BOARD EXPENSE FORM

NAME:	MAIRI	MATHESON	
FOR THE MO	1	J/ February 20	s.17(1), 17(4)(g)(i)
		,	
	EXPE	ENSES	
			01-71110300002
AIRFARE:		\$	
CAR RENTAL		\$	
ACCOMMODA	ATION:	\$	
MEALS:		\$	
PARKING:		\$	
TAXIS:		\$	
OTHER (pleas	e describe):	*NTEDE!	MAR 2 3 2004
		\$	
		\$	
	ρ	\$	
MILEAGE:	118 km at .38¢ /km	\$ 44.84	63310000
TOTAL EXPE	NSES:	\$ 44.84	

Bandn

Calgarly Regional Health Authority

MILEAGE & PARKING

APPLICANT COPY

Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard

E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.

ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.

_	A	in be reimbursed from site cashier office where available
•	AMOUNTS UNDER \$ 50 00 or	on ha saimhrean ad fan an aite an
_		III DE JEHINDUISEO ITOM SITE CASDIAL Affica whose available

EMPLOYEE NAME (PRINT	CRHA E-MAIL ADDRESS		EMPLOYEE	MUMPED
Mah	eson M.		- CIIII CO (CC	NOMBER
DEPARTMENT	SITE	PHONE #		DATE
DATE OF TRAVEL /EXPENSE	DETAILS	# OF KM	RATE leage)	AMOUNT
		(lor mi	leage)	
Jan 12	To Hellhurst return 1/cm	121		
_	Quality Out Col	19km		
Jan 15	Quality Care Southput 10x2	Zokn		
	0 11			
Jan 20	Beard Mt. Southpart 10x2	20 km	* 1	
\sim				
Jan 29	Board Sharyy Sourport 10x2	zulan		
0				
feb 5	Hall Home Woodbine RHMAC 5x2	10 cm		
. 0				
feb 10	Sort Mtg QC & Timome LOX Z Km	20 km		
th 12	Drug Treatment Court army	14 km		
	3,			
				
		1		<u> </u>

		e e					94 A	77847			****									Carlo Garage	
	FINANCIAL CODE													1		Amount					
Org	Functional Centre Account									grandoming GST)											
								L		6	1	2 2	4	1	0	0	0	0		Mileage/Parking	\$
Emp	Employee Signature					ַן	Date														
							_													TOTAL PAYABLE TO EMPLOYEE	\$
Expe	Expenditure Officer Authorization							4	Authorizer's Employee Number Auth			Phone Number									

BOARD EXPENSE FORM

NAME:	/M.	MATHESON	_
FOR THE MO	NTH OF:	MARCH 2004	
	EX	PENSES	
			01-71110300002
AIRFARE:		\$	
CAR RENTAL	•	\$	
ACCOMMODA	ATION:	•	
MEALS:		\$	
PARKING:		\$	
TAXIS:		\$	
OTHER (pleas	e describe):	s entered	APR 1 9 2004
		\$	
		\$	
MILEAGE: <u>3</u>	<u>64</u> km at .38¢ /km	\$ 138.3a R	<u>00001659</u>
TOTAL EXPEN	ISES:	\$ 138.32	

Bandry



LOCAL TRAVEL EXPENSE CLAIM MILEAGE & PARKING

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

EMPLOYEE NAME (PR		CRHA E-MAIL ADDRESS		EMBLOVES	
M .	MATHESON			EMPLOYEE	NUMBER
DEPARTMENT	SITE		PHONE #		DATE
DATE OF TRAVEL					
/EXPENSE	DETAIL	.s	# OF KM (for m	RATE ileage)	AMOUNT
May 4	airdie Ptal				
	- SOURCE CINO		46K		
Moneli					
1 1 MIC II	Quality Care South	Bet RTN	Zotn		
mm 23	CHR Board Son	urfat retal	Jok		
mon 25	Ritmae - 144 hu	at en	2414		
			14K		
nm 29	Claresholm R	m)	264Km		

			4				
	FINANCIAL COL	DE					
Org Functional	Centre	Account		Comment of the Commen			
Employee 9 ignature		6 2 3 1 0 0	0 0	Mileage/Parking		\$	
Ceri	for	0	Date	TOTAL DAVA DI T			
Expenditure Officer Aut	horization	1	A Ale .	TOTAL PAYABLE TO	EMPLOYEE	\$	
The state of the s	sand	m	Autho	orizer's Employee Number	Authorizer	Authorizer Phone Number	

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:			7. Mas	Leson	
FOR	THE	MONTH OF		april	2004	s.17(1), 17(4)(g)(i)
Data		T	EXI ease attach	PENSES original	receipts.)	
Date		Description		Amount	GST	Total
				Non-Ro	esponsive	
Jan.	04	Rogers i	Direless			35.79
						1 7 2004
					ENTERE	D MAY 1 7 2004
TOTAL	- EX	PENSES:			2	<u>\$ 95,33</u>
Financ	al co	ode: 01-711103 er Authorization:	300003-622100			
	*	andri		Print Name:	10111	Sindicial
Authorizer'	s Emp	loyee Number:		Authorizer Phor	ne Number (in full):	incry
	÷ †			1 .	3-1122	
	s.17	7(1), 17(4)(g)(i)				



Your Rogers statement

MS	MAIRI MATHESON		_
To	tal amount due	\$35.79	ر و
Deb	pited from your account on or after	January 19, 2004	5
Su	mmary of your charges	(taxes included)	Details
0	Balance from your last bill	\$0.0	om parge 0 3
0	Wireless services	35.79	9 4
	Total	\$35.7	9

Invoice date
January 05, 2004

Your account number

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

Your invoice number 1012494414

Any payments we received and processed after January 06, 2004 will show on your next bill.

For more savings...
Get two months free!

See page 5 for details

Questions?

Visit www.rogers.com or see Contact us on page 3.

ROGERS

Thank you!

Your Rogers AT&T bilt is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

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

Your account number : Total amount due :

\$35.79

(W)

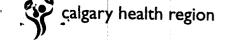
MS MAIR! MATHESON

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

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAME:	/	n. Mai	MESON/	
FOR THE MOI				4 s.17(1), 17(4)(g)(i)
	Ε	XPENSES	ENTER'	ED MAY 1 7 2004
AIRFARE:		\$		<u>01-71110300002</u>
CAR RENTAL: ACCOMMODA	TION:			
MEALS:				
PARKING:				
TAXIS:				
OTHER (please	describe):			
		_		
MILEAGE: 2C (Attach Local Travel Exp	km at .38¢ /km	¥		62210000
TOTAL EXPENS	ES:	\$ 76.0	00	
			_	

RB



LOCAL TRAVEL EXPENSE CLAIM MILEAGE & PARKING

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard
 E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

~ -	CRHA E-MAIL ADDRESS		EMPLOYEE	NUMBER
(nar	THESON Mairi			
DELYLLMEN.	SITE CIHR Board	PHONE #		DATE
DATE OF TRAVEL /EXPENSE	DETAILS	# OF KM (for m	AMOUNT	
April 2. Opril 1.	RHMAC High Run Mn 15	150		
april 1.	RISMAC - WOODS HOME NOW &	16		
april 20	Southort Board astniv			
april 30	Rumac Stillhinst itn 7 mander hop str) 14		

							AUT	HORIZATI	ON & CODING	3		
	FINANCIAL CODE								GL		Amount	
Org	rg Functional Centre Account					Account					(Including GST)	
1			1	<u> </u>	6	2 2	1 0 0	00	Mile	eage/Parking		\$
Emp	loyee Signa	ature						Date				
				-			<u>.</u>		тот	AL PAYABLE TO E	EMPLOYEE	\$
Expe	Expenditure Officer Authorization					Authorizer's Employee Number Authorizer			Phone Number			
<u> </u>			<u> </u>			\simeq						

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAM	E:	MAIRI MATHESON	
FOR	THE MO	ν	s.17(1), 17(4)(g)(i)
		EXPENSES	TERED JUN 1 6 200
AIRFA	RE:	\$	01-71110300002
CAR F	RENTAL:	\$	
ACCO	MMODA	TION: \$	
MEAL	S:	\$	
PARKI	NG:	R \$ 8.50	62210000
TAXIS		\$	
OTHE	R (please	describe):	
		\$	
		\$	
		\$	
MILEA	GE: <u>\ </u>	32 km at .38¢ /km / \$ 50.16	<u>69910000</u>
TOTAL	EXPENS	SES: \$_58.66	

Bandin



LOCAL TRAVEL EXPENSE CLAIM **MILEAGE & PARKING**

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 50.00 can be reimbursed from site cashier office where available.

EMPLOYEE NAME (PR	INT	ozeriici oliice w	nere available.			
	M.	Matheion	HA E-MAIL ADDRESS		EMPLOYEE	NUMBER
CCLVUIMENT	^					
	2004	.cl.		PHONE #		DATE
DATE OF TRAVEL						
/EXPENSE		DETAILS		# OF KM	RATE ileage)	AMOUNT
		•		(101111	neage)	7.1100117
Mayob		Guality Care Son	1001	 		
0		- State of Care Son	cthroit 1ex2	20		
0 - 1/	+-					
Mayl	+-2	pecial my Board (Southfort	+ nauses Luch			
		Southfort	1622	20		
		3		~		
may 05	Ca	nachan Mental Hearth				
		Commental Meanth				
	+	Ponul Member (1	Hmpe)			
	+	<u>Kanahuf</u>		16		
		•				
may 17	(FAP Presentation to hypodates - Buy Roo				
9		trasmy arm	20X2	40		
	101	Mc Mpdates - Bu loo	6 Baury			
			7			
New 20	1 6	hypician Liasa	C- 1/2+			
J		Just desse	JULYHOU!			
	 		10x2	20		
	 _					
143	I K	eople First award	CVS	1/		
		eople First award Kep. DThes.	2x8	16		
		inago.				
	 					
	<u> </u>					
				——— <u>—</u>		

	FINANCIAL	. CODE		्राम्याकालाका सम्बद्धाः		
Org	Functional Centre	Account				Including GST
Employe	2 Signary	6 2 1 0	0 0 0	Mileage/Parking		
-mpioye	e Signature		Date			3
vnondit	0//			TOTAL PAYABLE	TO EMPLOYEE	\$
xpenditi	ure Officer Authorization	101	Authorizer's	Employee Number	Authorizer	Phone Number

roz Amralli, Para ij Popija ija Ja

> PERFORMING APTE-CENTRE INCL. G.S.T. ---591153--- 2 --MO 31.05.04 17:24 00 -->D500 #ST P5 -2590-8,50 \$

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:			athesin			
FOR	THE M	ONTH OF		lay (and)	sufere!	s.17(1), 17	
		(Ple	EXPE ase attach d	ENSES Priginal reco	eipts.)	ENTERED	JUN 1 6 2004
Date	,	Description		GST	Ar	nount	
ma	404	Rogers	Wireless		2	29.10	
Apr	104	0	١(31.78	
Mar.	104	ts	١٠ .			33,12	
Feb	104	(1	11			34.45	
Jan	104	Inter	ret			38.90	
Ebl	04	l i				38690	
Nar	104	()				38,90	
Apr.	104	įį			47	39.48	
lay	104	Ц				20 115	
TOTAI	L EXPE	NSES:			7.3 \$ <u>.3</u>	24.11	
inanc	ial code	9: 01-711103	00003-62210001				
	Roce	Authorization:	,	Print Name:	1 Can	avu	
wa ioi izel	> ⊏mpioye	ee Number:		Authorizer Phone Num	ber (in full):		

RB

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

9143-1122

\$29.10



Your Rogers statement

MS MAIRI MATHESON

Total amount due

Debited from your account on or after May 19, 2004

Summary of your charges	(taxes included)		Details
Balance from your last bill		\$0.00	on page
Wireless services		29.10	4
Total		\$29.10	

Other Rogers services available to you

- O Magazines
- O Messaging services
- O Long distance services

Invoice date

May 05, 2004

Your account number

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

Your invoice number 1012494454

Any payments we received and processed after May 06, 2004 will show on your next bill.

Questions?

Visit www.rogers.com or see

Contact us on page 3.

How to pay your Rogers Bill:

There are several convenient ways to pay your Rogers bill. You can pay:

- online at www.rogers.com
- automatically by pre-authorized bank
- or credit card payment by cheque and mailing to:

Rogers PO Box 9100

PO Box 9100 Don Mills, ON M3C 3P9

- at most banks
- at your local Rogers Video stores

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

ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

Your account number:

Total amount due:

\$29.10

(W)

MS MAIRI MATHESON

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

040507000002910000000000000000000000000000

Previous bill for account:

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

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

back

Page 3 of 5

Sales & Service Or Billing Inquiries 310-2255 If calling Outside Alberta 1-800-400-2598

Details of your new charges

(from Jan 19 to Feb 18)		31.8
Tresidence Line Touchone	\$23.86	
Call Display	7.95	
otal charges for monthly local services	\$31.81	
dditional Charges and Credits		39.4
E9-1-1 Provincial Network Fee Jan 16	\$.13	
E9-1-1 Municipal Call Answer Fee Jan 16		
of more detailed plaining information please visit:		
www.telus.com/internetsupport 1-877-310-4NET		
reedom Internet Security Dec 25		
ligh Speed Access Dec 25		3.9 34.9
otal TELUS Internet Services		\$38.9
otal additional charges and credits	\$39.47	
irectory Assistance		.75
irectory Assistance		•••••
te and time of call Place and number you requested		Amount (\$
s.17(1), 17(4)(g)(i)		Amount (3
perator assisted - dial rate	the state of the s	
t Jan 10 12:56 pm DIR ASST		.75
tal Directory Assistance		\$.75
ong Distance Charges		
ing Distance Charges		5.77
ong Distance Administration Fee Jan 19		2.95

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



Sales & Service Or Billing Inquiries 310-2255 If calling Outside Alberta 1-800-400-2598

Details of your new charges

from Feb 19 to Mar 18) Residence Line Touchtone		31.8
Call Display	\$23.86	
otal charges for monthly local services	7.95	
otal oranges for monthly local services	\$31.81	
Additional Charges and Credits		
E9-1-1 Provincial Network Fee Feb 16		39.4
E9-1-1 Municipal Call Answer Fee Feb 16		••••••••
Louis Municipal Call Allswer Fee Feb 16	.44	
or more detailed billing information please visit:		
www.telus.com/internetsupport		
1-877-310-4NET		
ertifut Ion 25		
ligh Speed Access Jan 25		3.9 34.9
otal TELUS Internet Services		\$38.9
otal additional charges and credits	A00.47	P00.3
	\$39.47	
rectory Assistance		.7
		• • • • • • • • • • • • • • • • • • • •
irectory Assistance		
te and time of call Place and number you requested		Amount (
perator assisted - dial rate $s.17(1), 17(4)(g)(i)$		
i Jan 30 10:08 am DIR ASST		
		.7
tal Directory Assistance		\$.7
ong Distance Charges		5.9
ong Distance Administration Fee Feb 19		2.9

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



Sales & Service Or Billing Inquiries 310-2255 If calling Outside Alberta 1-800-400-2598

Page 3 of 5

Details of your new charges

(from Mar 19 to Apr 18) 1 Residence Line Touchtone		31.8
1 Call Display		***************************************
	7.95	
Total charges for monthly local services	\$31.81	
Additional Charges and Credits		
1 E9-1-1 Provincial Network Fee Mar 16	***************************************	39.4
1 E9-1-1 Municipal Gall Answer Fee Mar 16	\$.14	*************
TES 1-1 Municipal dan Answer Fee Mar 16	44	
For more detailed quining information please visit:		
www.telus.com/internetsupport		
- 1-877-310-4NET		
High Speed Access Feb 25		34.9
Freedom Internet Security Feb 25		3.9
Total TELUS Internet Services		\$38.9
Total additional charges and credits	\$39.48	
Directory Assistance		٠
	•••••	1.5
Directory Assistance		
Date and time of call Place and number you requested		Amount (\$
Operator assisted - dial rate $s.17(1), 17(4)(g)(i)$		
Mon Feb 23 12:16 pm DIR ASST		7
Fri Feb 27 06:54 pm DIR ASST		
Total Directory Assistance		\$1.5°
ong Distance Charges		7.6 ⁻

Long Distance Administration Fee Mar 19		
-vig Distance Administration ree Mat 19		2.9

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

TELUS Your TELUS Statement

TELUS Communications Inc.

Page 1 of 4

M MATHESON

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

Your account number

Your TELUS Account ID

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

Sales & Service Or Billing Inquiries 310-2255

If calling Outside Alberta 1-800-400-2598

Н	ere'	s what	vou	owe	this	month:	\$88.28
	J. J	· · · · · · · · · · · · · · · · · · ·	. , , .	OHC	11113	mona.	⊅00.∠0

Amount of your last bill	\$88.20
Payment we processed on Apr 06 - Thank You	-88.20
Amount overdue from your last bill	.00
1 Residence Line Touchtone from Apr 19 to May 18	23.86
1 Call Display from Apr 19 to May 18	7.95
Additional Charges and Credits (see details below)	39.48
Directory Assistance (see details below)	75
Long Distance Charges (see details below)	10.29
Alternate Service Billing (see details below)	.20
GST (Registration 100652692) at 7%	5.75
Total new charges	88.28

Thank you for keeping your account up to date.

Total amount due by May 10

\$88.28

Additional Charges and Credits

1 E9-1-1 Provincial Network Fee Apr 16 \$.14 1 E9-1-1 Municipal Call Answer Fee Apr 16

39.48

For more detailed billing information please visit:

- www.telus.com/internetsupport
- 1-877-310-4NET

Tear off here



Payment return slip

DO NOT pay this bill. \$88.28 will be debited to your pre-authorized payment account on May 07, 2004.

Phone number

Account number

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

238 (G)

0126795

BCTREG01

00453367

M MATHESON

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

0519000088280000000004

1:00537m9001:18

96

TELUS Communications Inc.

Page 1 of 5

2

Sales & Service Or Billing Inquiries 310-2255 If calling Outside Alberta 1-800-400-2598

M MATHESON

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

Your account number

Your TELUS Account ID

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

Here's what you owe this month: \$85.34

Amount of your last bill	\$88.28
Payment we processed on May 07 - Thank You	-88.28
Amount overdue from your last bill	.00
1 Residence Line Touchtone from May 19 to Jun 18	23.86
1 Call Display from May 19 to Jun 18	7.95
Additional Charges and Credits (see details below)	39.48
Directory Assistance (see details below)	1.50
Long Distance Charges (see details below)	4.29
Alternate Service Billing (see details below)	2.70
GST (Registration 100652692) at 7%	5.56
Total new charges	85.34

Thank you for keeping your account up to date.

Additional Charges and Credits

Total amount due by Jun 10

1 E9-1-1 Provincial Network Fee May 16

1 E9-1-1 Municipal ¢all Answer Fee May 16

\$85.34

39.48

ror more detailed billing information please visit:

- www.telus.com/internetsupport
- 1-877-310-4NET

Tear off hero



Payment return slip

DO NOT pay this bill. \$85.34 will be debited to your pre-authorized payment account on Jun 06, 2004.

Phone number

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

238 (S)

0126478 00486755 BCTREG01

M MATHESON

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

OL1900008534000000009

BOARD EXPENSE FORM

NAME:	MAIRI MATHE	SON
FOR THE MONTH OF:	NAIRI MATHES	s.17(1), 17(4)(g)(i)
	EXPENSES	a ENTERED IIII 1 6 2004
		01-71110300002
AIRFARE:	\$	
CAR RENTAL:	\$	
ACCOMMODATION:	\$	
MEALS:	\$	
PARKING:		
TAXIS:	\$	
OTHER (please describ	pe):	
	\$	
	\$	
	\$	
MILEAGE: 80 (Attach Local Travel Expense Claim	_ km at .38¢ /km	62210000
TOTAL EXPENSES:	<u>\$ 30.40</u>	<u> </u>

Cardal



APPLICANT COPY LOCAL TRAVEL EXPENSE CLAIM MILEAGE & PARKING

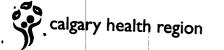
- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard
 E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

EMPLOYEE NAME (PRINT)		CRHA E-MAIL ADDRESS		EMPLOYEE	NUMBER
$m \cdot n$	Tatheson				
M. M. DEPARTMENT BOOM	1 d		PHONE #		DATE
DATE OF TRAVEL /EXPENSE	DETAILS		# OF KM	RATE ileage)	AMOUNT
			(IOI III	licage)	
Jue 3	South Nort & Kin	10K (QA)	20k		
me 17	douth Portalin	10 K (FIN)	Zolc		
Cross 11	South Post & RAN Jonth Post & KAN	lok (suety)	Zak		
Ome 29	donth Port & Con	10K (Brd)	Zok		
0					
			-		

	AUTHORIZATION & CODING							
	FINANCIAL	CODE		GL Description		Amount		
Org	Functional Centre	Account				(Including GST)		
		6 2 2 1 0 0	00	Mileage/Parking		\$		
Emp	oloyee Signature	_	Date					
ب م	lain /c	1		TOTAL PAYABLE TO E	EMPLOYEE	\$		
Ε χ ήρε	enditure Officer Authorization	lul	Autho	orizer's Employee Number	Authorizer	Phone Number		

BOARD EXPENSE FORM

NAME:	Mathern, Mai	ri
FOR THE MONTH OF:	July 04	s.17(1), 17(4)(g)(i)
	EXPENSES	
AIRFARE:	\$	01-71110300002
CAR RENTAL: ACCOMMODATION:	\$ENTER	ED AUG 1 0 2004
MEALS: PARKING:	R \$	<u>62210000</u>
TAXIS: OTHER (please describe):	\$	
	\$ \$ ○\$	
MILEAGE: 105 km at .38 (Attach Local Travel Expense Claim form) TOTAL EXPENSES:	8¢/km \$ 39.90 \$ 61.30	<u>62210000</u>
	Kol.	ndu RB
(:\BOARD\Honoraria\Honoraria Forms.DOC F	Revised: June 23, 2003	



LOCAL TRAVEL EXPENSE CLAIM MILEAGE & PARKING

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

EMPLOYEE NAME (PRINT)	there available.			
Mairi	Matheson CRHA E-MAIL ADDRESS		EMPLOYEE	NUMBER
DEPARTMENT	SITE	PHONE #		DATE
DATE OF TRAVEL /EXPENSE	DETAILS	# OF KM	RATE nileage)	AMOUNT
Julyon	DonthPort of Con			
July 7	Schutephenn DNK Gandrain Strikers & Rtw	20 Km 20 Km		
mey	South Port & Row	Tolom		
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ly 19	Dofek TSk prie Son hPort Rtn	Zok		

(2) (2) (2) (2) (2) (2) (2) (2) (2) (2)		AUTHO	PRIZATION & CO	DING		
	FINANCIAL CO	DE		GL Description		Amount
Org F	unctional Centre	Account				(Including GST)
Employee Ci-		6 2 2 1 0 0 0	0	Mileage/Parking		\$ \$
Employee Signa	ature	D	ate			<u> </u>
Evnonditure Off				TOTAL PAYABLE TO E	MPLOYEE	\$
cxperiallare Off	cer Authorization		uthorizer's Employe	ee Number	Authorizer F	Phone Number

00073 R(2001/01)

Send Completed Form to Accounts Payable

S. OFFICIAL I	RECEIPT
Sheraton Suites Calgary EAU CLAIRE	DATE: JUNE 7/04.
Received from Ms. Math	eson.
the sum of twenty one	40
\$ 21.40	vring.
Method of Payment Cash Cheque Debit Card Credit Card, Type	Hotel Authorization

Sheraton
Suites Calgary
EAU CLAIRE

15699

Dear Guest,

Please present this ticket to the **Front Desk** for payment and retrieval of your vehicle.
Allow approximately 10 minutes for retrieval.

Remove all contents from your vehicle.

PLEASE SEE REVERSE

BOARD EXPENSE FORM

NAME:	mairi Mathe	son
FOR THE MONTH OF:	September	s.17(1), 17(4)(g)(i)
	EXPENSES	
		01-71110300002
AIRFARE:	\$	
CAR RENTAL:	\$	
ACCOMMODATION:	\$	
MEALS:	\$	The state of the s
PARKING:	\$	
TAXIS:	\$	
OTHER (please describe):		
	\$	
	\$	
MILEAGE: 102 km Attach Local Travel Expense Claim form	n at .38¢ /km \$ 38.76	63310000
TOTAL EXPENSES:	\$	
(:\BOARD\Honoraria\Honoraria Forms.DO(C Revised: June 23, 2003	Bandry



LOCAL TRAVEL EXPENSE CLAIM MILEAGE & PARKING

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard E=Mail address CR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

MPLOYEE NAME (PRINT) . /	na thesen.	CRHA E-MAIL ADDRESS		EMPLOYEE	NUMBER
EPARTMENT	SITE		PHONE #		DATE
DATE OF TRAVEL /EXPENSE	DETAILS		# OF KM	RATE ileage)	AMOUNT
0 11 0					
SEPTIC	Southford 1to		20		
Sept 16	Southput) VIlla	ye Pkann (Rim	9 22		
Sept 21	Sinthlow & R	IN	20		
Sept 28	CITR Board				
Sept 29	Earthfor & Ron	/	20		
					-

	FINANCIAL CO	DDE		ATION & CODING GL Description		Amount
Org	Functional Centre	Account				(Including GST)
		6 2 2 1 0 0	00	Mileage/Parking		\$
Employ	ee Signature		Date			
				TOTAL PAYABLE TO	EMPLOYEE	\$
:xpena	iture Officer Authorization	,	Autho	rizer's Employee Number	Authorizer	Phone Number

00073 R(2001/01)

Send Completed Form to Accounts Payable

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME:	m. matheson.	
FOR THE MONTH OF	Sopt. (+ Prevuer months)	2004

EXPENSES (Please attach original receipts.)

Date	D	escription	Amount	GST	Total
Sept c	<u> 12</u>	nternet			Z38.90
Aug o	4 1	internet.		· ~ ~	238,90
Julyo	4 1	Internet	· · · · · · · · · · · · · · · · · · ·	- 4	2 38.90
June C	X I	Internet		2	38.90
June a	4 F	Rogers Wireless		7	34.45
Julyo	4	Rogers Wireless			2 37.13
Aug O	47	Rogers Wireless			31.78

TOTAL	EXPEN	SES:
-------	-------	------

Ts 258.96

Financial code: 01-71110300003-62	210001
Expenditure Officer Authorization:	Print Name:
Authorizer's Employee Number:	Authorizer Phone Number (In full):
	\$ 943-1122

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

B



Your TELUS State APRLICANT COPY Sep 20, 2004 M MATHESON s.17(1)

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

Page 2 of 6

Sales & Service: Internet 1-877-310-4NET Other products 310-2255 If calling from outside Alberta, call Toll-free: 1-800-400-2598 Manage your account @telus.com/customercare

(continued from previous page) Additional Charges and Credits	
Total TELUS Internet Services	\$38.90
Total additional charges and credits	\$39.48
Directory Assistance	.75
Directory Assistance	
Date and time of call Place and number you requested	Amount (\$)
Operator assisted - dial rate $s.17(1),\ 17(4)(g)(i)$	
Fri Aug 27 12:41 pm DIR ASST	.75
Total Directory Assistance	\$.75
Long Distance Charges	11.22
Long Distance Administration Fee Sep 19	3.95

Late payment fee If you don't pay the amount owing by the due date, a late payment fee applies to the total outstanding balance. The fee is 1.00% per month (12.68% per year) of the outstanding balance. Details on TELUS terms and conditions for providing service can be found in the "General Terms of Service" section of the White Pages Directory and the TELUS web site at http://www.tehus.com

Paying your bill

You can mail your payment TELUS PO BOX 7575 VANCOUVER BC V6B 8N9

Paid stamp	J
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TELUS Your TELUS Statement Sep 20, 2004

Questions? For customer service or bill inquiries, please refer to page 2 for contact information.

Page 1 of 6

2

M MATHESON

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

Your TELUS Account ID

Your account number

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

Here's what you owe th	is month:	\$98.60
------------------------	-----------	---------

Amount of your last bill	\$93.12
Payment we processed on Sep 06 - Thank You	-93.12
Amount overdue from your last bill	.00
1 Residence Line Touchtone from Sep 19 to Oct 18	23.86
4 Call Display from San 19 to Oct 18	7.95
Additional Charges and Credits (see details below)	39.48
Disease Assistance (see details below)	.75
Long Distance Charges (see details below)	11.22
Alternate Service Billing (see details below)	8.91
GST (Registration 100652692) at 7%	6.43
Total new charges	98.60
Total amount due by Oct 10	\$98.60

Thank you for keeping your account up to date.

TELUS Communications Inc.

Additional Charges and Credits

39.48

E9-1-1 Municipal Call Answer Fee Sep 19 E9-1-1 Provincial Network Fee Sep 19

TELUS Internet Services

Freedom Internet Security Aug 25 High Speed Access Aug 25

3.95 34.95

Payment return slip

DO NOT pay this bill. \$98.60 will be debited to your pre-authorized payment account on Oct 07, 2004.

Phone number

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

238 (J)

0126866

M MATHESON

00448513 BCTREG01

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

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Page 2 of 4

									\$38.9
add	litiona	ıl chai	rges a	and credits					\$39.48
ctor	y As	sista	nce	•••••	***************************************				5.2
ctoi	y As	sista	nce					***************************************	
and t	ime o	f call		Place and numb	er you reques	ted			Amount (\$
						17(4)(g)(i)			
Aug	06	05:0	6 pm	DIR ASST	•••••				.7!
Aug	10	11:2	7 am	DIR ASST	•••••				
	• • • • • • • •		• • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	••••••				
			• • • • • • • •		••••••				
					••••••				
Aug	13	03:3	1 pm	DIR ASST					7,
Aug	14	09:18	3 am	DIR ASST					.75
Dire	ector	y Ass	istan	ce					\$5.25
j Dis	stanc	e Ch	arge	!S					5.71
	add ctor ctor and t Aug Aug Aug Aug Dire	ctory As ctory As and time o ator assist Aug 06 Aug 10 Aug 10 Aug 12 Aug 12 Aug 13 Aug 14 Directory	ctory Assistant ctory Assistant time of call ator assisted - di Aug 06 05:0 Aug 10 11:2 Aug 10 11:2 Aug 12 10:2 Aug 13 03:3 Aug 14 09:16 Directory Ass	ctory Assistance ctory Assistance ctory Assistance and time of call ator assisted - dial rate Aug 06 05:06 pm Aug 10 11:27 am Aug 10 11:29 am Aug 12 10:26 am Aug 13 03:31 pm Aug 14 09:18 am Directory Assistan	and time of call Place and number ator assisted - dial rate Aug 06 05:06 pm DIR ASST Aug 10 11:27 am DIR ASST Aug 10 11:29 am DIR ASST Aug 12 10:23 am DIR ASST Aug 12 10:26 am DIR ASST	ctory Assistance ctory Assistance ctory Assistance and time of call Place and number you reques ator assisted - dial rate S.17(1), Aug 06 05:06 pm DIR ASST Aug 10 11:27 am DIR ASST Aug 10 11:29 am DIR ASST Aug 12 10:23 am DIR ASST Aug 12 10:26 am DIR ASST Aug 13 03:31 pm DIR ASST Aug 14 09:18 am DIR ASST Directory Assistance	ctory Assistance ctory Assistance and time of call Place and number you requested ator assisted - dial rate S.17(1), 17(4)(g)(i) Aug 06 05:06 pm DIR ASST Aug 10 11:27 am DIR ASST Aug 10 11:29 am DIR ASST Aug 12 10:23 am DIR ASST Aug 12 10:26 am DIR ASST Aug 13 03:31 pm DIR ASST Aug 14 09:18 am DIR ASST Directory Assistance	ctory Assistance ctory Assistance and time of call Place and number you requested ator assisted - dal rate S.17(1), 17(4)(g)(i) Aug 06 05:06 pm DIR ASST Aug 10 11:27 am DIR ASST Aug 10 11:29 am DIR ASST Aug 12 10:23 am DIR ASST Aug 12 10:26 am DIR ASST Aug 13 03:31 pm DIR ASST Aug 14 09:18 am DIR ASST Directory Assistance	ctory Assistance ctory Assistance and time of call Place and number you requested ator assisted - dial rate S.17(1), 17(4)(g)(i) Aug 06 05:06 pm DIR ASST Aug 10 11:27 am DIR ASST Aug 10 11:29 am DIR ASST Aug 12 10:23 am DIR ASST Aug 12 10:26 am DIR ASST Aug 13 03:31 pm DIR ASST Aug 14 09:18 am DIR ASST Directory Assistance

Late payment fee If you don't pay the amount owing by the due date, a late payment fee applies to the total outstanding balance. The fee is 1.00% per month (12.68% per year) of the outstanding balance. Details on TELUS terms and conditions for providing service can be found in the "General Terms of Service" section of the White Pages Directory and the TELUS web site at http://www.tehs.com

Paying your bill

You can mail your payment to: **TELUS** PO BOX 7575 VANCOUVER BC V6B 8N9

Paid stamp	
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TELUS Nour TELUS Statement

TELUS Communications Inc.

Page 1 of 4

Sales & Service: Internet 1-877-310-4NET Other products 310-2255 If calling from outside Alberta, call Toll-free: 1-800-400-2598

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

2

Your account number

Your TELUS Account ID

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

Here's what you owe this month: \$93.12

Amount of your last bill	\$105.79
Payment we processed on Aug 06 - Thank You	-105.79
Amount overdue from your last bill	.00
1 Residence Line Touchtone from Aug 19 to Sep 18	23.86
1 Call Dienlay from Aug 19 to Sen 18	7.95
Additional Charges and Credits (see details below)	39.48
Directory Assistance (see details below)	5.25
Long Distance Charges (see details below)	5.71
Alternate Service Billing (see details below)	4.80
GST (Registration 100652692) at 7%	6.07
Total new charges	93.12
Total amount due by Sep 10	\$93.12

 Thank you for keeping your account up to date.

Additional Charges and Credits

39.48

To 4 4 \$4 minimal Oall Anguar Foo Aug 10	\$.44
E9-1-1 Municipal Call Answer Fee Aug 19	
	1/
E9-1-1 Provincial Network Fee Aug 19	.17

TELUS Internet Services

Freedom Internet Security Jul 25 High Speed Access Jul 25

3.95

34.95

Tear off here

Payment return slip

DO NOT pay this bill. \$93.12 will be debited to your pre-authorized payment account on Sep 06, 2004.

Phone number

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

238 (H)

0125826 00471559 BCTREG01

M MATHESON

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

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Page 2 of 4

Total TE	LUS Internet Services	\$38.90
Total ad	ditional charges and credits	\$39.48
Directo	ry Assistance	1.50
Directo	ry Assistance	
Date and	time of call Place and number you requested	Amount (\$
Operator	assisted - dial rate $s.17(1),\ 17(4)(g)(i)$	Amount (\$)
	07 08:20 am DIR ASST	
Tue Jul	13 08:00 pm DIR ASST	.75
Total Dir	ectory Assistance	\$1.50
Long Di	stance Charges	3.95
Long Dis	tance Administration Fee Jul 19	3.95
Alternat	e Service Billing	22.15
	o Incorporated	

Late payment fee If you don't pay the amount owing by the due date, a late payment fee applies to the total outstanding balance. The fee is 1.00% per month (12.68% per year) of the outstanding balance. Details on TELUS terms and conditions for providing service can be found in the "General Terms of Service" section of the White Pages Directory and the TELUS web site at http://www.tehus.com

Paying your bill

You can mail your payment **TELUS** PO BOX 7575 VANCOUVER BC V6B 8N9

Paid stamp	 	

TELUS Communications Inc.

Page 1 of 4

M MATHESON

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

\$87.86

2

Your account number

Your TELUS Account ID

s.17(1).17(4)(9)(i)

5.17(1), 17(·/\\\\\\\-/	
Here's what you owe this	month:	\$105.79

Amount of your last Dill	
Payment we processed on Jul 07 - Thank You	-87.86
Amount overdue from your last bill	.00.
1 Residence Line Touchtone from Jul 19 to Aug 18	23.86
11404-4-40	7.95
1 Call Display from Jul 19 to Aug 18 Additional Charges and Credits (see details below)	39.48
to the feeting	1.50
Ot design details holout	3.95
Alternate Service Billing (see details below)	22.15
GST (Registration 100652692) at 7%	6.90
Total new charges	105.79
Total amount due by Aug 10	\$105.79

Thank you for keeping your account up to date.

Additional Charges and Credits

39.48

E9-1-1 Municipal Call Answer Fee Jul 19 E9-1-1 Provincial Network Fee Jul 19

TELUS Internet Services

النط فمما سيمينكم

Freedom Internet Security Jun 25 High Speed Access Jun 25

3.95

34.95

Tear off here

Payment return slip

DO NOT pay this bill. \$105.79 will be debited to your pre-authorized payment account on Aug 06, 2004.

Phone number

Account number

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

238 (E)

0125786 00492991 BCTREG01

M MATHESON

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

08190001057900000000

1:00537 - 9001

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Page 2 of 4

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

Additional Charges and Credits	
Total TELUS Internet Services	\$38.90
Total additional charges and credits	\$39.48
Directory Assistance	1.50
Directory Assistance	
Date and time of call Place and number you requested	Amount (\$)
Operator assisted - dial rate $s.17(1),\ 17(4)(g)(i)$	
1 Wed May 19 01:58 pm DIR ASST	.75
Wed May 26 09:34 pm DIR ASST	.75
Total Directory Assistance	\$1.50
Long Distance Charges	5.49
Long Distance Administration Fee Jun 19	3.95

Late payment fee If you don't pay the amount owing by the due date, a late payment fee applies to the total outstanding balance. The fee is 1.00% per month (12.68% per year) of the outstanding balance. Details on TELUS terms and conditions for providing service can be found in the "General Terms of Service" section of the White Pages Directory and the TELUS web site at http://www.telus.com

Paying your bill

You can mail your payment to: TELUS PO BOX 7575 VANCOUVER BC V6B 8N9

Paid stamp			
:			

TELUS Your TELUS Statement Jun 20, 2004

Sales & Service Or Billing Inquiries 310-2255 If calling Outside Alberta 1-800-400-2598

M MATHESON

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

\$85.34

Your account number

Your TELUS Account ID

2

Page 1 of 4

s.17(1), 17(4)(g)(i)Here's what you owe this month: \$87.86

Amount of your last bill		
Payment we processed on Jun 06 - Thank You	-85.34	
Amount overdue from your last bill	.00	
1 Residence Line Touchtone from Jun 19 to Jul 18	23.86	
1 Call Display from Jun 19 to Jul 18	7.95	
Additional Charges and Credits (see details below)	39.48	
Directory Assistance (see details below)	1.50	
Long Distance Charges (see details below)	5.49	
Alternate Service Billing (see details below)	3.85	
GST (Registration 100652692) at 7%	5.73	
Total new charges	87.86	
Total amount due by Jul 10	\$87.86	

Thank you for keeping your account up to date.

TELUS Communications Inc.

Additional Charges and Credits

Total amount due by Jul 10

39.48

\$.44 E9-1-1 Municipal Call Answer Fee Jun 19 E9-1-1 Provincial Network Fee Jun 19

TELUS Internet Services

Manage your account online @: telus.com/customercare

To purchase or inquire about high speed internet or other services call Toll-free: 310-2255

High Speed Access May 25 Freedom Internet Security May 25 34.95

3.95

Payment return slip

DO NOT pay this bill. \$87.86 will be debited to your pre-authorized payment account on Jul 07, 2004.

Phone number

Account number

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

238 (Q)

0126255

M MATHESON

00485593

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

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Your Rogers statement

MS MAIRI MATHESON

Total amount due

Debited from your account on or after

\$34.45
June 19, 2004

Su	mmary of yo	our charges	(times included)		Details
_	Balance from	your last bill		\$0.00	on page
•	Wireless sen	rices		34.45	4
	Total			\$ 34.45	

Other Rogers services available to you

- O Magazines
- O Messaging services
- O Long distance services

Invoice date

June 05, 2004

Your account number

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

Your invoice number

1012494464

Any payments we received and processed after June 06, 2004 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

How to pay your Rogers Bill:

There are several convenient ways to pay your Rogers bill. You can pay:

- online at www.rogers.com
- automatically by pre-authorized bank or credit card payment
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON

- M3C 3P9 - at most banks
- at your local Rogers Video stones

ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

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

Your account number:

Total amount due:

\$34.45

(W)

MS MAIRI MATHESON

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

04060700000344500000000000000000000000000



Your Rogers statement

MS MAIRI MATHESON

Total amount due Debited from your account on or after

Su	mmary of ye	our charges	(taxes included)		Details
_	Balance fron	n your last bill		\$0.00	on page
•	Wireless ser	vices		37.13	4
	Total			\$37.13	

Other Rogers services available to you

- O Magazines
- O Messaging services
- O Long distance services

invoice date

July 05, 2004

Your account number

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

Your invoice number 1012494474

Any payments we received and

processed after July 06, 2004 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

How to pay your Rogers Bill:

There are several convenient ways to pay your Rogers bill. You can pay:

- automatically by pre-authorized bank or credit card payment
 - by cheque and mailing to:

Rogers Don Milks, ON M3C 3P9

- at your local Rogers Video stores

ROGERS

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

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

Your account number: Total amount due:

\$37.13

(W)

MS MAIRI MATHESON

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



Your Rogers statement

MS MAIRI MATHESON

Total amount due

Debited from your account on or after

Summary of your charges

Balance from your last bill (actualing taxes)

Wireless services

Total before tax

G.S.T. (#88824 9463)

Total

Other Rogers services available to you

- O Magazines
- O Messaging services
- O Long distance services

Invoice date August 05, 2004

Your account number

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

Your invoice number 1012494484

Any payments we received and processed after August 07, 2004 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

How to pay your Rogers Bill:

There are several convenient ways to pay your Rogers bill. You can pay:

- online at www.rogers.com
- automatically by pre-authorized bank or credit card payment
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

- at most banks

O ROGERS

Thank you !

Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

Your account number : Total amount due :

\$31.78

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

(W)

MS MAIRI MATHESON

\$31.78

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

04080700000317800000000000000000000000000

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:			PATHESON	M.	
FOR	THE MC	NTH OF		October	2004	s.17(1), 17(4)(g)(i)
		(PI	E	XPENSES ch original r		•
Date	De	scription		Amount		
10/19	2004	Rogers	Ce.11.	31.51	GST	Total
		<u> </u>				
		:	· · · · · · · · · · · · · · · · · · ·			
			•			
	 L	·				
TOTAL	. EXPEN	ISES:			2	\$ 31.51
Financ	al code:	01-711103	300003-6221	0001		
Experiditor	o Officer Au S Employee	thorization:	Vanta II	Print Name: Authorizer Phone	Number (in full)	andry
	15/1	-		94	3-112	9
	s.17(1), 1	7(4)(g)(i)				Res

Payment history details

Payment Created by:

External (payment was made outside of online

billing)

Reference Number Account Number Transaction Date

Payment Amount Paid By

Status

EXT-12010152052

10/19/2004

\$31.51 Bank debit

Payment Received

back

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

s.17(1), 17(4)(e.1) Rogges Cell phone.

https://secure6.billerweb.com/rog/nibSrv

10/28/2004

BOARD EXPENSE FORM

NAME	: <u>M</u>	· MATHESON	
FOR '	THE MONTH OF:	October 2004	
			and the safe of th
	E	KPENSES	
,		0	01-71110300002
AIRFA	RE:	\$ 402.55	69313000
CAR	RENTAL:	\$ 278.20	
ACCC	MMODATION:	\$ 299.50	<u>6221200</u> 0
MEAL	S:	s_K17.12	6950000
PARK	ING:	s 76.40	62210000
TAXIS	:	s_r 63.00	62212000
OTHE	R (please describe):		
 _		\$	
		\$	***************************************
		\$	
MILEA (Attach Lo	GE: <u>\$4</u> km at .38¢ /km	Ks 69.92	00001660
	EXPENSES:	<u>\$ 928.51</u>	70 Maria 3 2001;
		\mathcal{A}	- d
		F.	an Ola 1

X:\BOARD\Honoraria\Honoraria Forms.DOC

Revised: June 23, 2003



APPLICANT COPY LOCAL TRAVEL EXPENSE CLAIM

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

EMPLOYEE NAME (PRIN	/	DDRESS	EMPLOYEE N	IUMBER
DEPARTMENT	SITE	PHONE #		DATE
DATE OF TRAVEL /EXPENSE	DETAILS	# OF KM (for m	RATE nileage)	AMOUNT
OCT 4	Glence /RIN Dr Bob Ret	r. 4 k		
Oct 7	Transalta rtw	8 K		
OCT 14	Village Pk Snorth Liaway	ls 14K		
OCTIV	Hillhoust RMHAC	12 ic		
(1)	Retroleum Club Brain 2015 T. Ho	takass lux		Party 16 \$
is col	Sofety Conference airport & RTN	24K		402.55
/ معي	Taans to Westin Isha E	omra Hic		63.00
	Pankey Calgar	Arpt		30.00
OCT 181	Wellness Comte Southport	ZoK		
Oct 19	Wellner SouthPat/BpHalk/	Bramh 201		
Oct 21	Village Ac 2nn L.s. ward	a IAK		
OCT 17	Bacakfast e Wastin Eb MTN			\$ 17.12
Sorre Col	Juci chases is room			6.83
Oct 25	Canadian Unit Concil Palliser	rm 12k		Ponking / vales
our 28	Shelaon Chumin - Pallise	1210		Dang \$ 9.00
	L.S. awards Village Pk 2 no	14K		
OCT 29	tenance my southput	1 20 K	1	

		AUTI	IORI.	ZATION & CODING		
	FINANCIAL COL			GL Description		Amount (Including GST)
Org	Functional Centre	Account				
		6 2 2 1 0 0	0 0	Mileage/Parking		\$
Emp	loye Signature		Date			
•	Tais /cm	5,		TOTAL PAYABLE TO E	MPLOYEE	\$
Ехре	enditure Officer Authorization		Auth	orizer's Employee Number	Authorizer	Phone Number
	Dand	W				

00073 R(2001/01)

Send Completed Form to Accounts Payable



RECEIPT/RECU

150CT04 FLT/VOL 240

GST/HST/TPS/TVH (866112535)

GATE/PRT Seq 124

D47 03:30PM ÉRE3CE 04:00PM

04:45PH

MATHESON/MAIRI F

0EP# CALGARY EDMONTON ARR:

FARE/TARIF: FUEL / HIS/NEW/ASS/CAR AIF/RACALGARY

10.00 14.74

5.61

183.00 12.00

TOTAL:

225.35

THANKS FOR CHOOSING WESTJET! MERCI DE VOYAGER AVEC WESTJET!

SECURITY/SECURITE

Best Copy Possible

bat. .

you is wise,

• • • • •

Extra Commen Which this .

1-4-1/3 201611

Fit No:

i., 4,5, ... Bepart - EDMONION Arrive: CALCARY

113.00 Fare 12.00 NAV/INS AIF EDMONTON 00.415.61 SECURITY TAX GST/HS1 (#866112535) 11.59

> Fare lotal 177.20

Bag Tag#'s:

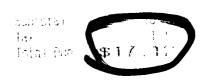
Save \$6 for each return flight the you book online at west jet.com

THE MESTIG fladera bets & Lange I Imenitari - Elberta

5-40-01



a Biktut Buffet



14.

Grat...ty:

43

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

Ms. Mairi Matheson

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

Arrival 10/15/04 Departure 10/17/04 Payment Method VA

Room Cashier

0717

Page

Starwood Pref.# Airline Partner

AC

Folio No.

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

** INFORMATION **

The Westin Edmonton, 10/16/04

Date	Description	Room	Charges	Credits
	Day of Charge	0717	130.00	
10/15	Room Charge	V , = :	6.50	
10/15	Room Tax 5%		9.10	
10/15	Room GST 7%		1.49	
10/15	Tel-Long Distance		1.49	
20,	->#717 :	s.17(1), 17(4)(g)(i)	130.00	
10/16	Room Charge		6.50	
10/16	Room Tax 5%			
10/16	Room GST 7%		5.10	
10/16	Refreshment Centre		6.83	<u> </u>
		Total	299.52	

299.52 299.52 \$

Balance

Room	GST	18.20
F&B	GST	0.48
Other	GST	0.10
Total	GST	18.78

GST Vendor R101577591

Your Air Canada Aeroplan Program miles have been awarded.



Valet Charge \$\frac{\$21.40}{Includes tax}\$ Palliser

THIS CONTRACT LIMITS OUR LIABILITY PLEASE READ IT

The holder of this ticket is purchasing a valet service and the use of a parking space, or valet service alone. The vehicle may be parked on a street. Remove all valuables from vehicle

Regardless of the pring fellings ed, as hider on his ticket accepts all risk and The sammont is in the left of ly loss or damages to the vehicle mowever eaused no liability for supervision of the vehicle while parked or for losses due to theft and vandalism. Any claim for loss or damage is waived by the customer unless itemized and reported in writing to The Fairmont Palliser before the vehicle is removed by the customer.

This agreement cannot be modified or waived by any employee

Nº 0935

INDIGO 535
EDMONTON INT'L AIRPORT
780-890-4490
6ST-FED 4: 897152666

FICTION & LIT MA 04402J7629 1146

1 0 11.79

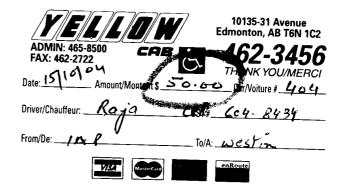
07.02 GST - FED 0.84

TOTAL SALE 12.83

CASH 20.00

CHANGE 7.17

REFUNDS OR EXCHANGES IN 14 DAYS



CALGARY AIRPORT Terminal Farkade GST No. R122556194

RECEIPT H2
ENTRY DATE/TIME:
10/15/04 15:00:13
EXIT DATE/TIME
10/17/04 1:02:10
PAID: \$ 30.00
LENGTH OF 1 21:02
METHOD OF PAYMENT:
CASH

THANK YOU FOR YOUR VISIT



Mairi Matheson

From:

<itinerarv@westiet.com>

To: Sent: s.17(1), 17(4)(g)(i)

Subject:

Thursday, October 14, 2004 9:10 AM Your Ticketless Itinerary - Thank you and have a great flight.

> **WESTJET** 5055 11 ST NE

CALGARY, AB T2E 8N4

Agent Number: 1219

MAIRI MATHESON

Confirmation Number: ERE3CE

Date Booked:

14OCT04

Modified:

14OCT04

Booked By:

MAIRI

s.17(1), 17(4)(g)(i) Welcome Aboard: Mairi Matheson

Date

Flt Depart

Seat Arrive

Stops

Fri 15Oct04 240 CALGARY

4:00pm

EDMONTON

4:45pm 0

Sun 17Oct04 64 EDMONTON

10:55am

CALGARY

11:38am 0

Total for 01 guest(s)

Fare:

316.00

NAV/INS:

24.00

CALGARY AIF: EDMONTON AIF: 10.00

ATSC:

15.00 11.22

GST/HST:

263

Call us Toll Free: 1-800-538-5696

In Calgary: 250-5839

Total

\$402.55 C

Visit our Website at www.westjet.com

Visa:

\$402.55

Balance Due:

\$0.00 CA

Rules and other stuff:

QST# 1202807956TQ0001 GST# 866112535

10/14/2004

^{*} For Domestic Flights: Identification will be checked for adults 16 years of age and older. Please check-in a minimum of

⁶⁰ minutes prior to scheduled departure. Our counters will be open 3 hours prior to departure. Although we will do our best to

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME		MOI	NTH OF		1650 N lovembe		2 <u>i</u> 4. s.17(1), 17(4)(g)(i)
				EXI ase attach	PENSES original	receipts.)	
Date		Des	cription		Amount	GST	Total
ept o	<u>04</u>	_Rè	gers Wi	reless	多		31.26
<u>000</u>	i . I	,	10				30.71
D.	07	<u> </u>	Herne	t			41.63
Oct.	04		\(\(\)				41.63
		. <u>-</u>	-				:
		·					
ΓΟΤΑΙ	L EX	PEN	SES:			7	\$ 145.23
inanc	ial c	ode.	01-7111030	00003-622100	001		
xpenditu	re Offi	cer Aut	horization:	00003-022100	Print Name:	"	
	(I	كت	ndui		Sh	irless	landru
Authorizer	s Emi	oloyee	Number:		Authorizer Pho	one Number (in full)	
	_				90	42-115	<u>_</u>
		s.17(1), 17(4)(g)(i)				

Payment history

Display payment history for: All Accounts

Items 1-10 of 21

١	k	e.	X	t

Reference Number	-	ccount lumber	Transaction Date	Payment Amount	Paid By	Status
EXT-127204	85052		11/19/2004	\$30.71	Bank debit ****	Payment Received
EXT-120101	52052		10/19/2004	\$31.51	Bank debit ****	Payment Received already paid
EXT-113971	70052		09/19/2004	\$31.26	Bank debit ****	Payment Received:
EXT-106550	07052		08/20/2004	\$31.78	Bank debit ****	Payment Received '\
EXT-101255	34052		07/19/2004	\$37.13	Bank debit ****	Payment Received
EXT-956577	4052		06/19/2004	\$34.45	Bank debit ****	Payment Received already paid
EXT-898799	1052		05/19/2004	\$29.10	Bank debit ****	Payment Received 11
EXT-843124	8052		04/19/2004	\$31.78	Bank debit ****	Payment Received 11
EXT-785836	1052		03/19/2004	\$33.12	Bank debit ****	Payment Received 11
EXT-733354	4052		02/19/2004	\$34.45	Bank debit ****	Payment Received 11

Items 1-10 of 21 s.17(1), 17(4)(g)(i)

Next>

Rogers Bins Ceil phone account

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

MATHESON, MAIRI

https://secure6.billerweb.com/rog/nibSrv

12/9/2004

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

TELUS

MAIRI MATHESON - account number:

log out

my account

currently viewing: mathesom (view another account)

manage services

Automobile

contact info

payment method

account usage

llid weiv

member referral

TELUS®

Mr. MAIRI MATHESON

TELUS Communications Inc. P.O. Box 3660 Stn Terminal Vancouver, BC V6B 3Y8 Canada

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

Bill Date
Oct 25 2004
B1-258829574
Bill Number
B1-258829574
Internet Account Number
Oct 30 2004
Can\$ 41.63

This statement is for your records only.

Payment will be made via your regular payment method for Internet services.

Summary of your account	
Balances	Total
Previous Balance:	0.00
Current Balance:	41.63
Total Balance Due:	41.63

Summary of new charges					
Description	Item No.	Total			
Accounts/Receivable Items		10441			
Webspace Monthly Fee	B1-258829574,4	0.00			
TELUS Internet Security	B1-258829574,6	3.95			
Usage	B1-258829574,1	0.00			
Dial-Up Access Monthly Fee	B1-258829574,3	0.00			
Email Monthly Fee	B1-258829574,2	0.00			
High Speed Access Monthly Fee	B1-258829574,5	34.95			
Free Dial-Up Usage	B1-258829574,3	0.00			
GST Registration 100652692	B1-258829574,7	2.73			
Other Items	,	=			
Payment	P1-20382099	-41.63			

Additional charges and cre	dits			
Start Date and Time	End Date and Time	Quantity	Rate Description	Total
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	Bundled 10 MB Webspace	0.00
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	Bundled TELUS Anti-Virus	0.00
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	Add-on TELUS Firewall	3.95
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	POP 15MB	0.00
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	Bundled Email	0.00
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	Velocity ADSL	42.95
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	Long Distance Loyalty Discount	-3.00
Oct 25 12:00:00 AM	Nov 24 11:59:59 PM	1	QuickConnect Velocity ADSL Discount	-5.00 -5.00
Oct 25 12:00:00 AM	Oct 25 12:00:00 AM	0	GST Registration 100652692	2.73

Customer Accounts & Billing Inquiries

<sup>For Internal Use Only.
Note: For Details regarding Usage or Roaming, please logon to Your Account for more information. Details are available on-line for the previous 4 months.</sup>

Online:

You may also contact us online using the contact us form.

How to read your online statement

Phone:

Alberta Customers:

310-4638 (Toll free in AB)

1-877-310-4638 (Can/US)

B.C. Customers:

310-4638 (Toll free in BC)

1-877-310-4638 (Can/US)

Ontario Customers:

1-866-468-3587 (Can/US)

- Credits on account are non-transferable and not redeemable for cash.
- Please print or save this statement if you require a copy for your records or tax purposes.

TELUS is not responsible for reproducing statements.

Select a date from the menu below and click the "View Statement" button to display the statement.

Nov. 25, 2004 view selected statement

send statement to

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

close account (info about how to close your TELUS Internet Services account)

other TELUS sites | contact us | sitemap | frequently asked questions | security | terms & conditions | privacy

TELUS'

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

TELUS'

MAIRI MATHESON - account number:

log out

THE RECOUNT

currently viewing: mathesom (view another account)

manage services

contact info

payment method

account usage

view bill

member referral

dalkarear.

TELUS®

Mr. MAIRI MATHESON

TELUS Communications Inc. P.O. Box 3660 Stn Terminal Vancouver, BC V6B 3Y8 Canada

S 17(1), 17(4)(g)(i)

Bill Date
Nov 25 2004

B1-260322854

B1-260322854

B1-260322854

Internet Account Number
Nov 30 2004

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

Due Date
Nov 30 2004

Can\$ 41.63

This statement is for your records only.

Payment will be made via your regular payment method for Internet services.

Summary of your account	
Balances	Total
Previous Balance:	
Current Balance:	0.00
Total Balance Due:	41.63
Total Dalatice Due.	41.63

Summary of new charges		
Description	Item No.	Total
Accounts/Receivable Items		, otal
Webspace Monthly Fee	B1-260322854,3	0.00
TELUS Internet Security	B1-260322854,5	3.95
Usage	B1-260322854,7	0.00
Dial-Up Access Monthly Fee	B1-260322854,2	0.00
Email Monthly Fee	B1-260322854.1	0.00
High Speed Access Monthly Fee	B1-260322854,4	34.95
Free Dial-Up Usage	B1-260322854.2	0.00
GST Registration 100652692	B1-260322854,6	2.73
Other Items	= - =	2.73
Payment	P1-21280693	-41.63

Start Date and Time	End Date and Time	Quantity	Rate Description	Total
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	Bundled 10 MB Webspace	0.00
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	Add-on TELUS Firewall	3.95
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	Bundled TELUS Anti-Virus	0.00
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	POP 15MB	0.00
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	Bundled Email	0.00
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	QuickConnect Velocity ADSL Discount	-5.00
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	Velocity ADSL	-3.00 42.95
Nov 25 12:00:00 AM	Dec 24 11:59:59 PM	1	Long Distance Loyalty Discount	-3.00
Nov 25 12:00:00 AM	Nov 25 12:00:00 AM	0	GST Registration 100652692	2.73

Customer Accounts & Billing Inquiries

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Ontario Customers:

1-866-468-3587 (Can/US)

- Credits on account are non-transferable and not redeemable for cash.
- Please print or save this statement if you require a copy for your records or tax purposes.

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Select a date from the menu below and click the "View Statement" button to display the statement.

Nov. 25, 2004 view selected statement

send statement to

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

close account (info about how to close your TELUS Internet Services account)

other TELUS sites | contact us | sitemap | frequently asked questions | security | terms & conditions | privacy

TELUS'

CALGARY HEALTH REGION BOARD EXPENSE FORM

MONTH OF:		vember. 6	+	s.17(1), 17(4)(g)(i)
	EX	PENSES		
		LITOLO	EN	TERED DEC 1.5.20
		\$		01-71110300002
ΓAL:		\$		
ODATION:		\$		
		\$		
		\$ 8.00)	62210000
		\$		
ease describe):				
		\$		
		\$		
60		\$		
vel Expense Claim form)	.38¢ /km	\$ 34.90	<u>e</u>	62210000
PENSES:		\$ 42.90	0	
	Pase describe): State	Pase describe): 92 km at .38¢ /km	S	S



LOCAL TRAVEL EXPENSE CLAIM MILEAGE & PARKING

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

EMPLOYEE NAME (PRINT	Manuela	CRHA E-MAIL ADDRESS		EMPLOYEE	NUMBER
DEPARTMENT /	MATHESON SITE		PHONE #		DATE
DATE OF TRAVEL /EXPENSE	DETAILS		# OF KM	RATE nileage)	AMOUNT
No 1 A	Sountfort / KT.	√	20		
NO V 17	RIMMAC (Kensi	yton RTN)	12		
NOV 18	BOUTHANT /RIN	/	20		
Nov 22	Souther 1 pt	N	20		
Nol23	Soun+Port		20		
EXP.	ISPLAY THIS SIDE UP ON DASHBOARD BRATION DATE EXPIRATION TIME	DATE ISSUED TIME ISSUE	ECEIPT FROM TIO	CKET .	
AMC	7	CREDIT CARD NUME	_,		
PRECISE PARKLIN	WELLNESS INTENTION	PRECISE PARKLINK)190	

		AUTHO	RIZATION & CODING		
	FINANCIAL COI	DE	GL Description		Amount
Org	Functional Centre	Account		10.00 A 20.00 M 40.00 M 50.00 M	(Including GST)
		6 2 2 1 0 0 0	0 Mileage/Parking		 \$
Emp	loyee Signature	Da	ate		-
	tem /c		TOTAL PAYABLE TO	EMPLOYEE	\$
Expe	enditure Officer Authorization	Au	thorizer's Employee Number	Authorizer	Phone Number

00073 R(2001/01)

Send Completed Form to Accounts Payable

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME FOR T	: HE MON		Mattes Ember PENSES original re		1), 17(4)(g)(i)
Date	Des	cription	Amount	GST	Total
		iternet			42.24
ТОТА	L EXPEN	ISES:		Z	<u>\$ 42.24</u>
		01-71110300003-62210			
Expenditu	re Officer Au	Ithorization:	Print Name:	cled la	indivil
Authorize	r's Employee	Number:		1 ey (in full): 3-1126)
	s.17(1),	17(4)(g)(i)			MAN O 2005 RA

My TELUS Statement	Bill Dat	e: Nov 20, 2004	Due Date: Dec 10, 2004
M MATHESON Account Number TELUS Account ID	s.17(1), 17(4)(g)(i)		View History Current Month
Summary of my account		Usage Report	s Download/Print Help
Previous charges and credits			
Amount of your last bill			\$89.69
Payment we processed on Nov 06			-89.69
Amount overdue from your last !	bill		\$0.00
New Charges			
Monthly Local Services (including	rental equipment if applicable)		\$31.81
Additional Charges and Credits -	- High spied post - inherent		39.48
Directory Assistance			3,75
Long Distance Charges			4.13
Alternate Service Billing			10.35
GST (Registration 100652692) at 7	7%		
Total new charges	*****		6.24
•			\$95.76
Total amount owing			\$95.76

BOARD EXPENSE FORM

	EXPENSES	
		01-71110300002
AIRFARE:	\$	
CAR RENTAL:	\$	
ACCOMMODATION:	\$	
MEALS: Wellness mbg/lime	L \$_48.09	<u> </u>
PARKING:	\$	
TAXIS:	\$	
OTHER (please describe):		
Two Wellows Books	\$	
The Lying Work Place. 21.95x	2 18 46.97	1950000
	\$	
MILEAGE: 4 km at .38 (Attach Local Travel Expense Claim form)	¢/km R\$ 35.72	<u>69910000</u>
TOTAL EXPENSES:	, 130.78	
	Ψ <u>''</u>	Boundary 3



LOCAL TRAVEL EXPENSE CLAIM MILEAGE & PARKING

- Payment will be Directly Deposited to your payroll designated bank account. Notification of deposit will be E-Mailed to your CRHA standard E-Mail address OR mailed to your home address if a valid E-Mail address doesn't exist.
- ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE.
- Amounts under \$ 100.00 can be reimbursed from site cashier office where available.

EMPLOYEE NAME (PRINT)	CRHA E-MAIL ADDRESS		EMPLOYEE	NUMBER
\sim	an matheson.				
I DEPARIMENT	LEITE		PHONE #		DATE
[\\S	oard				
DATE OF TRAVEL /EXPENSE	DETAILS		# OF KM	RATE	AMOUNT
/EAPENSE			(for m	nileage)	AMOONI
Dec 8	Southfail Petrum		20		
Dee 8	Peter loughted Hs,	+ return.	28		
Dec 19	glinioe Club/u	m	6		
	0 (
Dec 16 Dec 20	Hospann ruta	m	20		
Dec 20	Southon / ctr	<u> </u>	20		
`					

			FINA	NCIA	L CO	DΕ					GL Description		Amount (Including GST
Org	F	unctio	onal Centr	re				Acco	unt				
						6 3	2 2	1	0 0	0 0	Mileage/Parking		\$
Employ	ee Sigr	natur	е							Date			
											TOTAL PAYABLE TO	EMPLOYEE	\$
Expend	liture O	fficer	Author	izatio	n					Auth	orizer's Employee Number	Authorizer	Phone Number

00073 R(2001/01)

Send Completed Form to Accounts Payable

** CUSTOMER COPY **

INTERAC DIRECT PAYMENT

TRANSACTION RECORD

041215/13:59

INDIGO #279#

5570 SIGNAL HILL CT CALGARY, AB

T3H 3P8

CARD #

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

OP ID: 163

ACCOUNT TYPE: CHEQUING TRAN RECORD #:4512

PURCHASE

TOTAL \$63.41

(000) APPROVED AUTH #155938 THANK YOU

TERMINAL ID: 02476552 MERCHANT #: 00176109 DUPLICATE

The Glencoe Club 636 29th Ave S.W. Calgary, Alberta T2SOP1 403-243-2506

MARIA L Tue 12/14/04 2:05 PM Guest Num: 2

90950 Table 405 Guests 2 z. .

GRILLE RM 4.50 \$ N/A (alcohol). 1 GL-ST. RITA SAU 1 GL-ST. RITA MER 2 XMAS LUNCH BUFF 37.90

> nTotal 46.90 C CHG 7.04 3.77 :4es...

Total 57.71

2 Books to Senior UP's le Wellness.

INDIGO :SIGNAL HILL Indigo Store 279 55/0 Signal Hill Centre SW Calbary AB T3H 3H8 (403)246-3221 Fax: (403)242-6815 * 651# R097152666

MEMBER CHG Amount Jup and 57.71

> MEMBER CHG Tendered 57.71

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

THAME YOU

MATHE ON MATRT

131309 Reg 2 ID 110 2:00 pm 15/12/04

Sales for Customer #

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

S LIVING WURKPLACE 3 € 21.95 65.85 S 0006385699 IREWARDS DISCOUNT SUBTOTAL
TAX: GST - 7%
TOTAL SALES TAX 6.59 59.26 4.15 4.15 TOTAL DEUT CARD PAYMENT

List 65.85 Sell 59.08 Your Savings 6.59

Refund or exchange on gifts until Jahuary 16, 2005. Items must be in store-bought condition. No refund or exchange of magazines, opened aultimedia, DVD's and CD's WELLNESS

Jask Foreis EDP. Penny Heuve Jud

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME:			Mairi Matheson					
					ry 200°	s.17(1),	17(4)(g)(i)	
FOR	THE	MO	NTH OF	Janua	ry 2005	5		
					0			
				EX	PENSES			
			(Plea	ase attac	h original i	receipts.)		
Date		De	scription		Amount	GST	Total	
Jan			nternet c	MCC255	39. 9 8		4224	
Jon			igers Ce		33.45	2341	1	
			J					
							Tub e 2886 -	
						8		
TOT	AL E	XPE	NSES:			(X	\$ 18.05	
Fina	ncial	cod	e: 01-711103	300003-6221				
Expend	liture Or	fficer	Authorization:	0.	Print Name:	£ (€ (nets	
Authori	zer's Er	mploy	ee Number:			none Number (in full):		
		17/1), 17(4)(g)(i)			1 10 1 16	0 -	
	S	17(1), 17(4)(g)(1)				KB.	
			· I					

My TELUS Statement	ı	Bill Date: Jan 20, 2005 Due Date: Feb 10,			
M MATHESON Account Number	s.17(1), 17(4)(g)(i)		View History		
 TELUS Account ID			Current Month		
Summary of my account	t	Usage Reports	Download/Print Help		
Previous charges and credits	1				
 Amount of your last bill			\$129.41		
Payment we processed on Jan	06		-129,41		
Amount overdue from your la	st bill		\$0.00		
New Charges					
Monthly Local Services (includ	ing rental equipment if applicable)		\$31.81		
Additional Charges and Credits	- High Speed ADSL- inter	net	39.48		
Directory Assistance	O 1		1.50		
Long Distance Charges			68.95		
Alternate Service Billing			7.25		
GST (Registration 100652692)	at 7%		10.41		
Total new charges			\$159.40		
Total amount owing			\$159.40		



Your Rogers statement

MS MAIRI MATHESON

Total amount due \$35.79

Debited from your account on or after January 19, 2004

Summary of your charges (taxos included)

Balance from your last bill \$0.00 3

Wireless services 35.79 4

Total \$35.79

Invoice date January 05, 2004

Your account number

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

Your invoice number 1012494414

Any payments we received and processed after January 06, 2004 will show on your next bill.

For more savings...
Get two months free!

See page 5 for details

Questions?

Visit www.rogers.com or see Contact us on page 3.

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



Thank you !

Your Rogers AT&T bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

Your account number:

Total amount due :

\$35,79

(W)

MS MAIR! MATHESON

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

04010700000357900000000000000000000000

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAME:	Mairi M	atte Son		
FOR THE MONTH OF:	Mairi M January	2005	s.17(1), 17(4)(g)(i)
	EXP	ENSES	ENTERN	- FLS : 12003
AIRFARE:				01-71110300002
AINFAIL.		\$		
CAR RENTAL:		\$		
ACCOMMODATION:	0	\$		
MEALS: Receipts atta	iched K	\$ 47.		
PARKING:	nittee	\$		
TAXIS:		\$		
OTHER (please describe)	:			
		\$		
		\$		
		\$		
MILEAGE: 154 kr (Attach Local Travel Expense Claim for	m at .38¢ /km	\$ 58	.52	
TOTAL EXPENSES:	X_	\$_105	5.70	
X:\BOARD\Honoraria\Honoraria Forms.DO	DC Revised: June 2:		4.0	eCoste RA

••	APPLICAN1	COPY		
calgary health region				
<i>"</i> .	ACH FMC Southport PLC RGH Other	LO	CAL TRAVE	L EXPENSE CLAIM
INSTRUCTIONS:				& PARKING
 Payment will be Di Calgary Health Re 	rectly Deposited to your payroll bank a gion E-Mail address OR mailed to your	ccount. Notification of	of deposit will be	e E-Mailed to your
 ORIGINAL RECEI 	PTS MUST BE ATTACHED FOR DATE	nome address if a v	alid E-Mail add	ress does not exist.
EMPLOYEE NAME (Print	5 100.00 can be reimbursed from	n site cashier offic	ce where avai	ilable.
Mairi M	-1	EMPLOYEE NUMBER		
CHR Board	PHONE NUMBER		DATE	
DATE OF TRAVEL/				
EXPENSE	DETAILS	#6	OF KM RATE (for mileage)	AMOUNT
Jan 12 /50	sithpost) latura Rest. +	Pat - 1	2	
	duation army theto			
	Southport + Return	20		
	outhwood Gre Conta + Re			
	buthport + Rutur	20		
Jan 18 5	but port + return	20		
Jon 25 /	Conchimens Club + Reti-			
Jan 26	Duth port + Return	20		
Jan 27 <	outhput theting	2,		
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		15	4	4<0<
CODING & AUTHORIZ	ATION		1	\$58.52
ORCE THE WINGINGS	Page 20 of Contracting and			
	SENIRE SEE	GL DESCR	IPTION	AMOUNT (Including CST)
EMPLOYEE	6 2 2 1 0 0 0	MILEAGE/PAR	KING	(Including GST)
EMPLOYEE SIGNATURE AUTHORIZATION			PAYABLE TO EMPLOYEE	
O0073	AUTHORIZER EMPL	OYEE NUMBER	AUTHORIZER PH	ONE NUMBER
	DISTRIBUTION: WHITE	-ACCOUNTS PAYA	ABLE	

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BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME	≣: <u>₩</u>	MAIRI MATHESON						
FOR	THE MONTH OF	FEBRUARY	2005	s.17(1), 17(4)(g)(i)				
		EXPENSES tach original	ENT	TERED MAR 10 2008				
Date	Description	Amount	GST	Total				
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<i>:</i>								
Feb	Rogers cellphon	6 P 30.71						
Feb	Rogers cellphone Telus Internet	139.48						
TOTAL	L EXPENSES:			\$ 70.19				
Financ	ial code: 01-71110300003-6	2210001	,					
	re Officer Authorization: S Employee Number:	Print Name:	ou De	Coste				
	o employed Humber.	Authorizer Pho	ne Number (in ful タレスー)	11):				
	s.17(1), 17(4)(g)(i)	· · · · · · · · · · · · · · · · · · ·		lb				



Your Rogers statement

MS MAIRI MATHESON

Total amount due \$30.71

Debited from your account on or after February 19, 2005

Summary of your charges

Su	mmary of your charges			Details on page
9	Balance from your last bill	(including tume)	\$0.00	3
	Wireless services		28.70	
	Total before tax		28.70	
	G.S.T. (#88824 9463)		2.01	
	Total		\$30.71	

Other Rogers services available to you

- **Magazines**
- O Messaging services
- O Long distance services

Invoice date February 05, 2005

Your account number

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

Your invoice number 1012494425

Any payments we received and processed after February 06, 2005 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

How to pay your Rogers Bill:

There are several convenient ways to pay your Rogers bill. You can pay:

- online at www.rogers.com
 automatically by pre-authorized bank
- or credit card payment
- by cheque and mailing to:
 Rogers

PO Box 9100 Don Mills, ON M3C 3P9

- at most banks

O ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

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

Your account number:

Total amount due :

\$30.71

My TELUS Statement
M MATHESON
Account Number
TELUS Account ID

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

Bill Date: Feb 20, 2005

Due Date: Mar 10, 2005

View History

Current Month

Summary of my account	Usage Reports Download/Print Help
Previous charges and credits	
Amount of your last bill	\$159.40
Payment we processed on Feb 06	-159.40
Amount overdue from your last bill	\$0.00
New Charges	
Monthly Local Services (including rental equipment if applicable)	\$31.81
Additional Charges and Credits	39.48 Internet
Directory Assistance	2,25
Alternate Service Billing	4.15
GST (Registration 100652692) at 7%	5.41
Total new charges	\$83.10
Total amount owing	\$83.10

BOARD EXPENSE FORM

4.4		•	
NA	ME:	AIRI MATICSON	
FO	R THE MONTH OF:	ébuan sons	
** 		1000	s.17(1), 17(4)(g)(i)
•	E	XPENSES ENTI	ERED MAR 10 2005
			01-71110300002
AIR	FARE:	\$	
CAI	RENTAL:	\$	
AC	OMMODATION:	\$	
ME	LS: Wellness Commt.	2 _{\$_54.83}	(2)10000
PAF	KING:	\$	62210000
TAX	Is:	\$	
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91	ET Cesticate	Z <u>\$ 100.00</u>	69500000
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	AGE:	R\$	62210000
TOTA	L EXPENSES:	<u>\$ 201.95</u>	•

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calgary	health region		MC Southport GH Other	LO	CAL TRAVE	EL EXPENSE CLAIM	
Paym Calga ORIG Amo	ent will be ry Health F INAL REC unts und	EIPTS MUST BE AT er \$ 100.00 can be	your payroll bank according to your he TACHED FOR PARK reimbursed from s	ome address if a	valid E-Mail add	dress does not exist.	
EMPLOY	MAIRI MATHESON						
DEPARTN	ENT Somo	•	PHONE NUMBER 403 344 4	10 C	DATE	20, 200 (
DATE OF EXP	TRAVEL/ NSE		DETAILS		OF KM RAT (for mileage)		
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EMPLOYEE	SIGNATURE				PAYABLE TO EMPLOYEE		
AUTHORIZA	TION 1, 1	forta	AUTHORIZER EMPLO	YEE NUMBER	•	PHONE NUMBER	
00073	m. N				<u></u>		

DISTRIBUTION: 7WHITE-ACCOUNTS PAYABLE

WELLINGTONS/OSCARS

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

Server: Denis

Date: 02/09/20

05

Table: 10

Time: 13:21

VISA

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

MATHESON/MAIRI

AUTH

036395

ONLINE

9999 MERCHANT#

SUBTOTAL \$ 44.83

TIP \$ /0.00

TOTAL \$ 54.83

Wellness meeting

** CUSTOMER COPY **

3 people mRichets F. Girard

m. mathern Chair

Wellington's/Oscar's Please pay server.

Thank-you.

INDIGO SIGNAL HILL

NUTIOU DIDINE CILL Indigo Store 278 ISTO Signal Fill Descre 8W Istigar, RE Tem 3P8 India Carradia For (420) Endresil India Carradia For (420) Endresil

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Sales for Customer #

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

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Design conditions Please note we cannot accept a retuin of the carrier of magazines or memopape to

Best Copy Possible

** CUSTOMER CORY **

INTERAC DIRECT PAYMENT
TRANSACTION RECORD 050204/14:03

INDIGO #279#

5570 SIGNAL HILL CT

CALGARY, AB

T3H 3P8 s.17(1), 17(4)(e.1)

CARD #

ACCOUNT TYPE: CHEQUING PURCHASE

TRAN RECORD #:5411

TOTAL \$219.53

(000 APPROVED

HUTH #160345

SEATH YOU

TERMINAL II 32473356 MERCHANI =, 00176109 GIVEX TRANSACTION RECORD 050204/14:02

CUSTOMER COPY

INDIGO #279#

5570 SIGNAL HILL CT

CALGARY AB

T3H3P8

GIVEX CERT. #: 27701977 CODE: 193895

OP ID: 4930

TRANS TYPE: GIVEX ACTIVATE

TRANS REF #: 409384

ACTIVATION AMOUNT

Bal ance

\$100.000

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100.

GIVEX TERMINAL ID: 17503

APPROVED (0)

CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAN	iE:		Mair	Matt	woon	
FOR	THE	MONTH OF	Mo	irch 20	05	.17(1), 17(4)(g)(i)
				ENSES original r	eceipts.)	
Date		Description		Amount	GST	Total
nac	hOS	Rogers Wirden			(4 31.78
Marc	2005	<i>j.</i>				33.1.2
naro	hOS	Telus. Jahren	<u>r</u>	<u> </u>		42.00
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Γ ΟΤ Α	\L EX	PENSES:				\$ 106.90
inan	cial c	ode: 01-71110300003 per Authorization:	3-6221000			
	4	oloyee Number:		Print Name:	as Del	ioste
		oggo radiibo.		Authorizer Phon	e Number (in full):	
	s.1′	7(1), 17(4)(g)(i)			110 110	

My TELUS Statement		Bill Date: Mar 20, 2005
M MATHESON Account Number TELUS Account ID	s.17(1), 17(4)(g)(i)	View History Current Month
Summary of my account		Usage Reports Download/Print Help
Previous charges and credits		
Amount of your last bill		\$83.10
Payment we processed on Mar 09		-83.10
Amount overdue from your last bill		\$0.00
New Charges		
Monthly Local Services (including rental e	quipment if applicable)	\$0.00
Bundles, Packages and Contracts		
Additional Charges and Credits		95.49 \ ludes .nlm ut -18.80 9.74 \ m
Long Distance Charges		9.74 (m)
GST (Registration 100652692) at 7%		6.03
Total new charges		\$92.46
Total amount owing		\$92.46



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

MS MARTHESON S. 17(1), 17(4)(g)(i) Invoice number: 1012494444

G Balance from your last bill

Amount of your last bill \$33.12

Payment received - thank you March 19, 2004 credit of 33.12

Balance from your last bill \$0.00

Any payments we received and processed after April 06, 2004 will show on your next bill.

Page 3 of 5 April 05, 2004

Contact us

Visit www.rogers.com

Call Customer Service at

1-877-764-3772

*811

Fax Customer Service at

1-800-709-9992

To sign up for new Rogers services

Visit www.rogers.com Call 1-800-imagine

ROGERS MS MARI MATHESON

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

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

Account number

1012494444

Page 4 of 5 April 05, 2004

Wireless services

Your new charges for	s.17(1), 17(4)(g)(i)	
Rogers Wireless 100 Plan Fee (Apr 06/04 to	May 05/04)	\$20.00
911 Emergency Svc Access Fee (Apr 06/04 to	o May 05/04)	0.25
System Access Fee (Apr 06/04 to May 05/04))	6.95
Directory Assistance		2.50
Net Wireless charges		\$29.70
G.S.T. (#88824 9463)		2.08
Your total new charges		\$31.78
Summary of airtime charges end	ing Apr 05/04	
	You used (min:sec)	Total cost(\$)
100 Anytime Inclusive Minutes	48:32	0.00
Total airtime charges	48:32	\$0.00

Did you know? You can perform a variety of account and service related changes online at www.rogers.com

You can:

- change your address/phone number or confirm that your address change request has been processed
- change your method of bill payment subscribe to a pre-authorized

payment plan our online self-service centre is available 24/7 - so register now!

CALGARY HEALTH REGION

BOARD EXPENSE FORM

NAM	IE:	MAIRI	MATHESON	\checkmark	
FOR	THE MONTH OF:	MAR			7(4)(g)(i)
		EXPI	ENSES	ENTERED	APR 1 3 2005
AIRF	ARE: BUS FA	RE	\$ C 98.00		10300002
CAR	RENTAL:		\$		<u> </u>
	OMMODATION: See		\$ 202.07	W 633	1200C
MEAL PARK	S: Who Jacombe Di (ING: Westm Italia	nner Caljan 1	\$ \$_14.00	<u> </u>	10000
	S: - Westin Itore	Ø	\$ 10.00		200C
	R (please describe):		_ 160.33		
	Jestinftotel Jestin Itotel		\$ (41.74)) ,07.	
MILEA (Attach L	AGE: 140 km	at .38¢ /km (\$\$ \$53,>©	6221	1000
TOTA	L EXPENSES:		\$ <u>391.26</u> 377.27		
	62210 - 281.34 -28.73 62210 - 53.10 14.00.				Coste
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Payment	t will be	Directly Depo	sited to yr	our payroll bank acco	ount Notifics	-tion (-£ Janaaii	41 F - 1	=
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DEPARTMEN	IT.			PHONE MIMPER		!			
	Boa	٨٦] '	PHONE NUMBER		_ /	DATE		
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WHITE-ACCOUNTS PAYABLE

DISTRIBUTION:

00073



10135 10 0th Street * Edmonton, AB CAN T5J 0N7 * Ph (780)426-3636 Fax (780)428-1454 Ms. Mairi Matheson

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

Arrival 03/14/05 Departure 03/15/05 Payment Method CA

Room 1005
Cashier 34
Page 1
Starwood Pref.#

Starwood Pref.# Airline Partner Folio No.

** INFORMATION **

The Westin Edmonton, 03/14/05

Date	Descri	iption		Room	Charges	Credits
03/14	Debit	Card		1005		174.32
,			Total			174.32
			Balance		***************************************	-174.32
Room F&B Other Total	GST GST GST GST	0.00 0.00 0.00 0.00				
GST Ve	ndor	R101577591				



10135 10 0th Street * Edmonton, AB CAN T5J 0N7 * Ph (780)426-3636 Fax (780)428-1454 Ms. Mairi Matheson

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

Arrival 03/14/05 Departure 03/15/05 Payment Method CA

Room 1005
Cashier 38
Page 1
Starwood Pref.#

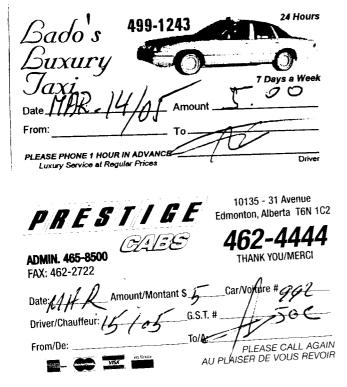
Airline Partner Folio No.

** INFORMATION **

The Westin Edmonton, 03/15/05

Date	Description	Room	Charges	Credits
03/14	Room Charge	1005	111.00	
03/14	Room Tax 5%	1003	5.55	
03/14	Room GST 7%		(7.77)	
03/14 ' 03/14	Tel-Local Calls #100	5 :	1.49	
03/14 .	Tel-Long Distance ->#1005 :		7.91	
03/14 .	Service Express			
03/11	->#1005 : CHECK #3	200	51.04	
03/14	- 11003 : CHECK #3		/	•
		s.17(1), 17(4)(g)(i)	(13.99)	,
03/14	Debit Card			
03/15	Tel-Local Calls #1009	ō :	1.49	174.32
03/15	Tel-Long Distance		6.33	
02/15	->#1005 :		0.55	
03/15	Tel-Long Distance		9.49	
03/15	->#1005 : Debit Card			
03/13	->auth #150820	3737 /3777		41.74
	7ddc11 #130820	XX/XX		
		Total	216.06	216.06
		Balance	0.00 \$	
Room	GST 7.77			
F&B	GST 3.57			
Other				
	A			
Total	GST 14.19			





APPLICANT CORVESTIN EDMONTON
10135 100TH STREET
EDMONTON AB

00 APPROVED 001 THANK YOU AUTH. # 150820

THE WESTIN EDMONTON 10135 100TH STREET EDMONTON AB

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

ACCOUNT TYPE CHEQUING

DATE/TIME 2005/03/14 17:42:48

RECEIPT NUMBER S47000963-897-003

PURCHASE \$174.32

00 APPROVED 001

AUTH. # 194309

THANK YOU

MATHESON/MAIRI C-E 03/14 2p E-C 03/15 2p

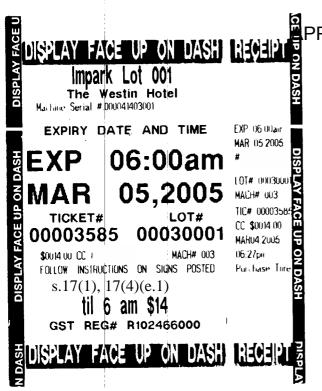
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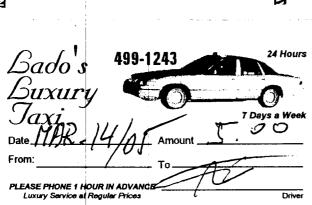
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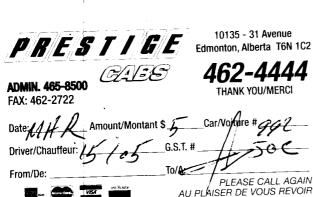
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CARDHOLDER WILL PAY TOTAL AND 10WN TO CARD 19SUER ACCORDING TO CARDHOLDER AGREEMENT.

CARDHOLDER SIGNATURE







PPLICANT COPTHE WEST IN EDMONTON

10135 100TH STREET

EDMONTON AB

00 APPROVED 001 AUTH. # 150820 THANK YOU

THE WESTIN EDMONTON 10135 100TH STREET EDMONTON AB s.17(1), 17(4)(e.1)

CARD NUMBER
ACCOUNT TYPE CHEQUING
DATE/TIME 2005/03/14 17:42:48
RECEIPT NUMBER S47000963-897-003
PURCHASE TOTAL AMOUNT \$174.32

00 APPROVED 001 AUTH. # 194309 THANK YOU

MATHESON/MAIRI C-E 03/14 2p E-C 03/15 2p

01 APPROVED 027 AUTH. # 077216 THANK YOU

CARDHOLDER WILL PAY TOTAL AN HOWN TO CARD ISSUER ACCORDING TO CARDHOLDER AGREEMENT.

CARDHOLDER SIGNATURE

	ITINERARY/RECEIPT	T Passenger: MATHESON/MAIRI	
		Original Date: Mar 14/05 2:00pm	E C.
Item From To CALEDM CAL TICKET OFF EDM TICKET EDMCAL EDM TICKET OFF CAL TICKET	Date/Time KET OFF Mar 14/05 KET OFF Mar 15/05	are : axes :	9.4
		Total : 9	98.02
		Receipt: 9	8 . 00
Issued: Mar 15/05 at Red Arrow	5	a la	0.02
Ref: 00168028 P43652 E00032	GST#:R101410017		
	COUPON NO. MAI 1978AF /C	Passenger: MATHESON/MAIRI	
	-1 -3 -3 -3	Pts:2840	
1-800-232-1958 THE 2 OR 531-0350 CAI	E 2004 NLL CHAMPIONS CALGARY ROUGHNECKS HOST SAN JOSE STEALTH	Mar 14/05 2:00pm	E E
: FRIDAY, MARCH	18 - PENGROWTH SAD	SADDLEDOME	
RED ARROW, THE OFF: CALGARY ROUGHNECK	OFFICIAL TRANSPORTATION NECK FANS IN EDMONTON AN	ION PROVIDER OF AND RED DEER!	
GET YOUR PEXCLUSIVE TO PRICE WILL INCLUDE T	PREMIUM ALL-STAR PACKAGE) RED ARROW PASSENGERS ONLY! TRANSPORTATION AND GAME DAY	ACKAGE SRS ONLY! GAME DAY TICKET	

CALGARY HEALTH REGION BOARD EXPENSE FORM

	NAM	E:		MAIR	11	MATHESON	
	FOR	THE MC	NTH OF:	Prric,	M	ing, June	200 ≤ s.17(1), 17(4)(g)(i
				EXP	ENS	SES	
							01-71110300002
	AIRF	ARE:			\$		
	CAR	RENTAL	•		\$		
	ACC	OMMOD	ATION:		\$		
	MEAI	S: /	lecupts	a Hacled	\$	32.51	62210000 "
	PAR	(ING: /	recepts	attacked	\$	89.00	62210000
	TAXI	s: 111	upt a H	octed. TO Bus	\$ <u> </u>	5.00	62210000 -
٥		1	e describe)				
jellien.	1. PAK			June 14 Buyert Ceptie			62210000
new	Bu	5 Tryp	to Eam	In & Retur	\\$_	86.00	62212000 K
	For	mechy	i Dre. B	ic Health Can	·)\$		
	MILE. (Attach I	AGE: ocal Travel I	kr xpense Claim for	m at .40.5¢ /km	\$	229.23	(2010000
	TOTA	L EXPE	NSES:		\$	45B.74 FROM 1970 7	1 4 2 0 0 5
	X:\BOAR	D\Honoraria\I	Ionoraria Forms.DC	PC Revised: Mare	ch 2005		1. O. Costosi 4.50 Z

ı **y** APPLICANT COPY calgary health region **ACH** LOCAL TRAVEL EXPENSE CLAIM FMC Southport PLC **RGH** Other_ **MILEAGE & PARKING INSTRUCTIONS:** Payment will be Directly Deposited to your payroll 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 does not exist. ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. **EMPLOYEE NUMBER** AIRI) *DITHES* DEPARTMENT PHONE NUMBER DATE DATE OF TRAVEL # OF KM RATE EXPENSE **DETAILS** (for mileage) **AMOUNT** South Rot & RTN C Soke 10 Okm 16 Km 48 Km 40km 20km 10 10 John 566 **CODING & AUTHORIZATION** ORG FUNCTIONAL CENTRE ACCOUNT **GL DESCRIPTION**

ORG FUNCTIONAL CENTRE ACCOUNT GL DESCRIPTION AMOUNT (Including GST)

6 2 2 1 0 0 0 MILEAGE/PARKING

EMPLOYEE SIGNATURE

AUTHORIZATION

AUTHORIZER EMPLOYEE NUMBER

AUTHORIZER PHONE NUMBER

O0073

WHITE-ACCOUNTS PAYABLE

X:Board/Honoraria/Local Travel Expense Claim

DISTRIBUTION:

Best Copy Possible

10141 A DEST

PRINT NAME

SIGNATURE NOT A CREDIT CARD VOUCHER

CASH \$15.34

TO ORDER
YOUR VEHICLE

Fairmont
PALLISER

Please Dial 4 MAY 05 700 (allow 20) minutes advance notice to retrieve vehicle)
• DO NOT LEAVE VALUABLES IN CAR •

10\$

Nō

1586

SEE REVERSE FOR CONDITIONS

70m

*********** DATE 4/01/05 CHECK # 87960 TIME 6:14PM TABLE # 11 Cafe : Anna **AMOUNT** ITEMS ORDERED 1 P.R. BUFFET SNR 13.95 1 SOFT DRINK 2.10 ************************************** SUBTOTAL 16.05 **GST** 1.12 TOTAL DUE 17.17 ***GRATUITY NOT INCLUDED*** G.S.T. # 10103 5467 RT0020 TIP_ TOTAL____ ROOM NUMBER PRINT NAME SIGNATURE_ Thank You For Joining Us At The Coast Edmonton Plaza Hotel

Thank You for choosing

(780) 423-4811

ASSOCIATED CAB for all your transportation needs.

Visit our counter at the Calgary International Airport international arrival door.

_Date __\

ASSOCIATED CAR

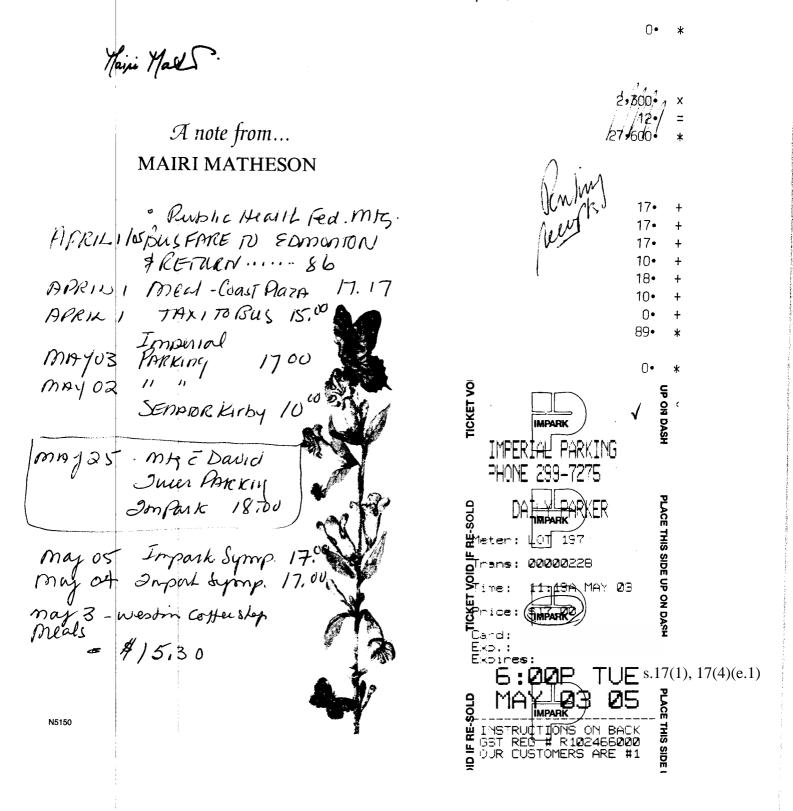
GST Included #

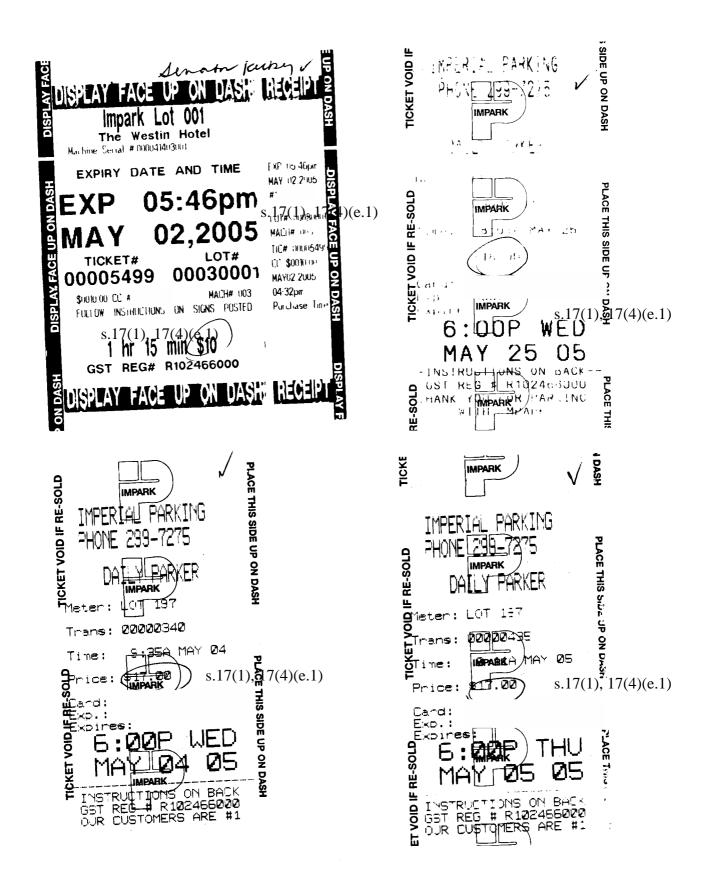
Car#_

GST#

I attended a meeting with the Minister of Health & Wellness at McDougall Center on July 14, 2005. The machine did not return a receipt but I paid \$7.00

I confirm I did attend this meeting and the cost was \$7.00.





ITINERARY/RECEIPT

MATHESON/MAIRI Passenger:

No: 001209192/R

Original Date: Apr 1/05 8:3 8:30am

Item From To Date/Time CALEDM CAL TICKET OFF EDM TICKET OFF Apr 1/05 ECEXP EDM TICKET OFF CAL TICKET OFF Apr 1/05 Seat

8:30am 08C Fare : 7:00pm 08C Taxes :

5.62

Total: 86.00

Receipt: 86.00

1 1 1

0.00

Balance:

MATHESON/MAIRI Passenger:

APPLICANT COPY

Ref: 00174482 P43652 E00036

GST#:R101410017

'Issued: Mar 31/05 at Red Arrow

1-800-232-1958 OR 531-0350

FT Pts:5680 8:30am

Apr 1/05

THE 2004 NLL CHAMPIONS CALGARY ROUGHNECKS

No: 001209192/C

COUPON

THE ARISZONA STING

SUNDAY, APRIL 03 - PENGROWTH SADDLEDOME @ 1:00pm

RED ARROW, THE OFFICIAL TRANSPORTATION PROVIDER OF CALGARY ROUGHNECK FANS IN EDMONTON AND RED DEER!

Ref: 00174482 P43652 E00036 PRICE WILL INCLUDE TRANSPORTATION AND GAME DAY TICKET EXCLUSIVE TO RED ARROW PASSENGERS ONLY! GET YOUR PREMIUM ALL-STAR PACKAGE

matheren/mairi

RED ARROW EXPRESS C-E
205 9TH AVE S. ESC(101/05 AB 8: 30 CALGARY

CARD NUMBER

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

EXPIRY DATE

CARD TYPE

VISA

DATE/TIME

2005/03/28 18:10:5

INVOICE NUMBER

11182

120054562 281 **021**

PURCHASE

\$86.00

TOTAL AMOUNT

01 APPROVED 027

AUTH. # 033712

THANK YOU

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

CARDHOLDER SIGNATURE

CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME:		iri Mad	hon.	-	
FOR THE		PENSES original re		s.17(1), 17(4)(g)((i)
Date	Description	Amount	GST	Total	
aprie	Rojers Bres	32.05		32.DS	
may	,, ,	30.71		30.71	
Jun	Rozus Bills	27.45	1.92	29.37	
Opil	Julia Frank	4163		41.63	
may	Jeles Internet	41.63		41.63	
Financial	XPENSES: PROCESSED 0 code: 01-71110300003-62210 fficer Authorization:		0.5	\$ 175.39 R	

Financial code: 01-71110300003-62210001

Expenditure Officer Authorization:

Print Name:

Authorizer's Employee Number:

Authorizer Phone Number (in full):

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

X:Board/Honoraria/Supplementary Expenses Claim Form

TELUS'

MAIRI MATHESON - account number:

log out

 $\frac{s.17(1),\,17(4)(g)(i)}{\text{currently viewing: mathesom (view another account)}}$

manage services

any account

contact info

payment method

account usage

view bill

member referral

Tift gig et trees ti

TELUS®

Mr. MAIRI MATHESON

TELUS Communications Inc. P.O. Box 3660 Stn Terminal Vancouver, BC V6B 3Y8 Canada

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

Bill Date **Bill Number** Apr 25 2005 B1-268182025 Internet Account Number

Due Date Apr 30 2005

Amount Due Can\$ 41.63

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

This statement is for your records only.

Payment will be made via your regular payment method for Internet services.

Summary of your account	
Balances	Total
Previous Balance:	Total
Current Balance:	0.00
	41.63
Total Balance Due:	41.63

Summary of new charges		
Description	Item No.	Total
Accounts/Receivable Items	140,1	Total
Webspace Monthly Fee	B1-268182025,5	0.00
TELUS Internet Security	B1-268182025,7	3.95
Usage	B1-268182025,1	0.00
Usage	B1-268182025,2	0.00
Dial-Up Access Monthly Fee	B1-268182025,4	0.00
Email Monthly Fee	B1-268182025,3	0.00
High Speed Access Monthly Fee	B1-268182025,6	34.95
Free Dial-Up Usage	B1-268182025,4	0.00
GST Registration 100652692	B1-268182025,8	2.73
Other Items	_ : : _ : _ : _ : _ : _ : _ : _ : _	2.73
Payment	P1-25895428	-41.63

Additional charges and credits				
Start Date and Time	End Date and Time	Quantity	Rate Description	Total
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	Bundled 10 MB Webspace	
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	Bundled TELUS Anti-Virus	0.00 0.00
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	Add-on TELUS Firewall	3.95
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	Bundled Email	0.00
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	POP 15MB	0.00
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	Velocity ADSL	42.95
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	Long Distance Loyalty Discount	-3.00
Apr 25 12:00:00 AM	May 24 11:59:59 PM	1	QuickConnect Velocity ADSL Discount	
Apr 25 12:00:00 AM	Apr 25 12:00:00 AM	0	GST Registration 100652692	-5.00 2.73

<sup>For Internal Use Only.
Note: For Details regarding Usage or Roaming, please logon to Your Account for more information. Details are available on-line for the previous 4 months.</sup>

Customer Accounts & Billing Inquiries

Online:

You may also contact us online using the contact us form.

How to read your online statement

Phone:

Alberta Customers:

310-4638 (Toll free in AB)

1-877-310-4638 (Can/US)

B.C. Customers:

310-4638 (Toll free in BC)

1-877-310-4638 (Can/US)

Ontario Customers:

1-866-468-3587 (Can/US)

Credits on account are non-transferable and not redeemable for cash.

Please print or save this statement if you require a copy for your records or tax purposes.

· TELUS is not responsible for reproducing statements.

Select a date from the menu below and click the "View Statement" button to display the statement.

May 25, 2005 view selected statement

send statement to

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

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TELUS'

TELUS

MAIRI MATHESON . account number:

log out

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

currently viewing: mathesom (view another account)

manage services

niv account

contact info

payment method

account usage

view bill

member referral

on the great terms

TELUS®

Mr. MAIRI MATHESON

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

TELUS Communications Inc. P.O. Box 3660 Stn Terminal Vancouver, BC V6B 3Y8 Canada

Bill Date May 25 2005 Bill Number B1-269771023

Internet Account Number

Due Date May 30 2005

Amount Due Can\$ 41.63

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

This statement is for your records only.

Payment will be made via your regular payment method for Internet services.

Summary of your account	
Balances	Takal
Previous Balance:	Total
Current Balance:	0.00
Total Balance Due:	41.63
. otal Dalatios Bus,	41.63

Summary of new charges		
Description	Item No.	
Accounts/Receivable Items	ttom 140.	Tota
Webspace Monthly Fee	B1-269771023,3	0.00
TELUS Internet Security	B1-269771023,5	3.95
Usage	B1-269771023,8	0.00
Usage	B1-269771023,7	0.00
Dial-Up Access Monthly Fee	B1-269771023,2	0.00
Email Monthly Fee	B1-269771023,1	0.00
High Speed Access Monthly Fee	B1-269771023,4	34.95
Free Dial-Up Usage	B1-269771023,2	0.00
GST Registration 100652692	B1-269771023.6	2.73
Other Items		2.13
Payment	P1-26829930	-41.63

Start Date and Time	End Date and Time	Quantity	Rate Description	Takal
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	Bundled 10 MB Webspace	Total
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	Add-on TELUS Firewall	0.00
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	Bundled TELUS Anti-Virus	3.95 0.00
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	Bundled Email	0.00
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	POP 15MB	0.00
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	Velocity ADSL	42.95
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	QuickConnect Velocity ADSL Discount	-5.00
May 25 12:00:00 AM	Jun 24 11:59:59 PM	1	Long Distance Loyalty Discount	-3.00
May 25 12:00:00 AM	May 25 12:00:00 AM	0	GST Registration 100652692	-3.00 2.73

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Ontario Customers: 1-866-468-3587 (Can/US)

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Please print or save this statement if you require a copy for your records or tax purposes.

- TELUS is not responsible for reproducing statements.

Select a date from the menu below and click the "View Statement" button to display the statement.

Apr. 25, 2005

view selected statement

send statement to

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

other TELUS sites | contact us | sitemap | frequently asked questions | security | terms & conditions | privacy

TELUS.



Your Rogers statement

MS MAIRI MATHESON

Total ar	nount du	е		\$29.37	
Debited fro	om your acco	ount on or after		June 19, 2005	
_	ry of you	r charges			Details on page
Bala	nce from y	our last bill	(including taxes)	\$0.00	3
Wire	less servic	æs		27.45	5
Tota	l before t	tax		27.45	
G.S.	Г. (#88824	9463)		1.92	
Tota	!			\$29.37	

- O Magazines
- O Messaging services
- O Long distance services

Other Rogers services available to you

O ROGERS"

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

Invoice date

June 05, 2005

Your account number

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

Your invoice number

1012494465

Any payments we received and processed after June 06, 2005 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers

PO Box 9100

Don Mills, ON

M3C 3P9

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

Your account number:

Total amount due:

\$29.37

Previous bill for account:

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

	5.1	. / (+ /, + / () / (5/\ 1 /
Account	Bill amount	Due date	Bill period ending
1-0124-9449	\$ 30.71	05/19/2005	05/05/2005
1-0124-9449	\$ 32.05	04/19/2005	04/05/2005
1-0124-9449	\$ 81.01	03/19/2005	03/05/2005 🗸
1-0124-9449	\$ 30.71	02/19/2005	02/05/2005 🗸
1-0124-9449	\$ 29.37	01/19/2005	01/05/2005

back

https://secure6.billerweb.com/rog/inetSrv?txtype=TPgetPreviousBillList2TransProc&sessi... 6/10/2005

CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

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

NAM		MgiRI	MATHESON	
			BER / October	7 Z005
* Sou! P	lease acld lychange e.g	67.76 EXPEN S	SES ENTERED	NOV 17 20 05
	(PI	ease attach orig	ginal receipts.)	

Date		Description	Amount	GST	Total
any	120	Teles incernet 2			67.76
Sep	e Zo	Teles internet ?			67.76
Ocr	20	Telus continuet ?	67.76		67.76
gue	119	Rojus all Those ?	35:26		35.26
ay	19	Rojors Cell Phone ?	41.14		41.14
Sep	<i>†19</i>	Popus Cell Phone ?	32.58		32.58
Oet	19	Rojers Cell Phone	29.37		29.37
July	20	Telus Internet 4	67.76		67.76

TOTAL EXPENSES:

\$ 409.39

Financial code: 01-71110300003-6221000	1
Expenditure Officer Authorization:	Print Name:
Authorizer's Employee Number:	Lou De Coste
The state of the s	Authorizer Phone Number (in full):
	943-1122
s.17(1), 17(4)(g)(i)	



Your Rogers statement

MS MAIRI MATHESON

Total amount due \$29.37

Debited from your account on or after October 19, 2005

Summary of your charges
Balance from your last bill (including taxes) \$0.00 3

Wireless services 27.45 4

Total before tax 27.45

G.S.T. (#86239 5381) 1.92

FREE GIFTS & SPECIAL OFFERS JUST FOR YOU!

Visit rogers.com/thankyou for exclusive customer rewards.

Invoice date

October 05, 2005

Your account number

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

Your invoice number

10124944A5

Any payments we received and processed after October 06, 2005 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

O ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

\$29.37

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

01249449101249449051007000002937000000000000000000000000

Your account number :

Total amount due :

\$29.37

Previous bill for account:

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

Account 1-0124-94 1-0124-94 1-0124-94 1-0124-94	49 49 49 49	\$ 32.58 \$ 41.14 \$ 35.26 \$ 29.37 \$ 30.71	Due date 09/19/2005 08/19/2005 07/19/2005 06/19/2005	Bill period ending 09/05/2005 08/05/2005 07/05/2005 06/05/2005
1-0124-94	49	\$ 30.71	05/19/2005	05/05/2005
1-0124-94	49	\$ 32.05	04/19/2005	04/05/2005
			·	04/03/2003

back

https://secure6.billerweb.com/rog/inetSrv?txtype=TPgetPreviousBillList2TransProc&ses... 10/23/2005

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

My TELUS Statement

M MATHESON **Account Number TELUS Account ID** Bill Date: Aug 20, 2005 Due Date: Sep 10, 2005

View History

Aug 20, 2005 ▼

New Charges

Summary Statement Download/Print Usage Reports Help

Bundles, Packages and Contracts Return to Top

Smart Internet Bundle - exclusive to Long Distance customers

67.76

\$67.76

Total Bundles, Packages and Contracts

Explanation of Call Types: 0 - Customer Dialled Call

1 - Operator Assisted Call 2 - 3rd Number Call

3 - Calling Card Call 4 - Collect Call 5 - Toll-Free Call

8 - Operator Assisted Dial Rate Applied 9 - Customer Dialed Operator Assisted Rate

B - Station Night Call C - Person Night Call K - Station Day Call L - Person Day Call S - Station Evening Call T - Person Evening Call

My TELUS Statement

M MATHESON **Account Number TELUS Account ID**

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

View History Sep 20, 2005 ▼

New Charges

Summary Statement Download/Print Usage Reports Help

Bundles, Packages and Contracts Return to Top

Smart Internet Bundle - exclusive to Long Distance customers

67.76

Total Bundles, Packages and Contracts

\$67.76

Explanation of Call Types: 0 - Customer Dialled Call 1 - Operator Assisted Call

- 2 3rd Number Call
- 3 Calling Card Call
- 4 Collect Call
- 5 Toll-Free Call
- 8 Operator Assisted Dial Rate Applied
- 9 Customer Dialed Operator Assisted Rate

- B Station Night Call
- C Person Night Call
 K Station Day Call
 L Person Day Call
 S Station Evening Call

- T Person Evening Call

67.76

My TELUS Statement Bill Date: Oct 20, 2005 Due Date: Nov 10, 2005

M MATHESON s.17(1), 17(4)(g)(i)**View History Account Number TELUS Account ID** Current Month ▼

New Charges Summary Statement Download/Print Usage Reports Help

Bundles, Packages and Contracts Return to Top

Smart Internet Bundle - exclusive to Long Distance customers

Total Bundles, Packages and Contracts \$67.76

5 - Toll-Free Call

Explanation of Call Types: 0 - Customer Dialled Call 1 - Operator Assisted Call B - Station Night Call C - Person Night Call K - Station Day Call L - Person Day Call S - Station Evening Call T - Person Evening Call 2 - 3rd Number Call 3 - Calling Card Call 4 - Collect Call

8 - Operator Assisted Dial Rate Applied 9 - Customer Dialed Operator Assisted Rate

CALGARY HEALTH REGION

BOARD EXPENSE FORM

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

NAM	E:	NTHOF: October 2005	
FOR	THE MO	NTH OF: October 2005	
		EXPENSES	RED NOV 172005
			01-71110300002
AIRF	ARE:	\$	
CAR	RENTAL:	\$	
ACCC	MMODA		
MEAL	S:	\$	
PARK	ING:	\$	
TAXIS	:	\$	
OTHE	R (please	e describe):	
		 \$	
		\$	
		() c	
MILEA (Attach Lo	GE:(cal Travel Ex	E km at .40.5¢ /km \$ 46.44 pense Claim form)	
	EXPEN		
			4 Delosto

X:\BOARD\Honoraria\Honoraria Forms.DOC

Revised: March 2005

APPLICANT COPY calgary health region **ACH** FMC **LOCAL TRAVEL EXPENSE CLAIM** Southport **PLC** RGH Other_ **MILEAGE & PARKING** INSTRUCTIONS: Payment will be Directly Deposited to your payroll 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 does not exist. ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. **EMPLOYEE NAME (Print) EMPLOYEE NUMBER** Mather Main DEPARTMENT PHONE NUMBER DATE Board Hr DATE OF TRAVEL # OF KM **EXPENSE** RATE **DETAILS** (for mileage) **AMOUNT** CIMHA & RTN OCT OS 19 km SouthPart & KT o)u OCT 17 Zolu OCI 24 Octas OCT 26

108 **CODING & AUTHORIZATION** ORG FUNCTIONAL CENTRE ACCOUNT **GL DESCRIPTION AMOUNT** (Including GST) 2 1 0 0 0 0 MILEAGE/PARKING EMPLOYEE SIGNATURE **TOTAL PAYABLE TO** Ceui **EMPLOYEE** AUTHORIZATION AUTHORIZER EMPLOYEE NUMBER **AUTHORIZER PHONE NUMBER** 17(1), 17(4)(g)(i) 00073

DISTRIBUTION:

WHITE-ACCOUNTS PAYABLE

X:Board/Honoraria/Local Travel Expense Claim

BOARD EXPENSE FORM

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

	NAME: FOR THE MON		in Matheso / October	2005
		E	XPENSES ENTE	CED NOV 1 7 2455 01-71110300002
	AIRFARE:		\$	
	CAR RENTAL:		\$	
	ACCOMMODA	TION:	\$	· · · · · · · · · · · · · · · · · · ·
	MEALS:		_ \$	
	PARKING: -	ranked @ heter for on moved with ord sept 29 2001 98	w. } \$ 8.00	62310000
1	TAXIS: (2)	Parkin Chronic Des Serot 28 or 9 e describe):		63310000
A.C.	ab to Cente	eur Sabone	L \$ 1200	_ 62210000
\succ	24,05	retur	\$	
	MILEAGE: \(\) (Attach Local Travel Ex	بری. از پری km at .38¢ /ki pense Claim form)	m \$ 67.23 _	63310000
	TOTAL EXPEN	ISES:	\$ <u>1</u> 05.23_	
				4. Delosto
	X:\BOARD\Orientatation	tiPackage for New Members Honomer	1. V 17 2775	D ' 1 I 02 0000

110

	APPLICA	NT COPY		
calgary health region	ACH FMC South; PLC RGH Other	port LO	CAL TRAVEL I	EXPENSE CLAIM
INSTRUCTIONS:	,			
- ORIGINAL REC	Directly Deposited to your payroll ban Region E-Mail address OR mailed to y CEIPTS MUST BE ATTACHED FOR I Ier \$ 100.00 can be reimbursed fr	Our nome address if a v	valid E-Mail addres	ss does not exist.
EMPLOYEE NAME (F			EMPLOYEE NUMB	
DEPARTMENT	PHONE NUMBER		DATE	
DATE OF TRAVEL/ EXPENSE	DETAILS	#	OF KM RATE (for mileage)	AMOUNT
ang 24	Southfort /R	AN # 10	em.	
July 14	n i	2	olem	
Sept	SouthPost/R	TN Z	o lan	
Sept 13	7 . 1 . 1 = = = 1		Okn	
Sept 15	5		.4 km	
Sen+27	Southfast / Rt	1	ku	
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AUTHORIZATION (s.17(1), 17(4 (g)(i)	MPLOYEE NUMBER	AUTHORIZER PHOI	1
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28 Sept 05

Chronic Disease Conf- Parking Chil Citendance Do Change.

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME:			Main	i Mad	1 /W D(7 U	
FOR THE	E MC	ONTH OF	Nos 05	Dec 05.	domo	s.17(1), 17(4)(g)(i)
		(Plea	EXP ase attach	ENSES original re	eceipts.)	
Date	D	escription		Amount	GST	Total
Jan 5	K	gers		29.37	7	-29.37
Dec. 5	1	Pogers	······································	.33.05	7	32.05
Nov. 20	1	Pogus		31.78	C	31.78
Dec 20	1	elus Bili		67.76,75	5.09 3	A.R. 78.13
Nov 20		11 /1		67 76,	5.047	77.33
—		include.	ely weight		B 10 2006	
TOTAL E	XPI	ENSES:	oly neight			\$ <u>248.66</u>
Financial	COC	e: 01-711103	300003-622100	001		
Expenditure (Officer	Authorization:		Print Name:	~ /	
Authorizer's E	Employ	vee Number:			the Number (in full): $ (3 - 1) ^{2}$	
		17(4)(g)(i) /Supplementary Exp	penses Claim Form	L	•	



Your Rogers statement

MS MAIRI MATHESON

Total amount due \$32.05

Debited from your account on or after December 20, 2005

Su	mmary of ye	our charges			Details
•					on page
9	Balance from	n your last bill	(including taxes)	\$0.00	3
	Wireless ser	vices		29.95	4
	Total befor	e tax		29.95	
	G.S.T. (#862	39 5381)		2.10	
	Total			\$32.05	

SEASONS GREETINGS FROM ROGERS WIRELESS!

Wishing you and your loved ones a safe and happy holiday season.

Invoice date

December 05, 2005

Your account number

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

Your invoice number

10124944C5

Any payments we received and processed after December 07, 2005 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

○ ROGERS[~]

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

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

Your account number:

Total amount due :

\$32.05



Your Rogers statement

MS MAIRI MATHESON

Total amount due

\$29.37

Debited from your account on or after

Summary of your charges

Balance from your last bill (including taxes)

Wireless services

Total before tax

G.S.T. (#86239 5381)

Total

\$29.37

Other Rogers services available to you

- Magazines
- O Messaging services
- O Long distance services

Invoice date

January 05, 2006

Your account number

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

Your invoice number

1012494416

Any payments we received and processed after January 07, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at
- rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

○ ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

24944910124944906010700000293700000000000000000000000

Your account number :

Total amount due :

\$29.37

Payment history

Display payment history for: 1-0124-9449 **▼** go

Items **1-10** of **33** s.17(1), 17(4)(g)(i)

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

Reference Number	Account Number	Transaction Date	Payment Amount	Paid By	Status
EXT-20396222052		12/20/2005	\$32.05	Bank debit ****	Payment Received
EXT-19823738052		11/20/2005	\$31.78	Bank debit ****	Payment Received
EXT-18637731052		09/19/2005	\$32.58	Bank debit ****	Payment Received
EXT-18092920052		08/19/2005	\$41.14	Bank debit ****	Payment Received
EXT-17501212052		07/19/2005	\$35.26	Bank debit ****	Payment Received
EXT-16871538052			17	Bank debit ****	Payment Received
EXT-16248289052	\sim	larinz,	'1	Bank debit ****	Payment Received
EXT-15625675052	,		15	Bank debit ****	Payment Received
EXT-15009645052		1 11	1	Bank debit ****	Payment Received
EXT-14425293052	20	ely Dill	1	Bank debit ****	Payment Received

Items 1-10 of 33

was missing

Next>

Submission four please check

Submission four please check

In October and promate payment

for nov & Sec. (35.26)

Jos This the July April

Agrical? Dhorter



TELUS e.Bill - p. 1 of 4 Bill Date: Nov 20, 2005

Account No:

My TELUS Statement

Nov 20, 2005

Manage my account online @: telus.com

Other inquiries @: telus.com/contactus

Customer Service

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

Bill Date: Nov 20, 2005 Due Date: Dec 10, 2005

M MATHESON

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

My Account No: My TELUS Account ID:

Total new charges:

\$77.33

Total amount owing:

\$77.33 due by Dec 10, 2005

Account Summary

Previous Charges and Credits

Amount of your last bill	\$77.33
Payment we processed on Nov 06 - Thank You	-77.33
Total amount overdue from your last bill	\$0.00

New Charges	
Bundles, Packages and Contracts	67.76
Additional Charges and Credits	4.53
G\$T (Registration 100652692) at 7%	5.04
Total new charges	\$77.33
Total amount owing	\$77.33



Current Charges Details

Total amount owing

TELUS e.Bill - p. 2 of 4
Bill Date: Nov 20, 2005
Account No:

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

\$77.33

Summary of Current Charges

Bundles, Packages and Contracts Smart Internet Bundle - exclusive to Long Distance customers 67.76 Total bundles, packages and contracts \$67.76 **Additional Charges and Credits** E9-1-1 Municipal Call Answer Fee Nov 19 0.44 E9-1-1 Provincial Network Fee Nov 19 0.14 **TELUS Internet Services** 3.95 Total additional charges and credits \$4.53 Taxes and government levies GST (Registration 100652692) at 7% 5.04 Total tax amount \$5.04 Total new charges \$77.33

B - Station Night Call
C - Person Night Call
K - Station Day Call
L - Person Day Call

S - Station Evening Call

T - Person Evening Call



TELUS e.Bill - p. 3 of 4 Bill Date: Nov 20, 2005

Account No:

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

the future is friendly.

Explanation of Call Types:

0 - Customer Dialled Call 1 - Operator Assisted Call

2 - 3rd Number Call 3 - Calling Card Call

4 - Collect Call

5 - Toll-Free Call

8 - Operator Assisted Dial Rate Applied9 - Customer Dialed Operator Assisted Rate

Smart Internet Bundle - exclusive to Long Distance customers

The Smart Internet Bundle combines your TELUS Internet service with your current Long Distance plan, and your choice of a Calling Feature Pack or your TELUS Mobility plan.

	-1 1 0 11		Quantity	You Pay
		Feature 3 Pack (from Nov 19 to Dec 18)		37.81
Res	idence Line Al	DSL	1	
	Display		1	
Higi	h Speed Acces	s Oct 25		34.95
				You Pay -5.00
Tot cus	al Smart Int tomers	ernet Bundle - exclusive to Long Distance		67.76



TELUS e.Bill - p. 4 of 4 Bill Date: Nov 20, 2005

Account No

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

TELUS Internet Services

TELUS Internet Services

TELUS Internet Security Oct 25 3.95

Total TELUS Internet Services 3.95



TELUS e.Bill - p. 1 of 5 Bill Date: Dec 20, 2005

Account No

My TELUS Statement

Dec 20, 2005

Manage my account online @: telus.com

Other inquiries @: telus.com/contactus

Customer Service

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

Bill Date: Dec 20, 2005 Due Date: Jan 10, 2006

M MATHESON

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

My Account No: My TELUS Account ID:

Total new charges:

\$78.13

Total amount owing:

\$78.13 due by Jan 10, 2006

Account Summary

Previous Charges and Credits

Amount of your last bill	\$77.33
Payment we processed on Dec 07 - Thank You	•
Thank Tou	-77.33
Total amount avaidus from the Little	
Total amount overdue from your last bill	\$0.00
New Charges	
new onarges	
Bundles, Packages and Contracts	27.70
Additional Charges and Credits	67.76
•	4.53
Directory Assistance	0.75
GST (Registration 100652692) at 7%	
(*************************************	5 09

Total new charges Total amount owing

\$78.13



Total amount owing

TELUS e.Bill - p. 2 of 5 Bill Date: Dec 20, 2005

Account No

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

\$78.13

Summary of Current Charges

Current Charges Details Bundles, Packages and Contracts Smart Internet Bundle - exclusive to Long Distance customers 67.76 Total bundles, packages and contracts \$67.76 **Additional Charges and Credits** E9 1-1 Municipal Call Answer Fee Dec 19 0.44 E9-1-1 Provincial Network Fee Dec 19 0.14 **TELUS Internet Services** 3.95 Total additional charges and credits \$4.53 **Directory Assistance Directory Assistance** 0.75 Total directory assistance \$0.75 Taxes and government levies GST (Registration 100652692) at 7% 5.09 Total tax amount \$5.09 Total new charges \$78.13

B - Station Night Call C - Person Night Call

K - Station Day Call

L - Person Day Call
S - Station Evening Call

T - Person Evening Call



TELUS e.Bill - p. 3 of 5 Bill Date: Dec 20, 2005

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

Explanation of Call Types:

0 - Customer Dialled Call 1 - Operator Assisted Call

2 - 3rd Number Call

3 - Calling Card Call

4 - Collect Call

5 - Toll-Free Call

8 - Operator Assisted Dial Rate Applied9 - Customer Dialed Operator Assisted Rate

Smart Internet Bundle - exclusive to Long Distance customers

The Smart Internet Bundle combines your TELUS Internet service with your current Long Distance plan, and your choice of a Calling Feature Pack or your TELUS Mobility plan.

	Quantity	You Pay
Local and Calling Feature 3 Pack (from Dec 19 to Jan 18)		37.81
Residence Line ADSL	1	
Call Display	1	
High Speed Access Nov 25		34.95
		You Pay -5.00
Total Smart Internet Bundle - exclusive to Long Distance		67.76

customers

TELUS'

TELUS e.Bill - p. 5 of 5 Bill Date: Dec 20, 2005

Account No:

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

Directory Assistance

#	Date & Time Place/Call From	Place/Call To	You Pay	Min	Reference	Туре
001	Fri Dec 16 08:25am	DIR ASST	0.75	2	(-	8K
То	tal Directory Assistance	s.17(1), 17(4)(g)(i)	0.75			



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TELUS e.Bill - p. 4 of 5 Bill Date: Dec 20, 2005

Account No:

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

TELUS Internet Services

TELUS Internet Services

TELUS Internet Security Nov 25 3.95

Total TELUS Internet Services 3.95

	BOARD EXI	PENSE FORM	s.17(1), 17(4)(g)(i)
NAME: FOR THE M	ONTH OF:	ri Marhisn , Decos, 4	Janob
	EXP	ENSES	
			01-71110300002
AIRFARE:		\$	
CAR RENTA	AL:	\$	
ACCOMMO	DATION:	\$	
MEALS:		\$_ENTERNA FIRE	7.00 0 ,
PARKING:		\$	
TAXIS:		\$	
OTHER (ple	ase describe):		
		\$	-
		\$	
		\$	
MILEAGE: (Attach Local Trave	348 km at .40.5¢ /km	\$ 149.64	62210000
TOTAL EXP	0	\$ 149,64	
			g. Deleste

X:\BOARD\Honoraria\Honoraria Forms.DOC

Revised: March 2005

		APPLICANT COPY							
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00073		DI	STRIBUTIO	N: WHITI	 ACCOUNT	S PAY			
ViDoomet/II I "				•••••		11			
X:Board/Honoraria/L	.ocal	ravel Expe	nse Claim						

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM FOR	E: THE MONTH OF		Main Matheson March / April 2006 8.17(1), 17(4)(g)(i)					
	(Ple	EXPI ase attach d	ENSES original r	eceipts	ENTERED MA	Y 18		
Date	Description		Amount	GST	Total			
MAK	is TELUS I	orerur	67.76					
PRI		mail	67.76		4 67.76 2 67.76			
212	M Main and		91 00		0			
MAI	Rosers	Nillar	34 99		34.99			
APR	Regas b	Joules	34.19	(2 34.19			
ОТА	L EXPENSES:							
	E LAI LINGES.				\$ 204.70) 		
nand	cial code: 01-711103	00003-62210001						
	ure Officer Authorization:		Print Name:	De C	nela			
thorize	r's Employee Number:		Authorizer Phone	Number (in ful	1):	_		
	<u> </u>			743-	1125			
	s.17(1), 17(4)(g)(i)			•				
:Board/I	Honoraria/Supplementary Expe	nses Claim Form						



Your Rogers statement

MS MAIRI MATHESON

Total amount due	\$34.99				
Debited from your account on or after	March 20, 2006				
Summary of your charges		Details			
Balance from your last bill (Including taxes)	\$0.00	on page 3			
Wireless services	32.70	4			
Total before tax	32.70				
G.S.T. (#86239 5381)	2.29				
Total	\$34.99				

Other Rogers services available to you

Magazines

Messaging services

Long distance services

Invoice date

March 05, 2006

Your account number

Your invoice number

1012494436

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

Any payments we received and processed after March 07, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at

rogers.com/onlinebilling

- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

O ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

Your account number :

Total amount due :

\$34.99



Your Rogers statement

MS MAIRI MATHESON

Total amount due \$34.19 Debited from your account on or after

Det	oited from your account on or after		April 20, 2006	
_	mmary of your charges			Details on page
9	Balance from your last bill	(including taxes)	\$0.00	3
0	Wireless services		31.95	4
	Total before tax		31.95	
	G.S.T. (#86239 5381)		2.24	
	Total		\$34.19	

Other Rogers services available to you

Magazines

Messaging services

Long distance services

Invoice date

April 05, 2006

Your account number

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

Your invoice number 1012494446

Any payments we received and

processed after April 07, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at
- rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

O ROGERS"

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

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

Your account number:

Total amount due:

\$34,19

TELUS Account	Summary
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Page 1 of 1

My TELUS Statement M MATHESON Account Number TELUS Account ID	
Summary of my account	Usage Reports Download/Print Help
Previous charges and credits	
Amount of your last bill	44.4
Payment we processed on Mar 09	\$94.97
Amount overdue from your last bill	-94.97
New Charges	\$0.00
Bundles, Packages and Contracts	\$67.76
Additional Charges and Credits	4.52
Directory Assistance	4.50
GST (Registration 812758878) at 7%	5.35
Total new charges	\$82.13
Total amount owing	\$82.13

Page 1 of 1

My TELUS Statement		Bill Date: Apr 20, 2006
M MATHESON Account Number TELUS Account ID	s.17(1), 17(4)(g)(i)	View Histo Current Month
Summary of my account		Usage Reports Download/Print He
Previous charges and credits		
Amount of your last bill		
Payment we processed on Apr 06		\$82.
Amount overdue from your last bill		-82.
New Charges		\$0.0
Bundles, Packages and Contracts		
Additional Charges and Credits		\$67.7
Directory Assistance		4.5
Long Distance Charges		10.5
GST (Registration 812758878) at 7%		106.3
Total new charges		13.2
		\$202.3
Total amount owing		\$202.3

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME	:	mn	17THES	ion	
FOR 1	THE MOI	NTH OF Lb	ruang	2006	s.17(1), 17(4)(g)(i)
			ENSES	E۱	ITERED MAY 18 2006
Date	Des	cription	Amount	GST	Total
				2.03	30.98
Ten let		Delus Intimit			00 10
		Email		2	67.76
TOTA	L EXPEN	ISES:			\$ 98.74
Financ	ial code:	01-71110300003-622100	001		
	10	este	Print Name:	ou De	Coste
Authorize	r's Employee	Number:		e Number (in full): $743 - 11$	>2
	s.17(1)	, 17(4)(g)(i)			
X:Board/	Honoraria/St	applementary Expenses Claim Form			



Your Rogers statement

MS MAIRI MATHESON

Total amount due \$30.98

Debited from your account on or after February 19, 2006

Summary of your charges
Balance from your last bill (including taxes) \$0.00 3

Wireless services 28.95

Total before tax 28.95

G.S.T. (#86239 5381) 2.03

Total \$30.98

Other Rogers services available to you

Magazines

Messaging services

Long distance services

Invoice date

February 05, 2006

Your account number

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

Your invoice number

1012494426

Any payments we received and processed after February 06, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at

rogers.com/onlinebilling

- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number :

Total amount due :

\$30.98

O ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

01249449101249449060207000003098000000000000000000000000

TELUS Account	Summary
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Page 1 of 1

My TELUS Statement	Bill Date : Feb 20, 2006 Due Date : Mar 10, 2006
M MATHESON Account Number TELUS Account ID	$ \begin{array}{c} \text{View History} \\ \text{s.}17(1), 17(4)(g)(i) \end{array} $ Feb 20, 2006
Summary of my account	Usage Reports Download/Print Help
Previous charges and credits	
Amount of your last bill	\$94.17
Payment we processed on Feb 06	
Amount overdue from your last bill	-94.17 \$0.00
New Charges	
Bundles, Packages and Contracts	\$67.70
Additional Charges and Credits	\$67.76
Directory Assistance	4.52
GST (Registration 100652692) at 7%	16.50
Total new charges	6.19
	\$94.97
Total amount owing	\$94.97

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calgary he	blth ragion		AF	PPLICANT	COPY	γ			
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X:Board/Honoraria/Local Travel Expense Claim

DISTRIBUTION:

WHITE-ACCOUNTS PAYABLE

BOARD EXPENSE FORM

NAME:	MATHESON	4
FOR THE MONTH OF:	MATHESON/ Lehnuary 2006	s.17(1), 17(4)(g)(i)
	ENTE EXPENSES	RED MAY 18 2006
AIRFARE:	\$	01-71110300002
CAR RENTAL:	**************************************	
ACCOMMODATION:	1428 118.77	62012000
MEALS: MSKUI I, PARKING: Calgory Co	NN R \$ 31.51	62212000
PARKING: Calgry (W TAXIS: \$/0.00 + OTHER (please describe)	10.00 Sent R \$ 10.00	00061669
OTHER (please describe)	18 8.00g ·	
	\$	
MILEAGE: 98 k (Attach Local Travel Expense Claim fo	m at .43¢ /km \$	62010000
TOTAL EXPENSES:	\$ 234.42	
		4. Reloste

X:\BOARD\Honoraria\Honoraria Forms.DOC Revised: October 2005

APPLICANT COPY calgary health region ACH **LOCAL TRAVEL EXPENSE CLAIM FMC** Southport PLC RGH **MILEAGE & PARKING** Other **INSTRUCTIONS:** Payment will be Directly Deposited to your payroll 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 does not exist. ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. **EMPLOYEE NUMBER** DEPARTMENT PHONE NUMBER DATE DATE OF TRAVEL # OF KM RATE EXPENSE **DETAILS AMOUNT** (for mileage) 30 Km 20Km Feb 28 RIN 98 **CODING & AUTHORIZATION**

FUNCTIONAL CENTRE

ORG

EMPLOYEE SIGNATURE

AUTHORIZATION

00073

FINANCIAL CODE

s.17(1), 17(4)

DISTRIBUTION:

ACCOUNT

2 2 1 0 0 0 0 MILEAGE/PARKING

WHITE-ACCOUNTS PAYABLE

AUTHORIZER EMPLOYEE NUMBER (g)(i)

GL DESCRIPTION

TOTAL PAYABLE TO

EMPLOYEE

AUTHORIZER PHONE NUMBER

943-1132

AMOUNT (Including GST)



Nisku Inn and Conference Centre 1101 - 4th Street Nisku, Alberta T9E 7N1 Tel. (780) 955 7744 Fax. (780) 955 7743 www.niskuinn.com

MAIRI MATHESON

Bill

2006005652

Date

2/25/2006

Room Arrival 179

2/24/2006

Departure

2/25/2006

 $s.17(1),\,17(4)(g)(i) \\$ Nisku Inn and Conference Centre, Edmonton

GST REG#: 102501764

1King nonsmk-JETTED TUB

Date	Description	Supplement	Qty.	Price	Amount
2/24/2006 Provincial Government s.17(1), 17(4)(g)(i)			1	107.00	107.00 13.99 ×
2/25/2006	Visa				-133.74
		s.17(1), 17(4)(e.1)		Sub total	120.99
				GST 7%	8.47
	ł			Room tax 4%	4.28
				Total	133.74
				Paid	133.74
				Balance	0.00

Thank you!

10700 1.49 (70%) 4.28 11877

Best Copy Possible

CALCANY OF RECEPT Terminal Parkade 667 排放。 电主定位符号设计分离 RECEIPT EMERY GATESTERS TELL SECTIONS (SECTIONS) 02.7 5706 19.20.17 \$ 32.70 TOTAL MULADUAT FEMORE OF STATE 1 437 4 6 7 MATERIAL OF PARMENTS 1 A 35 ANTONE AUTOMATICAL

| Y || E || L || D || W | 10135-31 Avenue Edmonton, AB T6N 1C2 462-3456 Date: 24 - LAMPING ant \$ \[\overline{D} \cdot \overline{O} \] Car/Voiture #_ Driver/Chauffeur: From/De: 1AP

> Nisku Inn Martinique

FRI The LANGE WAR CHECK #387563-6 **DUPLICATE**

COULDMER # 1

1 1/2 Unimach \$4,50 1 Brownell Salmer \$14.35 I Stone Bread of Le \$1.50 2 - 15 M H MERIOL \$8.50 SUB-TOTAL \$2.1,45 Gst #8102501764 \$2.05 TOTAL

Total.

Name(Process

Room:

Signature

Time: 20 4 E COMERS (ECC)

> Enjoy your day Base Pay Server

YOU HAVE THEN STRUEL BY . Jamie

HIGKU INN EDHONTON INTOL SIRPORT EDMONTON 42

CARD NUMBER s.17(1), 17(4)(e.1) EXPLEM DATE CARD TYPE W1SA DATE/TIME 3996 2004/02/35 12:25:40 CLERK NUMBER RECEIPT MITTHER **5**90595478-551-049 PURCHASE TOTAL AMOUNT \$133,74 01 APPROVED 627 AUTH, # 091999

THANK YOU

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

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME: M. Mathesm. FOR THE MONTH OF And 2006 s.17(1), 17(4)								
FOR	THE	МО	NTH OF		9	me a	006	s.17(1), 17(4)(g)(i)
			(PI	ease at		PENSES original re		ERED JUL 1 4 200
Date		De	scription			Amount	GST	Total
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~								
TOTAL EXPENSES: \$_\10\.34								
inancial code: 01-71110300003-62210001 Expenditure Officer Authorization: Print Name:								
	4		Number:			Print Name: Authorizer Phone	(oste
	s.17	'(1).	17(4)(g)(i)			1	143-11	22

X:Board/Honoraria/Supplementary Expenses Claim Form



Your Rogers statement

MS MAIRI MATHESON

Total amount due	\$32.58		
Debited from your account on or after	June 19, 2006		
Summary of your charges		Details on page	
Balance from your last bill (Including taxes)	\$0.00	3	
Wireless services	30.45	4	
Total before tax	30.45		
G.S.T. (#86239 5381)	2.13		
Total	\$32.58		

Other Rogers services available to you

Magazines

Long distance services

Messaging services

O ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

Invoice date

June 05, 2006

Your account number

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

Your invoice number 1012494466

1012494466

Any payments we received and processed after June 06, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at

rogers.com/onlinebilling

- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number :

Total amount due :

\$32.58

My TELUS Statement

M MATHESON Account Number TELUS Account ID

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

Current Month

View History

Summary of my account

Previous charges and credits

Amount of your last bill \$202.38 Payment we processed on May 07 -200.00 Amount overdue from your last bill \$2.38

New Charges

Bundles, Packages and Contracts \$68.76 **Additional Charges and Credits** 4.54 **Directory Assistance** 9.75 GST (Registration 812758878) at 7% 5.79 Total new charges \$88.84

Total amount owing

\$91.22

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:	m. Matheson					
FOR	THE MO	ONTH OF/	nay 200	s. s.	17(1), 17(4)(g)(i)		
1		E) (Please attac	(PENSES th original re		ED JUL 1 4 2006		
Date	De	escription	Amount	GST	Total		
Ma	y R	Ogers Wireles	29.37		29.37		
_v	+		· ·				
	1			0			
ΓΟΤΑ	L EXPE	NSES:			\$ 39.37		
inand	cial code	: 01-71110300003-62210	0001				
	's Employee	Conto	Print Name:	De Ce	StE		
·	10	<u> </u>	Authorizer Phone	ivumber (in full):	22		
·Board/l	Honorario/S	s.17(1), 17(4)(g)(i)					



MS MAIRI MATHESON

Total amount due	\$29.37			
Debited from your account on or after	May 20, 2006			
Summary of your charges Balance from your least hill		Details on page		
(including taxes)	\$0.00	3		
Wireless services	27.45	4		
Total before tax	27.45			
G.S.T. (#86239 5381)	1.92			
Total	\$29.37			

Other Rogers services available to you

Magazines

Messaging services

Long distance services

Invoice date

May 05, 2006

Your account number

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

Your invoice number

1012494456

Any payments we received and processed after May 07, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number :

Total amount due :

\$29.37

ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

CALGARY HEALTH REGION

BOARD EXPENSE FORM

NAME:	M. matheson.	
FOR THE MC	ONTH OF:	s.17(1), 17(4)(g)(i)
		ERED JUL 1 4 2006
į		01-71110300002
AIRFARE:	\$	
CAR RENTAL	\$	
ACCOMMODA	ATION: De. Howe and \$	
MEALS:	(1,D. 0750 .\$_50.58	63310000
PARKING:	Joshus () 7.50 / 50.58 210.00 / 17.50+10.00	63310000
TAXIS:	\$	
OTHER (pleas	e describe):	
	\$	
	\$	
	\$	
MILEAGE: (Attach Local Travel E	1 km at .43¢ /km \$ 17.63	68310000
TOTAL EXPEN	SES: \$ <u>85.71</u>	
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		4 Delaste RA
X:\BOARD\Honoraria\H	onoraria Forms.DOC Revised: October 2005	KB

	-	APPLICANT C	OPY		
calgary health region		FMC Southport RGH Other		AL TRAVEL E MILEAGE &	EXPENSE CLAIM PARKING
INSTRUCTIONS:					
Calgary Health F ORIGINAL REC	Region E-Mail addre	to your payroll bank accounts to your payroll to your hor TTACHED FOR PARKING TEIMBURSED FROM SITE TEIMBURSED FROM	ne address if a vai	lid E-Mail addres IBLE.	ss does not exist.
EMPLOYEE NAME (Pr	rint) M. N	nathern.		EMPLOYEE NUMB	ER
	sard	PHONE NUMBER		DATE	
DATE OF TRAVEL/ EXPENSE	# 	DETAILS		F KM RATE for mileage)	AMOUNT
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CODING & AUTHO	ORIZATION		41		
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ORG FUNCTI	IONAL CENTRE	ACCOUNT	GL DESCR	RIPTION	AMOUNT (Including GST)
		6 2 2 1 0 0 0 0	MILEAGE/PAR	KING	
EMPLOYEE SIGNATU	RE		TOTAL	PAYABLE TO EMPLOYEE	
AUTHORIZATION	s.17(1),	AUTHORIZER EMPLO $17(4)(g)(i)$	OYEE NUMBER	AUTHORIZER PH	ONE NUMBER
) (onto			GLIZ	112

X:Board/Honoraria/Local Travel Expense Claim

DISTRIBUTION:

00073

WHITE-ACCOUNTS PAYABLE

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MATHESON, MAIRI		ł	10842324

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAME:	MAIRI MATHES	$\circ \sim$
FOR THE MONTH OF:	may 2006	s.17(1), 17(4)(g)(i)
	EXPENSES ENTE	RED JUL 1 4 2006,
AIRFARE:	\$	01-71110300002
CAR RENTAL:	\$	
ACCOMMODATION:	\$	
MEALS: (1) May 11.12,13 PARKING 18 4 3 TAXIS: (3) Toodhius	newal Harts 54.00+ 5.00+ 3.00 14 at Conf. Rs 62.00 Pkg \$	62210000
OTHER (please describe):	\$ \$	
(Attach Eyear Travel Expense Claim form)	at .43¢ /km \$ 59.34	62210000
TOTAL EXPENSES:	\$ 121.34	4. DeCeste
X:\BOARD\Honoraria\Honoraria Forms.DOC	Revised: October 2005	RP

APPLICANT COPY calgary health region ACH FMC LOCAL TRAVEL EXPENSE CLAIM Southport PLC RGH Other_ MILEAGE & PARKING **INSTRUCTIONS:** Payment will be Directly Deposited to your payroll 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 does not exist.

ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. EMPLOYEE NAME (Print) **EMPLOYEE NUMBER** 76 thesor DEPARTMENT Board PHONE NUMBER DATE DATE OF TRAVEL # OF KM RATE EXPENSE **DETAILS** (for mileage) **AMOUNT** 22. 12. 24 11 1 24 bor & Kehn 30 22 138 CODING & AUTHORIZATION

ORG FUNCTIONAL CENTRE	ACCOUNT	GL DESC		AMOUNT (Including GST)
	2 2 1 0 0 0 0	MILEAGE/PAR	KING	(morading 031)
EMPLOYEE SIGNATURE		TOTAL	PAYABLE TO EMPLOYEE	
AUTHORIZATION 9. 00073 8.17(1), 17(4)	AUTHORIZER EMPLO $(g)(i)$	OYEE NUMBER	AUTHORIZER PH	ONE NUMBER

WHITE-ACCOUNTS PAYABLE

X:Board/Honoraria/Local Travel Expense Claim

DISTRIBUTION:

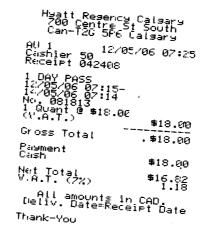
APPLICANT COPY

The Hyatt Regency Calgary Please insert this pass into the exit column for passage. Thank you for choosing The Hyatt.



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Non-Guest 1 Day \$18.00 14/05/06 09:59





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CALGARY HEALTH REGION

BOARD EXPENSE FORM

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

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тот	AL EXPI	ENSES:			\$	1,497.5 1445.10		4. Wele	xte
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calgary health region)			<u>. </u>					
)	-		FMC	Southport	1	-OC			XPENSE CLAII
	<u> </u>	PLC	RGH	Other			MILE	AGE &	PARKING
ISTRUCTIONS: Payment will be	. Dire	actly Denosited	l to vour	navrall bank assa	unt Notification	~~ ~ t			3.411
Calgary Health	Regi	on E-Mail add	ress OR	payroll bank accou mailed to your hor	me address if	on oi fava	aeposit alid F-Ma	will be E- ail addres	·Mailed to your
ORIGINAL REC	CEIP	TS MUST BE	ATTACH	IED FOR PARKIN	IG WHERE F	POSS	SIBLE.		
Amounts und	der S	100.00 can I	be reim	bursed from sit	te cashier o	ffice	e where	e availab	ole.
EMPLOYEE NAME (F	\sim 1	<u> </u>		D		T	EMPLOY	EE NUMBE	ER .
DEPARTMENT	1-)	airu N	DHC	MENUMBER			DATE		
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DATE OF TRAVEL						#0	FKM	RATE	
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ULK) (oste					EMPL	OYEE	
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C.		s.17(1)	, 17(4)(g)(i)				2112	
0073					_		<u> </u>	173	-1177
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Board/Honoraria/l	Local	Travel Expense	Claim						

Check-Out by telephone from the convenience of your guestroom!

Simply touch '50' on your telephone in order to leave I message of your Express Check-Out Mailbox.

Leave your name, room number, and time you are departing from your guestroom. If you would like a copy of your final bill sent to you by fax, or email, please indicate the details on the message.

airmon BANFF SPRINGS

405 SPRAY AVENUE P.O. BOX 960 BANFF, ALBERTA CANADA T1L 1J4 T 403 762 2211 F 403 762 5755 G.S.T. Registration #815456876RT0001 Room 0617

Folio# Cashier #

: 147

Page # 1 of 1

Group Name Calgary Health Region

Mairi Matheson

CA

Arrival

: 10-24-06

Departure

: 10-26-06

Date	Description	Additional I	Charges	Credits	
10-24-06 10-24-06 10-24-06 10-25-06 10-25-06 10-25-06 10-25-06	Package Charge Alberta Tourism Levy (4%) Room GST (6%) Package GST (6%) Telephone Long Distance Package Charge Alberta Tourism Levy (4%) Room GST (6%)	[NA Pkg. Trx] [Add: 4%.(B)] [Add: 6%.(B)] [Add: 6%.(B)] 21:59 #70617 [NA Pkg. Trx] [Add: 4%.(B)] [Add: 6%.(B)]	[00:16:00] s.17(1), 17(4)(g)(i)	209.00 7.96 11.94 0.60 23.96 209.00 7.96 11.94	
10-25-06	Package GST (6%)	[Add: 6%.(B)]		0.60	
		Total		482.96	0.00
		Balanc	ce Due	482.96	· · · · · · · · · · · · · · · · · · ·
GS [*]	T Summary				
Room F&B Other	23.88 0.00				

Guest signature

Signature du client X

Total

For information or reservations, visit us at

www.fairmont.com or call Fairmont Hotels & Resorts from: United States or Canada 1 800 441 1414

26.44

Pour information et réservations visitez notre web au

www.fairmont.com ou téléphoner au Hôtels Fairmont de: De États-Unis or Canada 1 \$00 441 1414

Thank you for choosing to stay with Fairmont Hotels & Resorts Merci d'avoir choisi les Hôtels Fairmont



MOUNTAIN AVENUE POST OFFICE BOX 1110

MATHESON, MS MAIRI **BUKSA CONF MGMT**

BANFF, ALBERTA, CANADA T1L 1J2 TÉLÉPHONE: (403) 762-3356 • FAX: (403) 762-4132 G.S.T. NO. / Nº T.P.S. R121509582

Room Number: 623 **Daily Rate: 177.00** Room Type: KD

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

No. of Guests: 1/0

		5.17(1), 1	/(+)(C.1)		
ARRIVAL	DEPARTU	RE CREDIT CARD	RATE PLAN	CATEGORY	ACCOUNT
10/29/200	£ 11/2/2006		CONF	CONF	11110135997
DATE	ROOM NO	, DESCRIPTION	REFERENCE		AMOUNT
10 /29/2006	623	ROOM CHARGES	#623 MATHESON, MS MAIRI		\$177.00
10/29 /2006	623	ROOM GST	ROOM GST		\$10.62
10 /29/2006	623	ROOM TOURISM LEVY	ROOM TOURISM LEVY		67 00
10 /30/2006	623	LONG DISTANCE	623/061030/13:58/1/	s.17(1), 17((4)(g)(i)
10/30/2006	623	MINIBAR FOOD	623/061030/13:58/1/ 623/4674/18:01/MINIBAR FOOD	Clare 1	\$1.44/ Sole \$6.50 \
10/30/2006	623	MINIBAR GST	623/4674/18:01/MINIBAR GST	cruse to	
10/30/2006	623	ROOMSERVICE DINNER FOOD	623/7846/19:26/ROOMSERVICE	DINNER FOOD	\$0.39 \$29.00
10/30/2006	623	ROOMSERVICE DINNER TIP			
10/30/2006	623	ROOMSERVICE DINNER GST	623/7846/19:26/ROOMSERVICE 623/7846/19:26/ROOMSERVICE	DINNER GST	
10/30/2006	623	VALET PARKING CHARGES	\$15.00 VALET PARKING	DIMINER OUT	\$2.05
10/30/2006	623	G\$T	GST		\$15.00
10/30 /2006	623	ROOM CHARGES	#623 MATHESON, MS MAIRI		\$0.90 /
10/30/2006	623	ROOM GST	ROOM GST		\$177.00
10/30/ 2006	623	ROOM TOURISM LEVY	ROOM TOURISM LEVY		\$10.62
10/31/ 2006	623	VALET PARKING CHARGES	\$15.00 VALET PARKING		\$7.08 /
0/31/2006	623	G\$T	GST		\$15.00 \
10/31/2 006	623	ROOM CHARGES	#623 MATHESON, MS MAIR!		\$0.90
0/31/2006	623	ROOM GST	ROOM GST		\$177.00 \
0/31/2006	623	ROOM TOURISM LEVY	ROOM TOURISM LEVY		\$10.62 \$7.08 /
1/1/2006	623	MINIBAR FOOD	623/4721/17:09/MINIBAR FOOD	Change for	
1/1/2006	623	MINIBAR GST	623/4721/17:09/MINIBAR GST	285 120	•
1/1/2006	623	ROOM CHARGES	93030 / FOR LATE CHECK OUT		\$0.50
1/1/2006	623	ROOM GST	ROOM GST		\$177.00
1/1/2006	623	ROOM TOURISM LEVY	ROOM TOURISM LEVY		\$10.62
1/1/2006	623	VISA	VISA		\$7.08
	1				(\$863.95)

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 or the full amount of these charges.

TOTAL DUE: \$0.00

Je comprends que ma reponsabilité pour cette facture n'est pas annulée et je consens à être tenu personellement responsable dans le cas ou la personne, la compagnie ou l'association indiquée ne paierait pas pour toute partie ou pour le total de ces frais.

APPLICANT COPY

Mental Health Research Showcase 2006 October 30 to November 1, 2006 The Rimrock Resort Hotel Banff, Alberta

> **Confirmation Notice** GST # 124072513 RT0011

August 10, 2006

Ms. Mairi Matheson **Board Member** Calgary Health Region 10101 Southport Road SW Calgary AB T2W 3N2 Fax: (403) 943-1124

Dear Ms. Matheson,

We are pleased that you will be attending the Mental Health Research Showcase at the Rimrock Resort Hotel (Mountain Avenue) in Banff, Alberta, from October 30 to November 1, 2006.

Time Ticket Description Fee Total 30 October 7:00 am Mental Health Research Showcase 2006 1 Early Bird Registration Fee 450.00 450.00

Your materials will be available for pick-up during the following hours at the registration desk:

Monday, October 30, 2006

7:00 a.m. to 5:00 p.m.

Tuesday, October 31, 2006 Wednesday, November 1, 2006

7:00 a.m. to 5:00 p.m. 7:00 a.m. to 12:00 p.m.

** Accommodation Confirmation - Please read carefully as your room preferences may not have been available. A room has been reserved for you at The Rimrock Resort Hotel.

Check-in:

October 29, 2006.

Check-out:

November 02, 2006

Number of Beds: Smoking Room:

Two Beds No

Confirmation No: 11110135997

Guests: Room Type: Deluxe Room (\$184/n+tax) Special Instructions

** The room rate is not included in your registration fees. Your room has been guaranteed using the credit card information provided on your registration form. The hotel will finalize your bill when you check-out.

Your registration payment information is as follows:

Total Cost:

\$450.00

Paid:

\$450.00

Amount Due:

\$0.00

Please Note: If you paid by credit card, your statement will read "BUKSA Assoc. (780) 436-0983 Edm."

Your nametag is listed as: Mairi Matheson

Calgary Health Region

If this is not how you would like your nametag to read, please notify us by fax or email at your earliest convenience with requested changes. Please specify "Mental Health Research Showcase" in your correspondence.

If no accommodation information appears above, a room has not been reserved for you. To reserve accommodation please contact the conference secretariat. For more information, please refer to www.amhb.ab.ca/showcase.

Yours Sincerely,

Shorted lead Board Member.

Sabrina Chan

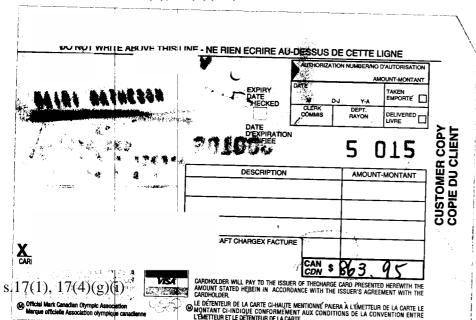
Showcase Secretariat

Note Due to SnowStorm I arrived moon Oct 30 but room 29 - 30th c 4pm was changed.

Mental Health Research Showcase 2006

c/o BUKSA Conference Management and Program Development

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



Carinto lake

PARC NATIONAL BANEF NATIONAL PARK 10/30/2006

Valid/Valide - 16h: 11/2/2006

22.95

GST#/No de TF9:R121491807

CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	AME: Mairi Matheson.									
FOR	THE	МО	NTH OF E	xpemen f	s for July, august, Sert, Oct. to nov 3'06.					
			(Pleas	EXPE e attach d	ENSES original re	eceipts.)				
Date		De	scription		Amount	GST	Total			
suego Aug Sep+	19,00	K	Ropers Cerl pho	\ 3	32.28 36.25 19.10		7 32.28 R 36.25 R 29.10			
octa me i mg ii Se o	1 06 5 00 1 10 06	77	elus email	6	29.13 28.76 28.88		R 27.13 Z 68.7L Z 68.7L Z 68.7L			
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			Ę		ENTER	ED NOV 1	7 2006			
тот	AL EX	(PE	ENSES:				\$ 401.40 399.40 v			
Expend	diture Off	ficer	e: 01-71110300 Authorization: ee Number:	0003-6221000	Print Name:	ne Number (in full):	oste			
<u>-</u>		17	1), 17(4)(g)(i)		a	143-112				
X:Boa			1), 17(4)(g)(1) Supplementary Expens	es Claim Form			94.48 364.92			

APPLICANT COPY

Previous bill for account:

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

Account	Dill amazzat		
Account	Bill amount	Due date	Bill period end ing
	\$ 32.28	07/19/2006	07/05/2006 July
	\$ 32.58	06/19/2006	06/05/2006 me - Daid
	\$ 29.37	05/20/2006	05/05/2006 Paid
	\$ 34.19	04/20/2006	04/05/2006 - Paid
	\$ 34.99	03/20/2006	03/05/2006 - Daid

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

https://secure6.billerweb.com/rog/inetSrv?txtype=TPgetPreviousBillList2TransProc&ses... 15/08/2006



MS MAIRI MATHESON

Total amount due	\$36,25	
Debited from your account on or after	August 19, 2006	
Summary of your charges		Details on page
Balance from your last bill (including taxes)	\$0.00	3
Wireless services	34.20	4
Total before tax	34.20	
G.S.T. (#86239 5381)	2.05	
Total	\$36.25	

Other Rogers services available to you

Magazines

Long distance services

Messaging services

Invoice date August 05, 2006

Your account number

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

Your invoice number 1012494486

Any payments we received and processed after August 06, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at
- rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

○ ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

Your account number ·

Total amount due :

\$36.25



MS MAIRI MATHESON

Total amount due	\$29 .10	Q
Debited from your account on or after	September 19, 2006	
Summary of your charges		Details on page
Detaile Holl voll (as fall)	including taxes) \$0.00	
Total before tax	27.45	,
G.S.T. (#86239 5381)	27.4	•
Total	1.65	j
ı Otai	\$29.10)

Other Rogers services available to you

Magazines

Long distance services

Messaging services

Invoice date September 05, 2006

Your account number

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

Your invoice number 1012494496

Any payments we received and processed after September 06, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at
- rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

○ ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

########

MS MAIRI MATHERON

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

Your account number :

Total amount due :

\$29.10



MS MAIRI MATHESON

Total amount due	\$29.73		
Debited from your account on or after	October 21, 2006		
Summary of your charges		Details on page	
Balance from your last bill (Including taxes	\$0.00	3	
Wireless services	28.05	4	
Total before tax	28.05		
G.S.T. (#86239 5381)	1.68		
Total	\$29.73		

Other Rogers services available to you

Magazines

Long distance services

Messaging services

invoice date October 05, 2006

Your account number $s.17(1),\ 17(4)(g)(i)$

Your invoice number 10124944A6

Any payments we received and processed after October 08, 2006 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at
- rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

O ROGERS"

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

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

Your account number ·

Total amount due:

\$29.73

My TELUS Statement

M MATHESON Account Number TELUS Account ID

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

Bill Date: Jun 20, 2006 Due Date Jul 10, 2006
View History

Current Month

Summary of my account

Usage Reports Download/Print Help

Previous charges and credits

Amount of your last bill

Payment we processed on Jun 06

Amount overdue from your last bill

\$91.22

\$0.00

New Charges

Bundles, Packages and Contracts
Additional Charges and Credits

Directory Assistance

GST (Registration 812758878) at 7%

Total new charges

\$68.76

4.52

50.30

\$68.76

Total amount owing \$96.68

My TELUS Statement

M MATHESON **Account Number TELUS Account ID**

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

Bill Date: Jul 20, 2006

Due Date:\ Aug 10, 2006

View History

Current Month

Summary of my account

Usage Reports Download/Print Help

Previous charges and credits

Amount of your last bill Payment we processed on Jul 07

Amount overdue from your last bill

\$96.68 -96.68

\$0.00

New Charges

Bundles, Packages and Contracts

Additional Charges and Credits

Directory Assistance Alternate Service Billing

GST (Registration 812758878) at 6%

Total new charges

Total amount owing

\$68.76

4.52

3.20 15.15

5.88

\$97.51

\$97.51

23/08/2006

My TELUS Statement

M MATHESON Account Number TELUS Account ID

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

Bill Date: Aug 20, 2006 Due Date: Sep 10, 2006

View History

Current Month

Previous charges and credits

Summary of my account

Amount of your last bill
Payment we processed on Aug 06
Amount overdue from your last bill

New Charges

Bundles, Packages and Contracts
Additional Charges and Credits
Directory Assistance
Long Distance Charges
GST (Registration 812758878) at 6%

Total new charges

Total amount owing

\$97.51

-97.51 \$0.00

\$66.88

3.76

11.20

12.35

5.63

\$99.82

\$99.82

My TELUS Statement

M MATHESON **Account Number TELUS Account ID**

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

Bill Date (Sep 20, 2006

Due Date: Oct 10) 2006

View History

Current Month

Summary of my account

Previous charges and credits

Amount of your last bill Payment we processed on Sep 06

Amount overdue from your last bill

New Charges

Bundles, Packages and Contracts

Additional Charges and Credits

Directory Assistance Long Distance Charges

GST (Registration 812758878) at 6%

Total new charges

Total amount owing

Usage Reports Download/Print Help

\$99.82

-99.82

\$0.00

√ \$68.24 ✓

4.52

5.60

5.89 5.03

\$89.28

\$89.28

CALGARY HEALTH REGION

:		BOARD	EXPEN	SE FORM	s.17(1	1), 17(4)(g)(i)	
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			\$				·	
MILEAGE: \ \ 5 Attach Local Travel Ex	pense Claim form	n at .43¢ /km	N \$ 6	4.50		69210)DD	
OTAL EXPEN	SES:		\$ <u>3</u>	24.18				3

X:\BOARD\Honoraria\Honoraria Forms.DOC

Revised: October 2005

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INSTRUCTIONS:							
 Payment will be 	Directly Deposite	ed to your payroll ba	ank account. Notific	cation o	f denocii	مط النبيد	
Calgary Health	Region E-Mail add	dress OR mailed to	ank account. Notific your home addres PARKING WHER	ss if a v	alid E-M	ail addre	E-Mailed to your
Amounts und	er \$ 100 00 can	ATTACHED FOR	PARKING WHER	RE POS	SIBLE.	an addic	os does not exist.
and and	er 5 100.00 carr	be reimbursed	from site cashie	r offic	e wher	e availa	able.
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00073					9	43-	1122

X:Board/Honoraria/Local Travel Expense Claim

DISTRIBUTION:

WHITE-ACCOUNTS PAYABLE



NisAPPILAGE ANTERCO CENtre 1101 - 4th Street Nisku, Alberta T9E 7N1 Tel. (780) 955 7744 Fax. (780) 955 7743 www.niskuinn.com

MAIRI MATHESON

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

Bill

2007001572

Date

01/15/2007

Room

185 King NS-JETTED TUB

Arrival

01/14/2007

Departure

01/15/2007

Nisku Inn and Conference Centre, Nisku

GST REG #: 102501764

Date	Description	Supple	ment	Qty.	Price	Amount
01/14	Stopover-Nisku Spl			~~~		
01/14	Guest Long Distance			1	119.00	119.00
02,11	185 01/14 18:5		s.17(1), 17(4)(g)(i)	1		3.12
01/14	Martinique Food 185 20070115 00	17:12 Restaurant / 69	, , , , , , , , , , , , , , , , , , ,	1		42.47
01/15	Visa					-176.68
				Net		164.59
				GST 6%		7.33
				Room tax 4%		4.76
				Gross		176.68
				Paid		-176.68
				Balance		0.00

We thank you for your visit and wish you a safe trip.

APPLICANT COPY

MISKU INN EDHONTON INT'L AIRPORT EDMONTON AB s.17(1), 17(4)(e.1)

MISKU IKK EDMONTON IMT'L AIRPORT EDMONTON AB

CARD NUMBER EXPIRY DATE CARD TYPE DATE/TIME VISA 1677 2007/01/14 19:27:51 CLEAK NUMBER 980595678-9e0-029 RECEIPT NUMBER **AUTHORIZATION** AMOUNT \$160.00 149 TOTAL AMOUNT 01 APPROVED 027 AUTH, # 025677 . THANK YOU CARDHOLDER WILL PAY TOTAL AMOUNT SHOWN TO CARD 199UER ACCORDING TO EARDHOLDER

EMPERY DATE		s.17	7(1), 17(4)(e.
CARD TYPE DATE/TIME CLERK MUMBER RECEIPT HUMBER	VISA 2007/01:1 1 80585678	4527 8 11:26:16 -961-003	
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OT APPROVED 027 IMANK YOU		0256X ²	,
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1)

CALGARY AIRPORT Terminal Farkade GST No. R122556194

HAIRT HATHESON

AGREEMENT

RECEIPT H3
ENTRY DATE/TIME:
01/14/07 14:40:04
EXIT DATE/TIME:
01/15/07 17:35:59
PAID: \$ 36.00
(GST INCLUDED)
LENGTH OF STAY:
1 02:55
METHOD OF PAYMENT:

THANK YOU FOR YOUR VISIT

CASH

Guest Service Agent: Tyat.

Amt. Charged: 432.00

Date: 16/61/67

Date Jan 14 07

Trip Amount 15.03

Driver Name Rush

Car number 149

CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:		_ Mai	i Ma	Loom	
FOR	THE	MO	NTH OF NOV	06 Dec	-06 Ja	s.17(1), 17(4)(g)(i)
			EXF (Please attach	PENSES original r	eceipts.)	FRED FEB 1 4 20 07
Date		De	scription	Amount	GST	Total
861-0	6		ogens (Pleaseched)	29.73	(1.68)	O
Non	06	R	ogens wireless	27.45	(1.65)	29.10
Dec	06	Ro	egers wireless	≱8 .95	(1.74) R	30.69
Jan	<i>•</i>	IC	egers Winders	31.95	V.92) R	33.87
Dod	06_	10	please that			
Dec	10 8	L	Internet change	68.24 4.52	4.37 6	2 77.13
Jan	100	2	Internet charges	35.95		1 35.95
TOTA	L EX	(PEN	NSES:		;	206.74
Financ	cial c	ode:	01-71110300003-622100	01		
Expenditu	re Offi	cer Au	thorization:	Print Name:		
A., 14 h	9	Q	Coste	Lou	Dolone	10
Authorize	rs⊫m¦	oloyee	Number:	Authorizer Phone	Number (in full):	K
				94	3-1122	2
	s	.17(1	1), 17(4)(g)(i)			170.79
X:Board/	Honora	ria/Su	pplementary Expenses Claim Form			3590

Total amount owing

\$82.10

TELUS M MATHESON * phone line: shopping cart log out s.17(1), 17(4)(g)(i) my other bills: - internet mobility TELUS > select region > personal > customer care > billing > view e.bill payment options paper bill is turned off current balance lookup a phone number lookup an area code contact us My TELUS Statement M MATHESON s.17(1), 17(4)(g)(i) Account Number TELUS Account ID Current Month Summary of my account Previous charges and credits Amount of your last bill \$88.86 Payment we processed on Nov 06 -88.86 Amount overdue from your last bill \$0.00 **New Charges** Bundles, Packages and Contracts \$68.24 Additional Charges and Credits 4.52 Directory Assistance 2.40 Long Distance Charges 2.31 GST (Registration 812758878) at 6% 4.63 Total new charges \$82.10

https://www.telus.com/cgi-ebs/jsp/myaccount/viewebill.do?BV_SessionID=@@@@094... 22/11/2006

TELUS

M MATHESON - phone line:

shopping cart

log out

s.17(1), 17(4)(g)(i) my other bills: internet

mobility

TELUS > select region > personal > customer care > billing > view e.bill

payment options paper bill is turned off current balance lookup a phone number lookup an area code contact us

My TELUS Statement

M MATHESON Account Number TELUS Account ID

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

Bill Date: Dec 20, 2006 Due Date: Jan 10, 2007 View History

Current Month

New Charges

Summary Statement Download/Print Usage Reports Help

Smart Internet Bundle - exclusive to Long Distance customers

The Smart Internet Bundle combines your TELUS Internet service with your current Long Distance plan, and your choice of a Calling Feature Pack or your TELUS Mobility plan.

('click column headings to sort, click again to reverse) Subscription adjustment from Nov 28 to Dec 19

('click column headings to sort, click again to reverse)

High Speed Access Nov 25

Reset

Total Smart Internet Bundle / exclusive to Long Distance customers

26.10

Telus Onterrit changes as of Du 1/06

(to split calls, e.g., among roommates, assign them to Group A, B, C, etc., then Subtotal)

https://www.telus.com/cgi-ebs/jsp/myaccount/viewebill.do?BV_SessionID=@@@@171... 27/12/2006

TELUS

M MATHESON phone line:

shopping cart

 $s.17(1),\,17(4)(g)(i) \text{ my other bills: } \quad \text{internet}$

TELUS > select region > personal > customer care > billing > view e bill

payment options

paper bill is turned off current balance lookup a phone number lookup an area code contact us

My TELUS Statement M MATHESON

Account Number TELUS Account ID s.17(1), 17(4)(g)(i) **View History**

Current Month

Summary of my account

Previous charges and credits

Amount of your last bill Payment we processed on Dec 07

Amount overdue from your last bill

\$82.10

-82.10 \$0.00

New Charges

Monthly Local Services (including rental equipment if applicable)

Bundles, Packages and Contracts Additional Charges and Credits

Directory Assistance Long Distance Charges GST (Registration 812758878) at 6%

Total new charges

\$23.34 4.85

20.86 11.20 13.52

4.41 \$78.18

\$78.18

Total amount owing

Internet 35.95/ml.

https://www.telus.com/cgi-ebs/jsp/myaccount/viewebill.do?BV_SessionID=@@@@202... 27/12/2006



MS MAIRI MATHESON

Total amount due	\$29.10
,	

Debited from your accou	nt on or after	November 19, 2006

Summary of your c	harges		Details on page
S Balance from your	ast bill (including taxes)	\$0.00	3
Wireless services		27.45	4
Total before tax		27.45	
G.S.T. (#86239 538	\$ 1)	1.65	
Total		\$29.10	

Other Rogers services available to you

- **O** Magazines
- OLong distance services
- **O**Messaging services

Invoice date

November 05, 2006

Your account number

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

Your invoice number

10124944B6

Any payments we received and processed after November 06, 2006 will show on your next bill.

Questions?

Visit **www.rogers.com** or see **Contact us** on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to: Rogers

PO Box 9100 Don Mills, ON M3C 3P9

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

○ ROGERS

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

Your account number : **Total amount due :**

\$29.10



MS MAIRI MATHESON

Total amount due	\$ 30.69
Debited from your account on or after	December 19, 2006

Summary of your c	harges		Details
Balance from your I	ast bill (including taxes)	\$0.00	on page २
Wireless services	, ,	28.95	3
Total before tax			4
-	14\	28.95	
G.S.T. (#86239 538	(1)	1.74	
Total		\$30.69	

Other Rogers services available to you

- **O** Magazines
- OLong distance services
- **O** Messaging services

Invoice date

December 05, 2006

Your account number

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

Your invoice number

10124944C6

Any payments we received and processed after December 06, 2006 will show on your next bill.

Questions?

Visit **www.rogers.com** or see **Contact us** on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at
- rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number:

Total amount due:

\$30.69

○ ROGERS[™]

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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



MS MAIRI MATHESON

Total amount due		\$33.87
Debited from your account	on or after	January 19, 2007
{		

Summary of your charges		Details on page
Balance from your last bill (including taxes)	\$0.00	3
Wireless services	31.95	4
Total before tax	31.95	
G.S.T. (#86239 5381)	1.92	
Total	\$33.87	

Other Rogers services available to you

- **O** Magazines
- O Long distance services
- **O**Messaging services

Invoice date

January 05, 2007

Your account number

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

Your invoice number

1012494417

Any payments we received and processed after January 06, 2007 will show on your next bill.

Questions?

Visit **www.rogers.com** or see **Contact us** on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to: Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number:

Total amount due:

\$33.87

○ ROGERS[™]

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

CALGARY HEALTH REGION

BOARD EXPENSE FORM

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

NAME:			in Mathersen	
FOR TH	HE MONTH OF:	- Februa	in matheran	mal.
		EXPE	ENSES	
				01-71110300002
AIRFAF	RE:		\$	
CAR RE	ENTAL:		\$ FNTFRED	MAR 1 6 2007
ACCOM	MODATION:		\$	
MEALS	:	P	\$	
PARKIN	NG:		\$ Meter Parking 10.00 \$-children's Hrf -7.20	62210000
TAXIS:			\$	
OTHER	(please descril	oe):		
THE RESERVE	5 5031 /		\$	
المنافقة الم			\$	
			\$	
MILEAC	GE: 102 eal Travel Expense Clair	_ km at .43¢ /km	\$ 43.86	62210000
	EXPENSES:	ii ioiiii <i>j</i>	s R 61.36	
			<u> </u>	
				12 10 10.4

Revised: October 2005

X:\BOARD\Honoraria\Honoraria Forms.DOC

APPLICANT COPY calgary health region **LOCAL TRAVEL EXPENSE CLAIM** ACH FMC Southport PLC **MILEAGE & PARKING RGH** Other INSTRUCTIONS: Payment will be Directly Deposited to your payroll 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 does not exist. ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. EMPLOYEE NAME (Print) **EMPLOYEE NUMBER** DEPARTMENT DATE DATE OF TRAVEL # OF KM RATE EXPENSE **DETAILS AMOUNT** (for mileage) Roundup Centu Metur 8x2 16 Palline Hotel repur Jeb 10 20 10×2 16 1042 mar 20 50 man & 102 **CODING & AUTHORIZATION** ORG **FUNCTIONAL CENTRE** ACCOUNT **GL DESCRIPTION AMOUNT** (Including GST) 2 2 1 0 0 0 0 MILEAGE/PARKING **EMPLOYEE SIGNATURE TOTAL PAYABLE TO EMPLOYEE** AUTHORIZATION **AUTHORIZER EMPLOYEE NUMBER AUTHORIZER PHONE NUMBER** 943-1122 00073

DISTRIBUTION:

WHITE-ACCOUNTS PAYABLE

APPLICANT COPY

INSERT THIS END UP

03/02/07 09:20 E1 TICKET-NO. 10035316

03/02/07 12:13 H1 PAID: 7.50

Children's Hois:

KEEP TICKET WITH YOU.
Cash and credit card payment accepted at paystations located in the lobby prior to exit. Credit card payment only, accepted in exit lane.



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BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:		Mo	iii mo	these	<u>-</u>			
FOR	THE	MONTH OF	Libru	ang -	ui mathesen uz - Man (2 ml) 07				
		(Plea	EXPI ase attach (ENSES					
Date		Description		Amount	GST	Total			
feb	22	logers		27.45	1.65	R 29.10			
Leb	20	Telus		30.95	-	30.95			
		H							
				E	NTERED	MAR 1 6 2007			
		!							
	·								
TOTA	TOTAL EXPENSES: \$_60.05								
		·							
		code: 01-711103	300003-6221000						
⊏xpena	ture Of	ficer Authorization:		Print Name:	D-1				
Authoriz		nployee Number:		Authorizer Phon	e Number (in full):	PSTC			
					943-11				

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

\$29.10



Your Rogers statement

MS MAIRI MATHESON

Total amount due

Debited from your account on or after

Summary of your charges

Balance from your last bill (including taxes)

Wireless services

Wireless services 27.45

Total before tax 27.45

G.S.T. (#86239 5381) 1.65

Total \$29.10

Other Rogers services available to you

O Magazines

O Long Distance services

Messaging services

Invoice date

February 05, 2007

Your account number

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

Your invoice number

1012494427

Any payments we received and processed after February 09, 2007 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

online at rogers.com/onlinebilling

- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to:

Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number:

Total amount due: \$29.10

ROGERS"

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

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

TELUS'

M MATHESON • phone line:

shopping cart

log out

my TELUS e.bill

my other bills: +internet - mobility

you are here TELUS > select region > personal > customer care > billing > view e.bill

payment options paper bill is turned off current balance lookup a phone number lookup an area code contact us

My TELUS Statement

M MATHESON **Account Number**

View History

TELUS Account ID

s.17(1), 17(4)(g)(i)Current Month -

Summary of my account

Previous charges and credits

Amount of your last bill \$81.51 Payment we processed on Feb 06 -81.51 Amount overdue from your last bill \$0.00

New Charges

Monthly Local Services (including rental equipment if applicable) \$23.34 **Bundles, Packages and Contracts** 30.95 Additional Charges and Credits 4.52 **Directory Assistance** 1.60 **GST (Registration 812758878) at 6%** 3.60 Total new charges \$64.01

Total amount owing \$64.01

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:	Mair	iri Matheson						
FOR	THE MONTH OF	Ma	S.17(1), 17(4)(g)(i)						
	EXPENSES (Please attach original receipts.)								
Date	Description		Amount	GST	Total				
	Telus - onl	ine	30.95	1.86	-32.BI				
			•						
19 M	on logus wire	lens	30 .45	1.83	? 3⊋.≥8				
	1		ENTF	RED MAY	7 2007				
ТОТА	TOTAL EXPENSES: \$ 65.09								
Finand Expendit	cial code: 01-71110300	0003-6221000	Print Name:						
	4. Ochosto			L De (5) e Number (in full):	cte				
-tutiorize	er's Employee Number:			·					
	17(1) 17(1)()			143-112					
	s.17(1), 17(4)(g)(i)	o			KB				
v.noard/	Honoraria/Supplementary Expens	es Claim Form							

TELUS"

M MATHESON + phone line:

shopping of

log out

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

my other bills: Finternet Fmobility

you are here TELUS > select region > personal > customer care > billing > view e.bill

payment options paper bill is turned off current balance lookup a phone number lookup an area code contact us

My TELUS Statement

M MATHESON Account Number TELUS Account ID

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

Bill Date: Mar 20, 2007 Due Date: Apr 10, 2007

View History

\$64.01

-60.83

-3.00

-0.18

\$0.00

Current Month -

Summary of my account

Usage Reports Download/Print Help

Previous charges and credits

Amount of your last bill
Payment we processed on Mar 09
Bill Copy Charge
GST (Registration 812758878)
Amount overdue from your last bill

New Charges

Monthly Local Services (including rental equipment if applicable)
Bundles, Packages and Contracts
Additional Charges and Credits
Directory Assistance

GST (Registration 812758878) at 6%

Total new charges

DO NOT pay this bill. \$63.84 will be debited to your pre-authorized payment account on Apr 06, 2007.

\$23,34 30.95 × 6% 4.36 = 1.86

1.60 3.59 \$63.84

\$63.84

https://www.telus.com/cgi-ebs/jsp/myaccount/viewebill.do?BV_SessionID=@@@@207... 22/03/2007



Your Rogers statement

MS MAIRI MATHESON

Total amount due	\$32.28	
Debited from your account on or after	March 19, 2007	
Summary of your charges		Details on page
3 Balance from your last bill (including taxes)	\$0.00	3
Wireless services	30.45	4
Total before tax	30.45	
G.S.T. (#86239 5381)	1.83	
Total	\$32.28	

Other Rogers services available to you

- **O** Magazines
- OLong Distance services
- **O**Messaging services

Invoice date March 05, 2007

Your account number $s.17(1),\,17(4)(g)(i)$

Your invoice number

1012494437

Any payments we received and processed after March 06, 2007 will show on your next bill.

Questions?

Visit www.rogers.com or see Contact us on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to: Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number:

Total amount due:

\$32.28

○ ROGERS^{*}

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAME: MAJRI	MATHESON	
FOR THE MONTH OF: March	MATHESON 2007	s.17(1), 17(4)(g)(i)
		ED MAY 1 7 2007
AIRFARE:	\$	<u>01-71110300002</u>
CAR RENTAL:	\$	
ACCOMMODATION:	\$	
MEALS:	\$	
PARKING: march 2 - 7.50	\$ 16.50	62210000
TAXIS:	\$	
OTHER (please describe):		
	\$	-
	\$	
	\$	
MILEAGE: 124 km at .43¢ /km (Attach Local Travel Expense Claim form)	\$53.32	00001669
TOTAL EXPENSES:	\$ 69.82	
		4. Delasta
X:\BOARD\Honoraria\Honoraria Forms.DOC Revised: Octobe	er 2005	4. Delasta

APPLICANT COPY calgary health region ACH **LOCAL TRAVEL EXPENSE CLAIM** FMC Southport PLC RGH **MILEAGE & PARKING** Other **INSTRUCTIONS:** Payment will be Directly Deposited to your payroll 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 does not exist. ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. EMPLOYEE NAME (Print) **EMPLOYEE NUMBER** IV)AIRI MATHESON DEPARTMENT **PHONE NUMBER** DATE CHR DATE OF TRAVEL #OF KM RATE EXPENSE **DETAILS AMOUNT** (for mileage) South Port & Return 19 20km Mackerer Hall & Return 22 23 24Km 27 Southbot & Ruther 28 MLA Offer + Moxico Westhello Bon 124 **CODING & AUTHORIZATION** FINANCIAL CODE ORG FUNCTIONAL CENTRE **ACCOUNT GL DESCRIPTION AMOUNT**

FINANCIAL CODE

ORG FUNCTIONAL CENTRE ACCOUNT GL DESCRIPTION AMOUNT (Including GST)

6 2 2 1 0 0 0 0 MILEAGE/PARKING

EMPLOYEE SIGNATURE

AUTHORIZATION

AUTHORIZER EMPLOYEE NUMBER

AUTHORIZER PHONE NUMBER

O00073

DISTRIBUTION:

WHITE-ACCOUNTS PAYABLE

X:Board/Honoraria/Local Travel Expense Claim

APPLICANT COPY

EXPIRATION DATE

EXPIRATION TIME

EXPIRATION TIME

EXPIRATION TIME

DETACH RECEIPT FROM TICKET

AMOUNT PAID

AMOUNT PAID

AMOUNT PAID

TICKET VALID THIS LOT ONLY.

NON TRANSFERABLE

0974556

DETACH RECEIPT FROM TICKET

AMOUNT PAID

OATE ISSUED

TIME ISSUED

TIME ISSUED

TIME ISSUED

TIME ISSUED

AMOUNT PAID

OREDIT CARD NUMBER

EXPIRATION DATE & EXPIRATION DATE & EXPIRATION DATE & EXPIRATION DATE & EXPIRATION TIME

CALCARY

CALCARY

GST #R108102864

RECEIPT

0974556

Best Copy Possible

ALBERTA THE INCOME

White Ext

101 (HERE) 201 102 - 101 (BINDE) 07 () 1 102 - 102 / 12 / 107 () 1 103 - 103 / 103 () 1 104 / 103 () 1 105 / 103

BOARD EXPENSE FORM

NAME: MAIN	RI MATHESONV	
FOR THE MONTH OF: ARIL -	MAJ4 - 2007 1	
NAME: FOR THE MONTH OF: APRIL - EXP	ENSES	
AIRFARE:	\$	01-71110300002
CAR RENTAL:	\$	
ACCOMMODATION:		
MEALS:	\$	
PARKING:	\$	
TAXIS:	\$	
OTHER (please describe):		
	\$	
	\$	
MILEAGE: 60 km at .43¢/km (Attach Local Travel Expense Claim form)	\$	
TOTAL EXPENSES:	\$ 45.16	
X:\BOARD\Honoraria\Honoraria Forms.DOC Revised: Octo		. Oloste

BOARD EXPENSE FORM

NAME	: :	MAIRI MATHESONV	
FOR	THE MO	NTH OF: APRIL - MAJ 4 - 2007	
		ENTERED JUL 1 2 2007	(BERLIZED
		EXPENSES	J. 1. 1. 2007
			01-71110300002
AIRF	ARE:	\$	
CAR	RENTAL	: \$	
ACCC	DMMOD/	ATION: \$	
MEAL	S:	\$	
PARK	ING:	\$	
TAXIS	S:	\$	_
OTHE	R (pleas	se describe):	
		\$	
	:	\$	
	:	\$	
MILEA (Attach Lo		44 Km 27.44 Km 19.36 60 km at .43¢/km \$ 25.80	
	L EXPE		=
			L. Oloste
X:\BOARI	D\Honoraria\H	donoraria Forms.DOC Revised: October 2005	
	I		

		APF	PLICANT (COPY				
Calgary hadda region								
•	ACH _		_ Southport		LOC			EXPENSE CLAIM
INSTRUCTIONS:	PLC _	_ RGH	Other			MIL	EAGE 8	& PARKING
	Directly Denosite	d to your po	rall bank ass	NI 00				
ouigary ricultin	Directly Deposite Region E-Mail add	11 MSS UPC 1112	alled to vour b	ama addraca	i -	~I:J [it will be	E-Mailed to your ess does not exist.
		. ALIAUDE	J FUR PARK	INIC WILDE	DAG	CIDI E		
 Amounts und 	er \$ 100.00 can	be reimbu	irsed from s	ite cashier	offic	e whei	re availa	able.
EMPLOYEE NAME (P			,				YEE NUMI	
	MAIRI	MATHE	Son			EWIFLO	TEE NUMI	BEK
DEPARTMENT &	7 0 0	PHONE	NUMBER			DATE		
DATE OF TRAVE	ARD CHY	403	244 40	88-	i			
DATE OF TRAVEL/ EXPENSE		DETAI				F KM	RATE	
	-					(for milea	ige)	AMOUNT
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BPRIL 24	£ a	(0 - 4						
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	FINANCIAL COL	E Constant						
ORG FUNCTION	ONAL CENTRE							
FUNCTION	CHAL CENTRE	AC	COUNT	GL C	DESCR	IPTION		AMOUNT (Including CST)
		6 2 2	1 0 0 0 0	MILEAGE/	PAR	KING		(Including GST)
EMPLOYEE SIGNATUR	E a				·			
<i>L l</i> .	· M			TO	TAL	PAYAB		
AUTHORIZATION	100	<u>_</u>					OYEE	
AUTHORIZATION	• • • • • • • • • • • • • • • • • • •	AUTH	ORIZER EMPLO	OYEE NUMBER		AUTHO	RIZER PH	ONE NUMBER
4 10	loste, 8.17(1)), 17(4)(g)(1)				943	6611-2
00073	Diozz	IDUTIO:					1 10	2-1199
	אופות	RIBUTION:	WHITE	-ACCOUNTS	PAY	ABLE		

X:Board/Honoraria/Local Travel Expense Claim

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	AME: Marleson								
FOR	THE	MONTH OF		Marker Markeson Jose 2007 s.17(1), 17(4)(g)(i)					
		(Ple	EXP ase attach	PENSES original re	eceipts.)	JUL 1 1 2527			
Date		Description		Amount	GST	Total			
Jun	zz	lezen		28.95	1.74R	30.69			
Jr.	u	Deles.	Inhart	30.95	1.B6 R	32.B1			
				· <u>-</u>					
				ENTERED	JUL 1 3 200	7			
TOTA	AL EX	(PENSES:			R	\$ <u>63.50</u>			
Finan	cial c	code: 01-711103	00003-622100	01					
Expendi		icer Authorization:		Print Name:	Delos	de			
Authoriz		ployee Number:			e Number (in full):	216			
				9	43-112	2			
X:Board		7(1), 17(4)(g)(i) raria/Supplementary Exp	enses Claim Form			R13			



Your Rogers statement

MS MAIRI MATHESON

Total amount due	\$30.69	
Debited from your account on or after	June 22, 2007	
Summary of your charges		Details on page
S Balance from your last bill (including taxes)	\$0.00	3
Wireless services	28.95	5
Total before tax	28.95	
G.S.T. (#8 <mark>6239 5381</mark>)	1.74	
Total	\$30.69	

Other Rogers services available to you

- Magazines
- OLong Distance services
- Messaging services

Invoice date

June 05, 2007

Your account number

1-0124-9449

Your invoice number

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

Any payments we received and processed after June 09, 2007 will show on your next bill.

Questions?

Visit **www.rogers.com** or see **Contact us** on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to: Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

○ ROGERS[™]

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRI MATHESON

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

Your account number : Total amount due :

\$30.69

APPLICANT COPY



My TELUS Statement

Bill Date: May 19, 2007

Due Date: Jun 09, 2007

M MATHESON

Account number TELUS Account ID

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

Summary of my account

Total amount due by Jun 09, 2007

\$71.64

\$0.00

DO NOT pay this bill. \$71.64 will be debited to your pre-authorized payment account on Jun 06, 2007.

Previous charges and credits

Amount of your last bill

105.19

Total payments processed for Account

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

-105.19

\$32.81

Total balance forward

103.19

New charges

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

Bundles (from May 19 to Jun 18)

30.95 1.86

Taxes Subtotal

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

23.91

Monthly services (from May 19 to Jun 18)
Usage charges

8.80

Taxes

1.94

Subtotal

High Speed

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

34.65

Monthly edvices (from May 19 to Jun 18)
Usage charges

3.95 0.00

Taxes

0.23

Subtotal
Total new charges

. 4

Total amount due

\$71.64

\$71.64

1 of 1

04/06/2007 9:10 AM

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME	: :	_ Mc	airi M	athron	
FOR .	THE M	IONTH OF $M \sim M$	2011		s.17(1), 17(4)(g)(i)
IOK	, 1 II)		The second secon
		EX (Please attac	JUL 1 1 2007		
Date		Description	Amount	GST	Total
May	19	Bundles Thunt		7	30.95
Maz	22	Rundles Trhunt Rugers.	28.95	1.74 R	30.69
		,			
			ENTERE	D JUL 13	2007
тота	L EXF	PENSES:			\$ 61.64
Finan	cial co	de: 01-71110300003-6221	0001		
	9	er Authorization:	Print Name:	u Delo	ste
Authorize	er's Empl	oyee Number:		ne Number (in full):	30.69 30.95
<u> </u>	s	.17(1), 17(4)(g)(i)			30.69
X:Board	/Honorar	ia/Supplementary Expenses Claim Form			30.95



EX 943 1124 Sul

Fax this Bill

Page 1 of 6

Your TELUS statement

Apr 19, 2007

Page 1 of 5

For Customer Service please call 310-2255 From outside the province call Toll-free 1-888-811-2323 M MATHESON

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

Your TRLUS Account ID

Your account number

Total amount you owe.....\$105.19 Summary of your account (details start on page 3)

Previous charges and credits

Thank you for keeping

Amount of your last bill \$63.84 Payment processed Apr 06 - Thank You -63.84 Balance forward .00 New charges

your account up to date.

30.95 Monthly services 27.86 Additional charges and credits Usage charges

GST (Registration 812758878) Total new charges 105.19 Total amount due by May 14, 2007 \$105.19

Tear off here

BRS - 200680957 APR 2007

TELUS"

Payment return slip DO NOT pay this bill. \$105.19 will be debited to your pre-authorized payment account on May 11, 2007.

Account number

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

239 (E)

\$30.69

1.74

\$30.69



Your Rogers statement

MS MAIRI MATHESON

Total amount due

Debited from your account on or after	May 22, 2007	
Summary of your charges		Details on page
S Balance from your last bill (including taxes)	\$0.00	3
Wireless services	28.95	4
Total before tax	28.95	

Other Rogers services available to you

O Magazines

Total

O Long Distance services

G.S.T. (#86239 5381)

O Messaging services

Invoice date

May 05, 2007

Your account number

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

Your invoice number

1012494457

Any payments we received and processed after May 09, 2007 will show on your next bill.

Questions?

Visit **www.rogers.com** or see **Contact us** on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to: Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number :

Total amount due:

\$30.69

○ ROGERS[™]

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

01012494491012494490705070000030696

You don't need to make any additional payments.

MS MAIRI MATHESON

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

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME	:		MPIRI MANYESON				
FOR 1	THE MOI	NTH OF	HIRIL -	may 4	s.1 2001	7(1), 17(4)(g)(i)
				NSES			JUL 1 1 2007
Date	Des	scription		Amount	GST	Total	Circons
Apri	1 Je	lus .			2	30.9	5
Apr	i2u	lozus		27.45	1.65	29.11	D
			ENTER	ED JUL 1	3 2007		
ТОТА	L EXPE	NSES:				\$_60.0	25
	cial code ure Officer A	: 01-7111030	0003-6221000	Print Name:			
Lxperior	4.0	lost.		MAIR!	104 19 4116	De Cost sur	e
Authorize	er's Employe	e Number:			ne Number (in full):		
	s.17(1)), 17(4)(g)(i)					30.95 29.10 RB
X:Board	/Honoraria/S	Supplementary Expens	ses Claim Form				29.10 PB



TELUS e.Bill - p. 1 of 2 Bill Date: Mar 20, 2007 Account No:

•		Account No:
My TELUS Statement	Mar 20, 2007	s:17(1);·17(4)(g
Bill Date: Mar 20, 2007		
Due Date: Apr 10, 2007 M MATHESON		
s.17(1), 17(4)(g)(i)	Customer Service Manage my account online @:	4-1
My Account No:	Other inquiries @: telus.com/	onfactus
My TELUS Account ID:		
Total new charges: \$63.84		AND THE REAL PROPERTY AND THE PARTY AND THE
Total amount owing: \$63.84 (due by Apr 10, 200	7	
DO NOT pay this bill. \$63.84 will be debited to your pre-suit	horized payment account on April	06. 2007
Account Summary	, , , , , , , , , , , , , , , , , , ,	
Pravious Charmes and Carette	ing our en hyperconnect or grades payment to the second or	
Previous Charges and Credits Amount of your last bill		•
Payment we processed on Mar 09 - Thank You		\$ 64.01
GST Adjustment on Feb 22		-60.83 -0.18
Bill Copy Charge on Feb 22		-3.00
Total amount overdue from your last bill	Parada na manamata sa mana dana sa masa sa masa Manamata sa masa sa ma	\$0.00
New Charges		, , , , , , , , , , , , , , , , , , ,
Monthly Local Services (including rental equipment if applica	ble)	23.34
Bundles, Packages and Contracts Additional Charges and Credits		30.95
Directory Assistance		4.36
GST (Registration 812758878) at 6%		1.60 3.59
Total new charges Total amount owing		\$63.84
Total amount owing		\$63.84
		45010-7
Summary of Current Charges		
Current Charges Details	· · · · · · · · · · · · · · · · · · ·	
	•	
fonthly Local Services (including rental equipment if ap	plicable)	to the second of the second
Residence Line Touchtone from Mar 19 to Apr 18		23.34
Total monthly local services (including rental equipmen	rt if applicable)	\$23.34
undles, Packages and Contracts		PEG.
mart Internet Bundle - exclusive to Long Distance customers		30.96
Company to the company of the compa		
dditional Charges and Credits		\$30.95
muality of Service Rebate Mar 06		
9-1-1 Municipal Call Answer Fee Mar 19		-0.16
9-1-1 Provincial Network Fee Mar 10		0.44

14 Mq45:20 7005 60 .IJL

E9-1-1 Provincial Network Fee Mar 19

Total additional charges and credits

TELUS Internet Services

FAX 40. :

FROM:

0.44 0.13

3.96

\$4.36



Your Rogers statement

MS MAIRI MATHESON

Total amount due	\$29.10	
Debited from your account on or after	April 20, 2007	
Summary of your charges	·	Details
S Balance from your last bill (including taxes)	\$0.00	on page २
Wireless services	27.45	4
Total before tax	27.45	
G.S.T. (#86239 5381)	1.65	
Total	\$29.10	

Other Rogers services available to you

- **O** Magazines
- O Long Distance services
- O Messaging services

Invoice date

April 05, 2007

Your account number

1-0124-9449

Your invoice number

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

Any payments we received and processed after April 07, 2007 will show on your next bill.

Questions?

Visit **www.rogers.com** or see **Contact us** on page 3.

HOW TO PAY YOUR ROGERS BILL

Choose a method that's convenient for you:

- online at rogers.com/onlinebilling
- automatically by pre-authorized chequing or credit card payment
- at any Rogers Video
- at most banks
- by cheque and mailing to: Rogers PO Box 9100 Don Mills, ON M3C 3P9

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

Your account number :

Total amount due:

\$29.10

○ ROGERS[™]

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account.

You don't need to make any additional payments.

MS MAIRT MATHESON

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

010124944910124944907040700000291000000000000000000000000000

BOARD EXPENSE FORM

NAME:	Maini	Mathern	
FOR THE MO	NTH OF:	Matheson ne 2007	
	U		
	EXPE	ENSES	
			01-71110300002
AIRFARE:		\$	
CAR RENTAL	:	\$	
ACCOMMODA	ATION:	\$	
MEALS:		\$	
PARKING: (Co	n bothers dead!) 2 07 Retrue tup hpat Rtw. Zo#x2	\$ \$_40.00	62210000
OTHER (pleas			
		\$	
		\$	
		\$	
MILEAGE: 3 (Attach Local Trave E	88 km at .43¢ /km xpense Claim form)	\$ 166.84	62210000
TOTAL EXPE	NSES:	\$ 206.84	
			L. De Coste
X:\BOARD\Honoraria\H	lonoraria Forms.DOC Revised: Octob	er 2005	

BOARD EXPENSE FORM

NAME:	Máii	Mathism	
FOR THE MC	ONTH OF:	Mathern we 2007 s.	s.17(1), 17(4)(g)(i)
		ENSES	J. 1. 2007
			01-71110300002
AIRFARE:		\$	<u>017111000002</u>
CAR RENTAL		\$	
ACCOMMOD	ATION:	\$ENTERED \$	JUL 1 3 2007
MEALS:		\$	
PARKING: (C	en bothers dead!) Le 07 Return tup 20. The part Rtn. Zoxx2	\$ \$ 40.00	62210000
OTHER (pleas	se describe):		
		\$	
		\$	
	<u></u>	\$	
MILEAGE:	km at .43¢ /km Expense Claim form)	\$ 166.84	62210000
TOTAL EXPE	NSES:	\$ 206.84	<u> </u>
			L. De Costa
X:\BOARD\Honoraria\l	Honoraria Forms, DOC Revised: Octobe	er 2005	186.84

		A DDL LOANIT A	000)/		
		APPLICANT (COPY		
calgary health region		MC Southport GH Other	LOC	AL TRAVEL E	EXPENSE CLAIM PARKING
INSTRUCTIONS:					
 Payment will be 	Directly Deposited to	your payroll bank acco	unt. Notification of	deposit will be E	-Mailed to your
 ORIGINAL REC 	EIPTS MUST BE AT	s OR mailed to your ho TACHED FOR PARKII reimbursed from si	NG WHERE POSS	BIBLE.	
EMPLOYEE NAME (Pr	int)	0		EMPLOYEE NUMB	
DEPARTMENT?	11/14/4 11/	TPHONE NUMBER		DATE	
Bou	0/			DAIL	
DATE OF TRAVEL/ EXPENSE		DETAILS		FKM RATE	
	! 	DETAILS		for mileage)	AMOUNT
me 7	Southbu	+ Poto (taxis a	منسير	tn-	
Ome 14	(3 +A Y	neetry chamber	Ze	ton.	
Ame 19	Clausholm	n / ota 156k		12 Km	
		/ 19() 33-14		. – 13/7	
me de	Board nu	to South	Pat Zo	km	
Phue 26	CMHA		16	em em	
7			1		
Ju 27	SouthPat	RAN	Ze	km	
	1				
7han	uk You for choosing				,
	ASSOCIA	TED CAB			
· ·	our transportation needs.	Canada International Arrival Westle			
Calgar	y International Airport	ASSOCIATED GAB			
:	national arrival door.	Date	7		
Car #	1351	Amount \$ 50 m	-		
1	Included #	-			
	•		38	8	
CODING & AUTHO					
	FINANCIAL CODE				
ORG FUNCTI	ONAL CENTRE	ACCOUNT	GL DESCR	RIPTION	AMOUNT (Including GST)
		6 2 2 1 0 0 0 0	MILEAGE/PAR	KING	-
EMPLOYEE SIGNATUR		$\neg C$	TOTAL	PAYABLE TO EMPLOYEE	
AUTHORIZATION		AUTHORIZER EMPLO	OYEE NUMBER	AUTHORIZER PH	ONE NUMBER
1 /	s.17(1),		- at nomben		UNE NUMBER

X:Board/Honoraria/Local Travel Expense Claim

DISTRIBUTION:

00073

WHITE-ACCOUNTS PAYABLE

BOARD EXPENSE FORM

## Parking: Majric Matheson		Matheson	Mairi	NAME:
O1-71110300002 AIRFARE: \$	- 2 2007	2007 to Jme	ONTH OF: May	FOR THE M
O1-71110300002 AIRFARE: \$				
AIRFARE: \$		ENSES	EXP	
CAR RENTAL: \$	01-71110300002			
ACCOMMODATION: \$		\$		AIRFARE:
MEALS: \$		\$	AL:	CAR RENTA
PARKING: \$	*	\$	DATION:	ACCOMMOD
TAXIS: \$ OTHER (please describe): \$		\$		MEALS:
OTHER (please describe):		\$		PARKING:
\$		\$		TAXIS:
			ase describe):	OTHER (plea
	•	\$		
\$		\$		
<u> </u>		\$		
MILEAGE: <u>PC</u> km at .44¢ /km \$ 37.84	62210000	\$ 37.84	Expense Claim form)	MILEAGE: (Attach Local Trave
* 37.84		\$ <u>37.84</u>	ENSES:	TOTAL EXPI
4. Polosta	4. aloste			
X:\BOARD\Honoraria\Honoraria Forms.DOC Revised: February 2006	•	nuary 2006	a\Honoraria Forms.DOC Revised: Febr	X:\BOARD\Honoraria

BOARD EXPENSE FORM

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

NAM	E:	Mairi	Matheson	
FOR	THE MO	NTH OF: May	Matheson 2007 to June	2 2007
		đ		PLANTO
		EXPI	ENSES	JUL 1 1 2007
				01-71110300002
AIRF	ARE:		\$	
CAR	RENTAL		\$	-
ACC	MMODA	ATION:	\$	
MEAL	.S:		\$ENTERED_JUL	4
PARK	ING:		\$	1 3 2007
TAXIS) > :		\$	
OTHE	R (pleas	e describe):		
			\$	
			\$	
			\$	
MILEA (Attach L	GE: E	km at .44¢ /km	\$ 3 7.84	69910000
TOTA	L EXPE	NSES:	\$ <u>37.84</u>	
√\B⊜∧₽₽		onoraria Forms.DOC Revised: Februa		e. aloste

<u>APPLICANT</u> COPY calgary health region ACH **FMC LOCAL TRAVEL EXPENSE CLAIM** Southport **PLC RGH** Other **MILEAGE & PARKING** INSTRUCTIONS: Payment will be Directly Deposited to your payroll 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 does not exist. ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. **EMPLOYEE NAME (Print) EMPLOYEE NUMBER** lain Matheso DEPARTMENT PHONE NUMBER DATE DATE OF TRAVEL # OF KM RATE EXPENSE **DETAILS** (for mileage) **AMOUNT** Zo lana Zokr Zolci Dolce VITA Zbka 86 **CODING & AUTHORIZATION** FINANCIAL GODE **44** ORG FUNCTIONAL CENTRE ACCOUNT **GL DESCRIPTION AMOUNT** (Including GST) 6 2 2 1 0 0 0 0 MILEAGE/PARKING EMPLOYEE SIGNATURE **TOTAL PAYABLE TO EMPLOYEE** AUTHORIZATION **AUTHORIZER EMPLOYEE NUMBER AUTHORIZER PHONE NUMBER** s.17(1),7(4)(g)(i)

X:Board/Honoraria/Local Travel Expense Claim

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WHITE-ACCOUNTS PAYABLE

943-112

BOARD EXPENSE FORM

NAME:	$-\mathcal{M}^{0}$	airi mathusor	V
FOR TH	E MONTH OF: Jaly a	airi Mathuson Luy Sept 07	
	EXP	PENSES	
			01-71110300002
AIRFAR	≣ :	\$	
CAR REI	NTAL:	\$	
ACCOM	MODATION:	\$	
MEALS:		\$	
PARKING	6: Hya# Hotel - C'd Menhol Health com ission	\$ 20.00	63210000
TAXIS:	NOTE	\$	_
OTHER (please describe):		
NOTE.	- Machine ale my	\$	
Parken	y tichet @ Hyatt	\$	
1totel	Jerst 10 2007!	\$	
MILEAGE (Attach Local T	: 94 km at .44¢ /km	\$ 41.36	63001663
TOTAL EX	KPENSES:	\$ 61.36	-
-			
1/0	rui for		4. Delaste
K:\BOARD\Hom	oraria\Honoraria Forms.DOC Revised: Februa	ary 2006	

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAME:	$-\mathcal{N}$	Jairi matheso	\sim
FOR THE MC	NTH OF:	airi Matheso ay Sept 07	s.17(1), 17(4)(g)(i
	<u> </u>	d ,	
	EX	(PENSES ENT	ERED OCT 19 2007
			01-71110300002
AIRFARE:		\$	
CAR RENTAL	.:	\$	
ACCOMMODA	ATION:	\$	
MEALS:		7 \$	
PARKING: H	gat Hotel - C'd Mens	M \$ 20.00	62211222
TAXIS:	Fealth commission NOTE	\$	
OTHER (pleas	e describe):		
NOTE - M	lachine ale my	\$ _	
Parkany +	ichet @ Hyatt	\$	
Hotel Se	pt 10 2007!	\$	
MILEAGE:C Attach Local Travel E	km at .44¢ /km	Rs. 41.36	63001663
TOTAL EXPEN	ISES:	\$_61.36	_
Jain	for		4. Decaste 41.36 20.00
(:			41.36
(:\BOARD\Honoraria\Ho	onoraria Forms.DOC Revised: Feb	oruary 2006	20.00

<i>a</i>			ΔPF	PLICANT	COPY			
calgary hea	Ith region	ACH PLC	_ FMC RGH	_ Southport	001 1	LOCA	L TRAVEL	EXPENSE CLAIM
 ORIGINA 	t will be Health F AL REC	Directly Deposite	ed to your pay dress OR ma	yroll bank accalled to your h	iome addres	ss if a vali	deposit will be d E-Mail addr	& PARKING E-Mailed to your ress does not exist.
EMPLOYEE	NAME (Pi		_	HESON.			MPLOYEE NUM	
DEPARTMEN	Bo	oand.		NUMBER		D	ATE	
DATE OF TR EXPENS	AVEL/		DETAIL	_S		# OF	KM RATE or mileage)	AMOUNT
Septo	1	Ama-1	7ºLaves	1 Patrun		161	cm	
Sept 1	0	Пан ны	el y Pet	wn.		14 k	cm .	
Sept 1	1	South	nt sta	EN .		Zok	ch	
Sept 1	3	Bonnaus	ta bake	SEX C	turn.	30 t	m.	
Sept 1	&	Board	Mtz.	Stampea	و	1410	0.	
		7				1110		
CODING & A	UTHOF	RIZATION				94		
e de la companya de l								
	THE CHARLES	NAL CENTRE	ACC	OUNT]	. DESCRIPT		AMOUNT (Including GST)
EMPLOYEE SK	NATURE		6 2 2 1	0 0 0 0				<u> </u>
	w	Ton	\subseteq		T		YABLE TO MPLOYEE	
AUTHORIZATIO		s.17(1),	17(4) (g)(i)	ORIZER EMPLO	OYEE NUMBE	R A	JTHORIZER PH	ı
00073		DISTR	IBUTION:	- WHITE	-ACCOUNT	S PAYAB		114-1

X:Board/Honoraria/Local Travel Expense Claim

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME:	ric Ma	theson.	
FOR THE MONTH OF July	ang Se	ot·	s.17(1), 17(4)(g)(i)
EX (Please attac	(PENSES h original r		TERED OCT 19 2007
Date Description	Amount	GST	Total
July Cogas Supt Cogas Supt Cogas July Telus " Supt Telus "	30.45 30.45 30.45 30.95 30.95	1.83 1.83 1.83 1.86 1.85	149.47 32.28 32.38 32.81 32.80 32.81
Financial code: 01-71110300003-62210 Expenditure Officer Authorization: Authorizer's Employee Number: s.17(1), 17(4)(g)(i) K:Board/Honoraria/Supplementary Expenses Claim Form	Print Name: Authorizer Phone	DeCre Number (in full):	212.45 Diste 22 RB



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My Rogers Bill

Account #;

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

Invoice Date:

-30.69

46.67

46.67

July 05, 2007

Name My Account(s)

MS MAIRI MATHESON

Invoice Number: 1012494477

Total amount due: \$49.47 Debited from your account on or after: July 21, 2007

Pay My Bill 🖂

Summary of your charges

S Balance from your last bill (including taxes) Amount of your last bill

\$30.69 Payment received - thank you June 22, 2007 credit of Balance from your last bill

\$0.00 \$0.00 Any payments we received and processed after July 08, 2007 will show on your next bill.

Current Balance

Payment History

Wireless services

Total before tax G.S.T. (#86239 5381) Details 📗

2.80 Total \$49.47

Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

Payment Method

Terms & Conditions

Paper Invoice

Download / Print PDF Invoice

You will need Adobe Acrobat version 3.0 or greater to view





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12/07/2007

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- · Change Contact Info - Add a Rogers Account
- · Name My Account
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- ➤ Combine Your Bills
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- ▶ Promotions
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- ➤ Wireless Tech Support
- ➤ Internet Help
- Contact Us

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Cable IV

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nogens Yourse hi-speed internet

Check your Rogers Yahoo Email

E-MAIL FRAUD



My Rogers Bill

s.17(1), 17(4)(g)(i)Account #:

Name My Account(s)

Home > For Consumers > Customer Service > My Rogers Bills > View My Rogers Bills

Invoice Date:

August 05, 2007

Invoice Number: 1012494487

MS MAIRI MATHESON

Total amount due: \$32.28 Debited from your account on or after: August 20, 2007

Pay My Bill 🗔

Summary of your charges

Balance from your last bill (including taxes)

Amount of your last bill Payment received - thank you July 21, 2007 credit of Balance from your last bill

Payment History

Current Balance

Any payments we received and processed after August 07, 2007 will show on your next bill. \$0.00

Wireless services

Paper Invoice

Total before tax G.S.T. (#86239 5381) Total

Download / Print PDF Invoice

Details 30.45 30.45

1.83 \$32.28

\$49.47

-49 47

Thank you!

Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

You will need Adobe Acrobat version 3.0 or greater to view.

ROGERS BULLETIN

Payment Method

Terms & Conditions





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E-MAIL FRAUD How to spot and stop identity theft online

Home > For Consumers > Customer Service > My Rogers Bills > View My Rogers Bills

My Rogers Bill

Account #:

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

Invoice Date:

September 05, 2007 🦸

Name My Account(s)

MS MAIRI MATHESON

Invoice Number: 1012494497

Current Balance

Payment History

Details ___

Terms & Conditions

Total amount due: \$32.28
Debited from your account on or after: September 19, 2007

Fav My Ett

Summary of your charges

Balance from your last bill (including taxes)

Amount of your last bill
Payment received - thank you August 20,
2007

\$32.28

Balance from your last bill \$0.00
Any payments we received and processed after September 06, 2007 will show on your next bill.

SHOW ON YOUR HEXT ON

Wireless services
Total before tax

G.S.T. (#86239 5381) Total 30.45 30.45

> 1.83 **\$32.28**

Thank you!
Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

Paper Invoice

Download / Print PDF Invoice

You will need Adobe Acrobat version 3.0 or greater to view

ROGERS BULLETIN BOARD

Payment Method

ROGERS NEWS

https://www.shoprogers.com/Customercare/OnlineBilling/ViewBill.asp?shopperID=mairi... 13/09/2007

TELUS'

TELUS"

My TELUS Statement

Bill Date: Jun 19, 2007

Due Date: Jul 11, 2007

M MATHESON Account number TELUS Account ID

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

Summary of my account

Total amount due by Jul 11, 2007

\$65.70

DO NOT pay this bill. \$65.70 will be debited to your pre-authorized payment account on Jul 08, 2007.

Previous charges and credits

Amount of your last bill Total payments processed for Account

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

71.64

-71.64

Total balance forward

			\$0.0
New charges			
Account	s.17(1), 17(4)(g)(i)		
Bundles (fr	om Jun 19 to Jul 18)	30.95	
Taxes		1.86	
Subtotal	s.17(1), 17(4)(g)(i)		32.81
Monthly se	rvices (from Jun 19 to Jul 18)	23.91	
Usage char	rges	3.20	
Taxes		1.60	
Subtotal igh Speed	s.17(1), 17(4)(g)(i)	3	28.71
Monthly ser	vices (from Jun 19 to Jul 18)	3.95	
Usage char	ges	0.00	
Taxes		0.23	
\$ubtotal			4.18
otal new char	ges		\$65.7

Total amount due

\$65.70 \$65.70

https://consumer.telus.com/common/globalForward.do?context_billingAccountId=20068... 26/06/2007

TELUS'

TELUS'

My TELUS Statement

Bill Date: Jul 19, 2007

Due Date: Aug 09, 2007

M MATHESON

Account number TELUS Account ID

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

Summary of my account

Total amount due by Aug 09, 2007

\$66.10

DO NOT pay this bill. \$66.10 will be debited to your pre-authorized payment account on Aug 06, 2007.

Previous charges and credits

Total payments processed for Account

Amount of your last bill

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

65.70

-65.70

Total balance forward

Total amount due

\$0.00

\$66.10

\$66.10

New charges s.17(1), 17(4)(g)(i)Account Bundles (from Jul 19 to Aug 18) 30.95 Taxes 1.85 Subtotal \$32.80 s.17(1), 17(4)(g)(i) Monthly services (from Jul 19 to Aug 18) 23.91 Usage charges 3.57 Taxes 1.63 Subtotal 29.11 High Speed s.17(1), 17(4)(g)(i) Monthly services (from Jul 19 to Aug 18) 3.95 Usage charges 0.00 Taxes 0.24 Subtotal 4.19 Total new charges

https://consumer.telus.com/common/globalForward.do?context_billingAccountId=20068... 24/07/2007

TELUS

TELUS'

My TELUS Statement

Bill Date: Aug 19, 2007

Due Date: Sep 10, 2007

M MATHESON

Account number TELUS Account ID

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

Summary of my account

Total amount due by Sep 10, 2007

\$75.24

\$0.00

\$75.24

\$75.24

DO NOT pay this bill. \$75.24 will be debited to your pre-authorized payment account on Sep 07, 2007.

Previous charges and credits

Amount of your last bill
Total payments processed for Account

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

66.10 -66.10

\$32.81

38.25

Total balance forward

New charges

Total amount due

Account

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

Bundles (from Aug 19 to Sep 18) 30.95
Taxes 1.86
Subtotal

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

Monthly services (from Aug 19 to Sep 18)
Usage charges
12.20
Taxes
2.14

Subtotal High Speed s.17(1), 17(4)(g)(i)

Monthly services (from Aug 19 to Sep 18)
Usage charges
0.00
Taxes
0.23

Subtotal 4.18
Total new charges

https://consumer.telus.com/common/globalForward.do?context_billingAccountId=20068... 29/08/2007

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAME	Mairi	marh	~~ .	
FOR T	HE MONTH OF: Oer	NOV	07	s.17(1), 17(4)(g)(i)
	•			
	EXPI	ENSES		
				01-71110300002
AIRFAF	IE:	\$		
CAR RE	ENTAL:	\$		
ACCOM	MODATION:	Ф		
MEALS:				
PARKIN	G:	\$		
TAXIS:	i	\$		
OTHER	(please describe):		1	
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DEPARTMENT	11/0	rec Ma	Heso	<u>~ · · · · · · · · · · · · · · · · · · ·</u>				
	and		PHO	NE NUMBER			DATE	nov'07
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<i>V</i> ()	V). [s.17(1),	17(4)(g)	(i)	FIEE NUMBER	`	_	HONE NUMBER
00072	we c	ese "					943	-1122

X:Board/Honoraria/Local Travel Eynense Claim

DISTRIBUTION:

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9 2008

23995 CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME				
FOR '	THE MONTH OF	Mairi Mather Dec'01 - Jan	s.17	7(1), 17(4)(g)(i)
	(Please	EXPENSES attach origina		ENTERED FEB
Date	Description	Amount	GST	Total
Doll	of Telus Ins	emt 30.95	1.86	R3D.81
	"	3,95	. 23	R 4.18
Dec 1		27.45	1.65	R 29.10
Jan a	sol Resus (au	1 2865	1.43	30.08
V	.1	30,94	105	RIZA
Dec 1	10000 07, 57	4 (mary) 13.96	1.85	111.19
Jan 1	900 Delus Inter	30.95 3.95	1.55	36.65
TOTAL	EXPENSES:	419		\$ 244.01
Financi Expenditur	al code: 01-7111030000 e Officer Authorization:	3-62210001 Print Name:		
Authorizer's	Employee Number:		hone Number (in full):	oste
Employee	ignature:	17(1), 17(4)(g)(i)	943-	1177
Ta	in female			
Y:Board/U	On oronio/Sumalum 5			RR
A.Boatu/ N	onoraria/Supplementary Expenses C	aım Form	6	A



My TELUS Statement

Bill Date: Nov 19, 2007

Due Date: Dec 11, 2007

M MATHESON Account number
TELUS Account ID

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

Summary of my account

Total amount due by Dec 11, 2007

\$76.30

\$0.00

\$76.30

\$76.30

DO NOT pay this bill. \$76,30 will be debited to your pre-authorized payment account on Dec 08, 2007.

Previous	charges	and (credits
----------	---------	-------	---------

Amount of your last bill	71.	.15
Total payments processed for Account	s.17(1), 17(4)(g)(i) -71	.15

Total balance forward	i	\$0.00
New charges	17(1) 17(4)(-)()	
Account	s.17(1), 17(4)(g)(i)	

m // (C A) 40 (D = 40)	30.95
Bundles (from Nov 19 to Dec 18)	
Taxes	1.86
Subtotal $s.17(1), 17(4)(g)(i)$	\$32.81
Monthly services (from Nov 19 to Dec 18)	23.91
Usage charges	13.20
Taxes	2.20
Subtotal	39.31
High Speed $s.17(1), 17(4)(g)(i)$	
Monthly services (from Nov 19 to Dec 18)	3.95
Usage charges	0.00
Taxes	0.23
Subtotal	4.18

Total new charges Total amount due

https://eagle.telus.com/ebill/wireline/Bill?BillDate=20071119

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E-MAIL FRAUD frow to spot and stop identity theft online 🗷



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My Rogers Bill

s.17(1), 17(4)(g)(i)Account #:

Invoice Date:

December 05, 2007

Name My Account(s)

MS MAIR! MATHESON

invoice Number: 10124944C7

Total amount due: \$29.10 Debited from your account on or after: December 19, 2007

Current Balance

Details

Pay My Sill 🗔

Payment History

Summary of your charges

Balance from your last bill

Amount of your last bill

\$33.87 Payment received - thank you November 19, 2007 credit of -33.87

\$0.00 Balance from your last bill Any payments we received and processed after December 06, 2007 will show on your next bill.

Wireless services

Total before tax G.S.T. (#86239 5381)

Total

27.45

1.65 \$29.10

Payment Method

Terms & Conditions

Paper Invoice Download / Print PDF Invoice

Thank you !
Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.

You will need Adobe Acrobat version 3.0 or greater to view.

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My Rogers Bill

 \cdot s.17(1), 17(4)(g)(i) Account #:

Invoice Date:

January 05, 2008

Name My Account(s)

MS MAIRI MATHESON

Invoice Number: 1012494418

Total amount due: \$30.08

Debited from your account on or after: January 19, 2008

Payment History

Pay My Bill 🔯

Summary of your charges Current Balance

Balance from your last bill

Amount of your last bill \$29.10 Payment received - thank you December 19, 2007 credit of -29.10 Balance from your last bill

\$0.00 Any payments we received and processed after January 06, 2008 will show on your next bill.

Wireless services

Total before tax G.S.T. (#86239 5381)

Total

Payment Method

Terms & Conditions

Details

Paper Invoice

Thank you!

Download / Print PDF Invoice

You will need Adobe Acrobat version 3.0 or greater to view.

Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments.



28.65

28.65

1.43

\$30.08



https://your.rogers.com/customercare/onlinebilling/ViewBill.asp

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My Payment History

Account #:

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

Name My Account(s)

Sort By:

Transaction Date	Payment Amount	Reference #	Paid By	Status	
January 19, 2008	\$30.08	337142789	DD	PYM	^
December 19, 2007	\$29.10	332522415	DD	PYM	
November 19, 2007	\$33.87	327847725	DD	PYM	
October 20, 2007	\$29.10	323457190	DD	PYM	
September 19, 2007	\$32.28	318812207	DD	PYM	
August 20, 2007	\$32.28	314242702	DD	PYM	
July 21, 2007	\$49.47	310331894	DD	PYM	
June 22, 2007	\$30.69	305799385	DD	PYM	
May 22, 2007	\$30.69	301571286	DD	PYM	v

- Pay My Bill
- Rogers Bill Summary

https://your.rogers.com/CustomerCare/OnlineBilling/PaymentHistory.asp?shopperID=ma... 11/02/2008

TELUS'

My TELU\$ Statement

Bill Date: Dec 19, 2007

Due Date: Jan 09, 2008

M MATHESON Account number TELUS Account ID

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

Note Moving Charges to # 114 2400 Smul Mens &W.

76.30 -76.30

Summary of my account

Total amount due by Jan 09, 2008

\$197.43

DO NOT pay this bill. \$197.43 will be debited to your pre-authorized payment account on Jan 06, 2008.

Previous char	ges and	credits
---------------	---------	---------

Total balance forward

Amount of your last bill	
Total payments processed for Account	s.17(1), 17(4)(g)(i)

\$0.00

New charges			
Account	s.17(1), 17(4)(g)(i)	
Bundles (from Dec 19 t	o Jan 18)	30.94
Taxes			1.85
Subtotal			\$32.79
	s.17(1), 1	7(4)(g)(i)	Recognition of
Monthly s	ervices (from	Dec 19 to Jan 18)	23.91
Additional	charges and	credits	35.00
Usage cha	arges		22.48
Taxes			4.85
Subtotal			86.24

High Speed s.17(1), 17(4)(g)(i)Monthly services (from Dec 19 to Jan 18)

Monthly services (from Dec 19 to Jan 18)

Additional charges and credits

Usage charges

0.00

Taxes

Subtotal
Total new charges

78.40 **\$**197.43

Total amount due \$197.43

https://eagle.telus.com/ebill/wireline/Bill?BillDate=20071219

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



TELUS e.Bill - p. 1 of 4 Bill Date: Jan 19, 2008

Account No:

My TELUS Statement

Jan 19, 2008

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

\$72.82

Bill Date: Jan 19, 2008 Due Date: Feb 10, 2008

M MATHESON

Total amount due

My Account No: My TELUS Account ID:

Customer Service

Manage my account online @: telus.com

Other inquiries @: telus.com/contactus

Summary of my account

Total amount due by Feb 10, 2008 DO NOT pay this bill. \$72.82 will be debited to your pre-authorized pay 07, 2008.	yment accou	nt on Feb	\$72.82
Previous charges and credits			
Amount of your last bill		197.43	
Total payments processed for Account		-123.23	
Adjustments for Account		-74.20	
Total balance forward $s.17(1), 17(4)(g)(i)$			\$0.00
New charges Account $s.17(1), 17(4)(g)(i)$			
Bundles (from Jan 19 to Feb 18)	30.95		
Taxes	1.55		
Subtotal $s.17(1), 17(4)(g)(i)$		\$32.50	
Monthly services (from Jan 19 to Feb 18)	23.91	To the same same	
Usage charges	10.56		
Taxes	1.70		
Subtotal		36.17	
High Speed $s.17(1), 17(4)(g)(i)$		00.11	
Monthly services (from Jan 19 to Feb 18)	3.95		
Usage charges	0.00		
Taxes	0.20		
Subtotal		4.15	
Total new charges		* **	\$72.82

CALGARY HEALTH REGION

BOARD EXPENSE FORM

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

NAME:	MAIRI MATHESON	
FOR THE MONTH OF:	APRIL 08 to may.	15'08
	EXPENSES ENTE	ERED JUN 0 9 2008
		01-71110300002
AIRFARE:	\$	
CAR RENTAL:	\$	
ACCOMMODATION:	\$	
MEALS:		
PARKING:		
TAXIS:	\$	
OTHER (please describe):		
	\$	_
	\$	
MILEAGE: 100 km a (Attach Local Travel Expense Claim form)	t.44¢/km \$ 44.00	6221100
TOTAL EXPENSES:	R \$ 160.56	=
j		
Employee Signa	ature: This Ten	L. Welc
X:\BOARD\Honoraria\Honoraria Forms.DOC	Revised: February 2006	
and a constant a control of the cont	Revised: February 2006	

-			APPLICANT (COPY		
calgary hea	alth region	ACH FM	C Southport	LC		EL EXPENSE CLAIM SE & PARKING
- ORIGIN	t will be D Health Re AL RECE	IPTS MUST BE AT	your payroll bank acc	ount. Notification	of deposit will	be E-Mailed to your ddress does not exist.
EMPLOYEE	NAME (Prir	it)	markeser		EMPLOYEE	
DEPARTMEN	1501	PRD	PHONE NUMBER		DATE	
DATE OF TE			DETAILS		# OF KM R/ (for mileage)	AMOUNT
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APRIL	7	South Port &		i i	Jokn	
PPRIL		Southford			Fokn Fokm	
APRI	7	FORT Calgo	,		+km	
APRIL	29	BourhPort	4 RIN		rikn	
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ORG	FUNCTION	ALCENTRE CONTROL	ASCOUNT.		CRIPTION	AMOUNT (Including GST)
EMPLOYEE \$	GNATURE	6 management	2 2 1 0 0 0 0			
	rici '	Tos		IUIA	L PAYABLE 1 EMPLOYE	_
AUTHORIZATI	ON (s.17(1), 17	AUTHORIZER EMPL $(4)(g)(i)$	OYEE NUMBER		R PHONE NUMBER
00073		DISTRIBU	TION: WHITE	-ACCOUNTS PA		

X:Board/Honoraria/Local Travel Expense Claim

1545454

CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAME	•	-	mair	i moth	ve son		
FOR 1	THE M	ONTH OF _	Feb	march	<u> 2008</u>	s.17(1), 17(4)(g)(i)	
		(Plea	EXP	PENSES original re	ENT	ERED JUN 0 9 2008	
Date	D	escription		Amount	GST	Total	
Feb	19	Telus		30.95	1.55	35.50	
Parc	119	Telias		30.95	1.55/	32.50	
Feb.	5	Rogers		27.45	1.37	2882	
March	5	Rogers		30,45	_1.52	31.97	
· · · · · ·							
		:					
				-			
TOTAL EXPENSES: \$ 125.79							
FINANC Expendit	CIAI COC ure Office	de: 01-7111030 r Authorization:	00003-622100)01 Print Name:			
4. Relate Las To Cost							
Authorize	r's Emplo	yee Number:	17(1), 17(4)(g)	· \	e Number (in full):		
Employe	o signatur)	<u> </u>	<u>143~ (12</u>	33	
X:Board	/Honorari	a/Supplementary Exper	nses Claim Form			< Ph	



TELUS e.Bill - p. 1 of 4 Bill Date: Feb 19, 2008

Account No:

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

\$71.88

My TELUS Statement

Feb 19, 2008

Bill Date: Feb 19, 2008 Due Date: Mar 11, 2008

M MATHESON

My Account No:

Total amount due

My TELUS Account ID:

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

Customer Service

Manage my account online @: telus.com Other inquiries @: telus.com/contactus

Summary of my account

Total amount due by Mar 11, 2008 DO NOT pay this bill. \$71.88 will be debited to your pre-authorized 08, 2008.	payment account o	n Mar	\$71.88
Previous charges and credits			
Amount of your last bill		72.82	
Total payments processed for Account		-72.80	
Adjustments for Account		-0.02	
Total balance forward $s.17(1), 17(4)(g)(i)$			\$0.00
New charges			*****
Account $s.17(1), 17(4)(g)(i)$			
Bundles (from Feb 19 to Mar 18)	30.95		
Taxes	1.55		
Subtotal			
		\$32.50	
s.17(1), 17(4)(g)(i) Monthly services (from Feb 19 to Mar 18)	20.00		
Usage charges	23.90		
Taxes	9.68		
	1.65		
Subtotal		35.23	
511, (1), 1, (1), (8), (1)			
Monthly services (from Feb 19 to Mar 18)	3.95		
Usage charges Taxes	0.00		
	0.20		
Subtotal		4.15	
Total new charges			\$71.88

the future is friendly.

TELUS e.Bill - p. 1 of 3 Bill Date: Mar 19, 2008

Account No:

My TELUS Statement

Mar 19, 2008

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

\$67.26

\$67.26

Bill Date: Mar 19, 2008 Due Date: Apr 12, 2008 M MATHESON

Total new charges

Total amount due

My Account No:

My TELUS Account ID:

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

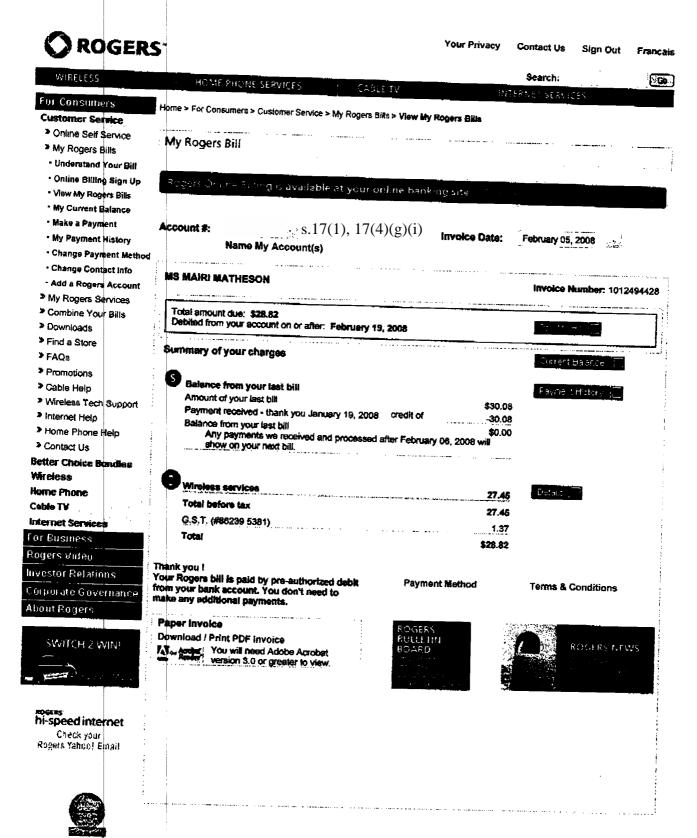
Customer Service

Manage my account online @: telus.com

Other inquiries @: telus.com/contactus

Summary of my account

Total amount due by Apr 12, 2008 DO NOT pay this bill. \$67.26 will be debited to your pre-authorize 09, 2008.	ed payment account o	on Apr	\$67.26
Previous charges and credits			
Amount of your last bill		71.88	
Total payments processed for Account		-71.88	
Total balance forward $s.17(1), 17(4)(g)(i)$, ,,,,,	\$0.00
New charges			
Account $s.17(1), 17(4)(g)(i)$			
Bundles (from Mar 19 to Apr 18)	30.95		
Taxes	1.55		
Subtotal $s.17(1), 17(4)(g)(i)$		\$32.50	
Monthly services (from Mar 19 to Apr 18)	23.90		
Usage charges	5.28		
Taxes	1.43		
Subtotal		30.61	
High Speed $s.17(1), 17(4)(g)(i)$		30.01	
Monthly services (from Mar 19 to Apr 18)	3.95		
Usage charges	0.00		
Taxes	0.20		
Subtotal	0.20	4.15	



https://worr more com/greetomassara/onlinahillina//iam/Dill and 2008-06-03 09:46 02424 >> CHR-CEO/Board

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My Current Balance			
Maké à Payment	Account #: s.17(1), 17(4)(g)(i)	
My Payment History	Marrie Marrie Anna and an anna an anna an anna an an anna an an	g)(1) Invoice Date:	March 05, 2008
Change Payment Me	hod		the Address of the Control of the Co
Change Contact Info	MS MAIR! MATHESON		
Add a Rogers Accou	II TOON WATER		Invoice Number: 101249443
My Rogers Services	The state of the s	The second management against a second secon	
ombine Your Bills	Total amount due: \$31,97	· Love	Christian Christ
Downloads	Debited from your account on or after: March 19, 2008		44.00
ind a Store	Communication of the communica		
AQs	Summary of your charges		Staront Barance
romotions	6		Courte Character 18 19
able Help	Balance from your last bill		Perment History ☐
vireless Tech Suppo	Amount of your last bill	\$28.8 2	The section of the se
ternet Help	Payment received - thank you February 19 2008 cr	edit of -28.82	
lome Phone Help	- salance from your last bill		
Ontact Us	Any payments we received and processed after on your next bill.	March 06, 2008 will show	
er Choice Bundles	The second section of the second seco	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
dess			
s Phone	Wireless services	55.15	Details [1]
eTV	Total before tax	30.46	
net Services	G.S.T. (#86239 5381)	30.45	
	Total	1.52	
Business	1043	\$31.97	
rs Video			
tor Relations	Think you! Your Rogers bill is paid by pre-authorized debx		
orate Glovernanc		Payment Method	Terms & Conditions
it Rogers	make any additional payments.		
.titogers	Paper Invoice		
		ROGERS	
WITCH 2 WIN!	A or Account You will need Adobe Acrobat	5ULLFAN (\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ROGERS NEWS
	version 3.0 or greater to view.		**************************************
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03/06/2008

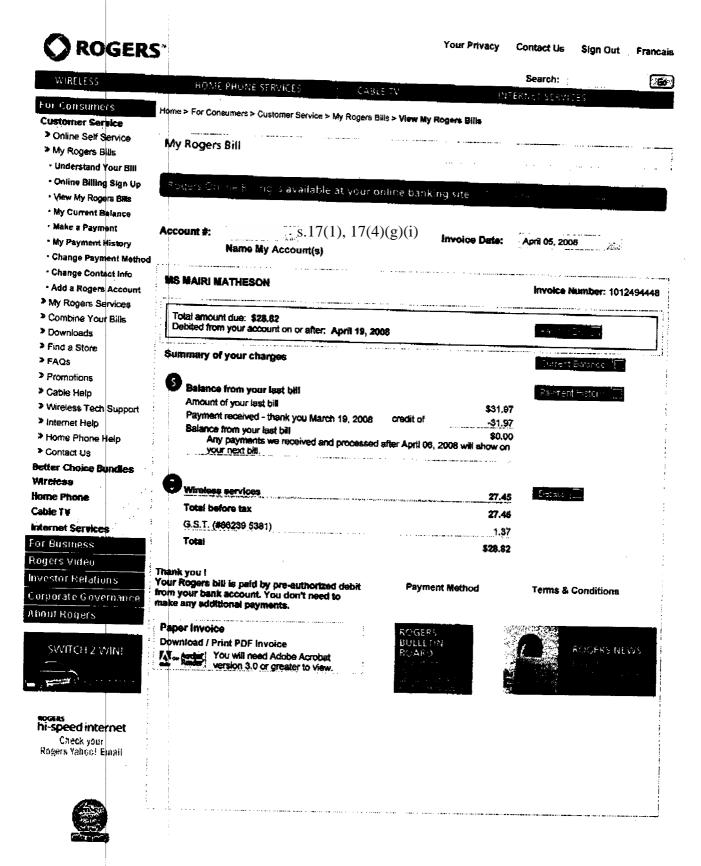
P 2/2

CALGARY HEALTH REGION

BOARD MEMBER SUPPLEMENTARY EXPENSE CLAIM FORM

NAM	E:	# 	MAINI	Matheso	ρη 		s.17(1), 17(4))(g)(i)
FOR	THE	MONTH OF	PPRIL	08 - m	y 15'0.	8	- 00	n a
		(D)		PENSES		TERED	JUN 0 9 20	yo
		(Plea	ase attach	original re	eceipts.)			
Date		Description		Amount	GST	Total		
PRAZ.	45 ₁	Rozer Teluc	S	-37.45	1.37_	28	.8ಎ	
APRI	L <i>[</i>]	Teluc		30.95	155	33.	so	
mai	15	Rogers		·27.45	1.37	2-28	3.82	
may	19	Telus		,30.95	1.55	232	382	
		: 						
-								
TOTA	L EX	PENSES:			R	<u> 12</u>	0.64	
Financ	cial co	ode: 01-7111030	0003-622100					
	P	per Authorization:		Print Name:	u De	Coste		
		oloyee Number:	17(1), 17(4)(g)(Authorizer Phone	Number (in full):	\ \		
Employe	Signat LUÍ	ure:	6					
X:Board/	Honorai	ria/Supplementary Expen	ses Claim Form	<				

Page 1 of 2



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03/06/2008

P 2/3

the future is friendly.

TELUS e.Bill - p. 1 of 3 Bill Date: Apr 19, 2008

My TELUS Statement

Apr 19, 2008

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

Bill Date: Apr 19, 2008 Due Date: May 10, 2008

M MATHESON My Account No:

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

Customer Service

Manage my account online @: telus.com Other inquiries @: telus.com/contactus

My TELUS Account ID:

Summary of my account

Total amount due by May 10, 2008 DO NOT pay this bill. \$69.11 will be debited 07, 2008.	to your pre-authorized payment accoun	t on May	\$69.11
Previous charges and credits			
Amount of your last bill	s.17(1), 17(4)(g)(i)	67.26	
Total payments processed for Account Total balance forward	8.17(1), 17(4)(g)(1)	-67.26	
total paralice in Main			\$0.00
New charges $s.17(1), 17(4)(g)(g)$	i)		
Bundles (from Apr 19 to May 18)	30.95		
Taxes	1.55		
Subtotal		\$ 32.50	
s.17(1), 17(4)(g)(i)		\$ 32.30	
Monthly services (from Apr 19 to May 18	3) 23.90		
Usage charges	7.04		
Taxes	1.52		
Subtotal		32.46	
High Speed $s.17(1), 17(4)$	(g)(i)	32.40	
Monthly services (from Apr 19 to May 18	3.95		
Usage charges	0.00		
Taxes	0.20		
Subtotal	55	4.15	
Total new charges		4.13	\$69.11
Total amount due			Ф U3.11
Total amount due			\$69.11

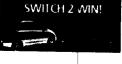
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Sign Out

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Your Privacy Contact Us **ROGERS** Search: WIRELESS HOME PHONE SERVICES CABLE TV INTERNET SERVICES For Consumers Home > For Consumers > Customer Service > My Rogers Bills > View My Rogers Bills **Customer Service** ➤ Online Self Service My Rogers Bill ➤ My Rogers Bills · Understand Your Bill Rogers Online Billing is available at your online banking site · Online Billing Sign Up · View My Rogers Bills - My Current Balance · Make a Payment Account #: \cdot s.17(1), 17(4)(g)(i) **Invoice Date:** May 05, 2008 • My Payment History Name My Account(s) · Change Payment Method · Change Contact Info MS MAIRI MATHESON Invoice Number: 1012494458 · Add a Rogers Account ➤ My Rogers Services Total amount due: \$28.82 ➤ Combine Your Bills Debited from your account on or after: May 19, 2008 Pari My Billi 🗓 ➤ Downloads > Find a Store Summary of your charges Current Balance ≯ FAQs **▶** Promotions Balance from your last bill Payment History ➤ Cable Help Amount of your last bill \$28.82 ➤ Wireless Tech Support Payment received - thank you April 19, 2008 credit of -28.82 > Internet Help Balance from your last bill \$0.00 Any payments we received and processed after May 06, 2008 will show on \$0.00 ▶ Home Phone Help your next bill. ➤ Contact Us Better Choice Bundles Wireless Wireless services Details ___ **Home Phone** Total before tax Cable TV 27.45 G.S.T. (#86239 5381) Internet Services 1.37 Total For Business \$28.82 Rogers Video Thank you! Investor Relations Your Rogers bill is paid by pre-authorized debit from your bank account. You don't need to make any additional payments. Payment Method **Terms & Conditions** Corporate Governance **About Rogers** Paper Invoice ROGERS BULLETIN BOARD Download / Print PDF Invoice You will need Adobe Acrobat version 3.0 or greater to view.



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https://your.rogers.com/CustomerCare/OnlineBilling/ViewBill.asp

21/05/2008

ROGERS NEWS

FROM:

TELUS"

My TELUS Statement

BIII Date: May 19, 2008

Due Date: Jun 13, 2008

M MATHESON Account number TELUS Account ID

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

Summary of my account

Total amount due by Jun 13, 2008

\$149.33

DO NOT pay this bill. \$149.33 will be debited to your pre-authorized payment account on Jun 10, 2008.

Previous charges and credits
Amount of your last bill

Total payments processed for Account

17(4)(~)(;)

69.11 -69.11

Total balance forward

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

\$0.00

New charges

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

Bundles (from May 19 to Jun 18) Taxes

30.95 1.55

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

\$32.50

4.15

Monthly services (from May 19 to Jun 18) Usage charges

23.90 83.44

Taxes

5.34

Subtotal

s.17(1), 17(4)(g)(i) 112.68

High Speed s.17(1), 17(4)Monthly services (from May 19 to Jun 18)

3.95

Usage charges Taxes

0.00 0.20

Subtotal
Total new charges

\$149.33

Total amount due

\$149.33

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03/04/2008

>> CHR-CEO/Board

P 3/3

CALGARY HEALTH REGION BOARD EXPENSE FORM

NAME:	main mathesa	
FOR THE MONTH OF:	Febl March 2008	s.17(1), 17(4)(g)(i)
	EXPENSES ENTERED	JUN 0 9 2008
	<u>)</u>	01-71110300002
AIRFARE:	\$	
CAR RENTAL;	\$	
ACCOMMODATION:	\$	
MEALS:	\$	
PARKING:	\$	
TAXIS:	\$	
OTHER (please describe):		
	\$	
	\$	<u> </u>
	\$	
MILEAGE: km at .44@ (Attach Local Travel Expense Claim form)	t/km \$ 50.16	₩10000
TOTAL EXPENSES:	\$_50.16	
Employee Signature	: fair Mac	4. Deloste
X:\BOARD\Honoraria\Honoraria Forms.DOC Re	evised: February 2006	6

APPLICANT COPY calgary health region ACH **LOCAL TRAVEL EXPENSE CLAIM** _ FMC _ Southport PLC ___ RGH Other_ **MILEAGE & PARKING INSTRUCTIONS:** Payment will be Directly Deposited to your payroll 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 does not exist. ORIGINAL RECEIPTS MUST BE ATTACHED FOR PARKING WHERE POSSIBLE. Amounts under \$ 100.00 can be reimbursed from site cashier office where available. **EMPLOYEE NAME (Print) EMPLOYEE NUMBER** Curi DEPARTMENT PHONE NUMBER DATE Soud Jub 08 mond08 DATE OF TRAVEL # OF KM RATE EXPENSE **DETAILS** (for mileage) **AMOUNT** may 25 10 km mand 3) KL 114 **CODING & AUTHORIZATION**

ORG FUNCTIONAL CENTRE ACCOUNT GL DESCRIPTION AMOUNT (Including GST)

EMPLOYEE SIGNATURE
AUTHORIZATION

S. 17(1), 17 (A)(g)(1)

AUTHORIZER EMPLOYEE NUMBER

AUTHORIZER PHONE NUMBER

O00073

DISTRIBUTION:

WHITE-ACCOUNTS PAYABLE

X:Board/Honoraria/Local Travel Expense Claim

25,95

CALGARY HEALTH REGION

BOARD EXPENSE FORM

NAME				Mairi	z T	atheor	<u>u. </u>			
FOR 1	HE MON	ITH OF:		gren	her'c	7	, Jan	80'	s.17(1), 17	(4)(g)(i
				EXPE	ENSES	8	ENTE	RED FE	± 9 200 8	
AIRFA	BF.				Φ.			<u>01-711</u>	10300002	
	ENTAL:				\$					
	MMODAT	ΓΙΟΝ:			\$ \$					
MEALS	 :				\$			-		
PARKI	NG:				\$			-		
TAXIS:	:				\$					
OTHER	R (please	describe):								
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MILEAC (Attach Loc	E:(al Travel Expe	ense Claim form	n at .44¢ /I	km :	\$	17.6	D_	6221	0000	
TOTAL	EXPENS	SES:		, -	\$	17.6	<u> </u>			
√\B ∩ ∆ R ∩\ Ł		oyee Sig		-	Tairi	Je	<u></u>) Y.	Dilas	te B
K:\BOARD\F	Ionoraria\Hono	raria Forms.DO	C Revise	d: February	2006	St	The state of the s	-		

30	APPLICANT	COPY		
calgary health re	ACH FMC Southport PLC RGH Other	LO	CAL TRAVEL MILEAGE 8	EXPENSE CLAIM R PARKING
Payment will Calgary Heal ORIGINAL F Amounts u	be Directly Deposited to your payroll bank accept the Region E-Mail address OR mailed to your become the RECEIPTS MUST BE ATTACHED FOR PARKINGER \$ 100.00 can be reimbursed from situations.	iome address if a v	alid E-Mail addre	ess does not exist.
EMPLOYEE NAME OF THE PROPERTY	Pairi Matheson		EMPLOYEE NUME	BER
	PHONE NUMBER		DATE	
DATE OF TRAVEI	DETAILS	# (OF KM RATE (for mileage)	AMOUNT
Jon 20	SouthPort & Roh 10	kn x 2 20	km	
Jan 31	Southbort & RTN 101	cm x 2 20	km	
		4		
CODING & AUTH	HORIZATION FINANCIAL GODE			
ORG FUNC	6 2 2 1 0 0 0 0	GL DESCR		AMOUNT (Including GST)
EMPLOYEE SIGNAT			PAYABLE TO EMPLOYEE	
AUTHORIZATION (AUTHORIZER EMPLO $(s,17(1),17(4)(g)(i))$	OYEE NUMBER	AUTHORIZER PHO	NE NUMBER
00073	DISTRIBUTION: WHITE	ACCOUNTS PAY		116
X:Board/Honoraria/l	Local Travel Expense Claim	JE		