006	RANA Group - Conclusion of Implement the Model	132.36
June 5, 2006	Labour Relations Team - Recognition Dinner	452.16
June 16, 2006	Lunch - Sam Tse (e-People Deploy Discussion)	95.35
	Parking (See Attached Receipts)	74.00
GRAND TOTAL		\$ 887.81

Date June 13, 2006

Approved by 
 Kay Best, FCA
 Executive Vice-President, Risk Management
 Risk Management & CFO


 Margaret Munsch
 Senior Vice-President
 People & Learning

INSERT
THIS END UP

J. Denny Lunch
A Market Munch
PALLISER PARKADE
CALGARY AB

RECEIPT A2
IN: 14/06/06 11:52
OUT: 14/06/06 17:47
PAID: \$ 15.00
VISA

AUTH. CODE 051835
REF. 20
GST No. RT122014491

s.17(1), 17(4)(e.1)

APPLICANT COPY

09/06 201
AUTH. CODE 4J04462
REF. 4J04462

* u Base fee *
* 15 MIN-IT *
* Exit charge *

* NO IN/OUT *
* PRIVILEGES *

* Standard Parking *
* of Canada *

* GST INCLUDED *

GST No. R100230770

166
Cooby.
Date 06.21/06
Received from Margaret Munsch
15 Dollars
100 Dollars
CANADIAN COLLEGE
HEALTH EXECUTIVES
SOUTHERN ALBERTA
\$ 15 No. [Signature]
Tax Reg. No. [Signature]

RECEIPT

WELLINGTONS/OSCAR'S

10325 Bonaventure Dr., SE
Tel: 403-278-5250

Server: Tom K
Date: 06/16/2006
Table: 1
Time: 13:28

VISA

MUNSC/MARGARET
AUTH 019548
MERCHANT# 9999

SUBTOTAL \$ 83.35

TIP \$ 12

TOTAL \$ 95.35

** CUSTOMER COPY **

s.17(1), 17(4)(e.1)

Wellington's/Oscar's
Please pay server.
162
Thank-you.

DELTA LODGE AT KANANASKIS
BIGHORN LOUNGE
PO BOX 249 KANANASKIS, AB, CAN
TEL: 403 591 7711
GST #R122372063

Date: Apr 06 '06 11:31PM
Card Type: VISA

Acct #: _____
Exp Date: _____
Auth Code: 46292
Check: 2065 s.17(1), 17(4)(e.1)
Table: 204/1
Server: 32 Sandy
MARGARET MUNSCH

Subtotal: 47.08
Tip: 59.08
Total: 106.16

Signature: *M. Munsch*

I agree to pay above total according to my card issuer agreement.

**** Customer Copy ****

19.95

PASSWALES ON HOLEID
6985 HOLEID TR SW
CALGARY

ID: 00999540
SLIP #: 9355
STRIPE: 0999540

PRE-AUTH \$115.36

POURBOIRE/TIP \$ 16.00

TOTAL \$ 132.36

SIGNATURE X: *M. Munsch*

ISS: _____ AUTH: \$5

APPROVED AUTH 025925
SER 37901001051 100 -001
JUN 01 2006 8:47 PM

MERCHANT COPY

GRAND PRAIRIE RANCHO
BIG VALLEY RANCH FISH CFE
s.17(1), 17(4)(e.1)

CARD NUMBER: _____
EXPIRY DATE: _____
CARD TYPE: _____
DATE/TIME: _____
RECEIPT NUMBER: S80553405 610
AUTHORIZATION AMOUNT: \$392.16

TIP: 60 -
TOTAL AMOUNT: 452.16

APPROVED 027 AUTH. # _____

CARDHOLDER WILL PAY TOTAL AMOUNT TO CARD ISSUER ACCORDING TO CARD AGREEMENT.

Signature: *M. Munsch*
MARGARET MUNSCH

APPLICANT COPY

APPLICANT COPY
CHEQUE REQUISITION

INSTRUCTIONS:

A Cheque Requisition is the only authorized document on which a department may request payments to be made outside of established Purchasing policies. ORIGINAL DOCUMENTS MUST BE ATTACHED

Date March 23, 2007	Requested By (Please Print) Lynn Gallow	Department People & Learning	Site Southport	Phone No (in full) 943-1393	Employee/Supplier #
------------------------	--	---------------------------------	-------------------	-----------------------------	---------------------

MAILING ADDRESS (for forwarding of cheque)		Canada Post:	
City	Province	Postal Code	
Interoffice Mail:	Department People & Learning	Site Southport	Purpose of Request
<input type="checkbox"/> SPECIAL HANDLING INSTRUCTIONS			

ORG	FUNCTIONAL CENTRE	ACCOUNT	AMOUNT	GL DESCRIPTION										
0 1 7 1 1 2 0 0 0 0 0 5	6 9 6 0 0 0 0 0	0	\$737.20	Meeting Expenses - Jan-March 2007										
0 1 7 1 1 2 0 0 0 0 0 5	6 9 5 0 0 0 0 2	2	\$ 42.00	Recognition Expenses										
0 1 7 1 1 2 0 0 0 0 0 5	6 2 4 1 0 0 0 0	0	\$124.25	Parking & Taxi Expenses										
<table border="1"> <tr> <td colspan="2">TOTAL AMOUNT OF CHEQUE:</td> <td colspan="3">\$903.45</td> </tr> <tr> <td colspan="5"> <input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other </td> </tr> </table>					TOTAL AMOUNT OF CHEQUE:		\$903.45			<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other				
TOTAL AMOUNT OF CHEQUE:		\$903.45												
<input checked="" type="checkbox"/> CDN <input type="checkbox"/> US <input type="checkbox"/> Other														
Expenditure Officer Authorization		Print Name Kay Best, Chief Financial Officer												
Authorizer's Employee Number		Authorizer Phone # (in full) 943-1140												

ACCOUNTS PAYABLE ONLY

Invoice #	Supplier #	Recurring Payment:	Start Date	End Date	# of Payments	Cycle
Comments:						

APPLICANT COPY

MISCELLANEOUS EXPENSES

INCURRED BY Margaret Munsch

FOR THE PERIOD OF Jan - Mar 2007

DATE OF REASON FOR THE EXPENSE (Receipts Attached) AMOUNT

DATE OF OCCURRENCE	REASON FOR THE EXPENSE (Receipts Attached)	AMOUNT
Jan 18, 2007	HR Leaders Forum Dinner	179.70
Jan 20, 2007	Breakfast Meeting - Sarah Raiss (Margaret Munsch & Gerard Stang)	31.03
Jan 22, 2007	Dinner Meeting - Pat Gilmore (to discuss opportunities to work together on leadership)	48.40
Feb 1, 2007	Lunch Meeting - Tom Collins (to discuss Workforce Planning)	58.83
Feb 13, 2007	s.17(1), 17(4)(g)(i) (6 month review)	36.86
Feb 15, 2007	Dinner Meeting - Don Winn (Contract)	151.44
Mar 1, 2007	Dinner Meeting - Louise Wilson (TSS)	87.59
Mar 15, 2007	Dinner Meeting - Lynne Wood (Structure & Staffing Solutions)	143.35
Mar 19, 2007	Recognition Dinner - Deb Goodfellow	42.00
	Parking & Taxi (See Attached Receipts)	124.25
GRAND TOTAL		\$ 903.45

Date March 23, 2007

Approved by Kay Best, FCA
Executive Vice-President, Risk Management
Risk Management & CFO

Kay Best

Margaret Munsch
Senior Vice-President
People & Learning

M. Munsch

**SHELL CANADA LIMITED
FAX COVERSHEET**



Page 1 of 2
Includes coversheet

SEND TO		ATTENTION: Lynn Gallow	
COMPANY: Calgary Health Region		DATE: March 9, 2007	
FROM		LOCATION: Shell Canada Limited 400 - 4th Avenue S.W. P.O. Box 100, Station M Calgary, Alberta T2P 2H5	TELEPHONE NO.:
 Cheryl Murray		FAX NO.: (403) 543-1400	
		SUBJECT: Receipt for HR Leaders Forum Dinner	
DESCRIPTION / REMARKS:			

Hi Lynn ... as requested, I hope this receipt works. Please let me know if you require anything further.

Cheryl

Receipt

Date: March 6, 2007

Amount: \$179.70

Description: HR Leaders Forum Dinner @ Calgary Petroleum Club
January 18, 2007

Charged To: Margaret Munsch and Gerard Stang
Calgary Health Region

Received by: Shell Canada Limited
Attn: David Fulton, VP Human Resources

REDWATER RESTAURANT
 9222 Midland Dr. South
 Dallas, TX 75243
 Tel: 409-534-4266

Server: Rod
 Tablet: 6
 Date: 03/01/2007
 Time: 21:00

VISA
 s.17(1), 17(4)(e.1)
 MUNSCH/MARGARET
 AUTH 078167 ONLINE
 MERCHANT# 9999

SUBTOTAL \$ 125.35
 TIP \$ 18-
 TOTAL \$ 143.35

*** CUSTOMER COPY ***

Thank You For Dining With Us
 GST # 01-958494/R10001

WELLINGTON'S/OSCAR'S
 10325 Bonaventure Dr. SE
 Tel: 403-278-5500

Server: Rod
 Tablet: 6
 Date: 03/01/2007
 Time: 21:00

VISA
 s.17(1), 17(4)(e.1)
 MUNSCH/MARGARET
 AUTH 078167 ONLINE
 MERCHANT# 9999

SUBTOTAL \$ 76.59
 TIP \$ 11-
 TOTAL \$ 87.59

*** CUSTOMER COPY ***

Wellington's/Oscar's
 Please pay server.
 Thank-you.

REDWATER RESTAURANT
 9222 Midland Dr. South
 Dallas, TX 75243
 Tel: 409-534-4266

Server: Rod
 Tablet: 6
 Date: 03/01/2007
 Time: 21:00

VISA
 s.17(1), 17(4)(e.1)
 MUNSCH/MARGARET
 AUTH 078167 ONLINE
 MERCHANT# 9999

SUBTOTAL \$ 11.44
 TIP \$ 20-89
 TOTAL \$ 151.99

*** CUSTOMER COPY ***

Thank You For Dining With Us
 GST # 01-958494/R10001

impark

Univ. of Calgary
Imperial Parking

IMPERIAL PARKING
PHONE 299-7275
DAILY PARKER

Meter: LOT 400

Trans: 02:02:795

Time: 1:33P FEB 02

TO: PARK & PAY BY PHONE

PLEASE CALL 299-7275

PLEASE CALL 299-7275

Price: \$15.00

Card:
Exp.:
Expire:

s.17(1), 17(4)(e.1)

6:00P FRI
FEB 02 07

INSTRUCTIONS ON BACK
GST REG # R122455000
WWW.IMPARK.COM
WWW.IMPARKWIRELESS.COM

PALLISER PARKADE
CALGARY AB

RECEIPT ONLY!

PAY STATION: C3

ENTRY DAT/TIME:

21/03/07 18:49

PAY DATE/TIME:

21/03/07 21:01

PARK-DUR.: HRS:MIN

0:02:12

PAID: \$ 5.00

VISA

AUTH. CODE 041844

REF. 86

* YOU MUST TAKE *

* ORIGINAL TICKET *

* WITH YOU AND USE *

* IT TO EXIT *

GST INCLUDED

GST No. RT12201449

1

THANK YOU FOR YOUR

VISIT!

JP ON DASH

PLACE THIS SIDE UP ON

PLACE THIS SIDE

TICKET V

TICKET VOID IF RE-SOLD

D IF RE-SOLD

TICKET

TICKET VOID IF RE-SOLD

CID IF RE-SOLD

ON DASH

PLACE THIS SIDE UP ON

PLACE THIS SIDE U

impark

Parking - Special
@ Hill Lead Drive
on Parkin

IMPERIAL PARKING

PHONE 299-7275

EVENING PARKER

Meter: LOT 400

Trans: 02:00:205

Time: 5:40P JAN 18

TO: PARK & PAY BY PHONE

PLEASE CALL 299-7275

Price: \$15.00

Card:
Exp.:
Expire:

s.17(1), 17(4)(e.1)

6:00A FRI
JAN 19 07

INSTRUCTIONS ON BACK
GST REG # R122455000
WWW.IMPARK.COM
WWW.IMPARKWIRELESS.COM

ALBERTA CREDIT BUREAU
PROCESSED

RECEIPT C1

ENTRY DATE/TIME:

03-15-07 07:33

PAY DATE/TIME:

03-15-07 09:31

PARK DUR.: HRS:MIN

0:01:56

PAID: \$ 5.00

VISA

AUTH. CODE 045546

REF. 79

* YOU HAVE ONLY *

* 15 MINUTS *

* TO EXIT GARAGE *

* NO IN/OUT *

* PRIVILEGES *

* Managed by *

* Standard Parking *

* of Canada *

* GST INCLUDED *

GST No. R122072913

APPLICANT COPY

LEAVE ON DASH - THIS SIDE UP

EXPIRATION DATE 23/01/07 23:59
EXPIRATION TIME 23:59
AMOUNT PAID \$ 9.00

60114
23/01/07 23:59

TICKET VALID THIS LOT ONLY.

NON TRANSFERABLE 479917

PASQUALES ON MACLEOD
6806 MACLEOD TR SW
CALGARY

ID: 88999540
SLIP #: 8978
STORE: 8899540

PRE-AUTH \$51.83

POURBOIRE/TIP \$ 7.15
TOTAL \$ 58.83

SIGNATURE X *M. Mousa*

VISA

APPROVED AUTH 082183
SEP 612001001017 130 -001
Feb 01 2007 15:14 PM

MERCHANT COPY

s.17(1), 17(4)(e.1)

APPLICANT COPY

DETACH RECEIPT FROM TICKET

DATE ISSUED 23/01/07 12:11
TIME ISSUED 12:11
AMOUNT PAID \$ 9.00
EXPIRATION DATE & EXPIRATION TIME 23/01/07 23:59
CREDIT CARD NUMBER 60114



RECEIPT 479917

Park - Robert

PASSER PARKING
CALGARY AB
RECEIPT ONLY
PAY STATION: 03

ENTRY DATE/TIME: 29/01/07 07:46
PAY DATE/TIME: 29/01/07 10:30
PARK-LOT: HREMIN
0:02:34

PAID: \$ 9.00
VISA

s.17(1), 17(4)(e.1)

* YOU MUST TAKE *
* ORIGINAL TICKET *
* WITH YOU AND USE *
* IT TO EXIT *

GST INCLUDED
GST No. R112201449

THANK YOU FOR YOUR VISIT!

170

CARDHOLDER COPY

APPROVED

42.00

s.17(1), 17(4)(e.1)

Cubs Boats Meets
Chauffeur *Wayan* Date *27 Feb 07*
Car # *44* Amount *\$ 46.00*
GST Included *\$ 6.77*

HELLIE'S ON THE 4TH
2308 4 STREET S.W T2S1S2
CALGARY AB
22369777

PRE AUTH PURCHASE

01-20-2007
Acct #
Exp Date
Name: MARGARET MUNSCH
Card Type VI

Inv. # 2789
T22369777001
Auth # 098624
RRN 001427018

P. Auth Purchase \$27.03
Tip 4
Total 31.03

Customer copy

s.17(1), 17(4)(e.1)

s.17(1), 17(4)(e.1) Pre Auth

Entry Method: Swiped
Batch #: 000001 Seq #: 596002001000
Invoice #: 004930

Amount: \$ 42.40
Tip: 6
Total: 48.40

Total:
Approval Code: 091698

20:19:24

Customer Copy

BROKEN PLATE
590-10616 MACLEOD T2J5N8
CALGARY AB
22799973

PRE AUTH PURCHASE

02-13-2007 12:56:15
Acct # C
Exp Date Card Type VI
Name: MUNSCH MARGARET
A0000000031010 RBC VISA AVION

Trace # 150005 Operator 025
FS2279997301
Inv. # 652
Auth # 094170 RRN 001015005

P. Auth Purchase
Tip 4
Total 36.86
Customer copy