

Office of the Information and Privacy Commissioner of Alberta  
 LeRoy Brower, Assistant Commissioner  
 Expenses Processed August 1, 2017 - September 30, 2017

**Travel Expenses**

Date Expenses Incurred	Destination	Description/Rationale	Transportation <sup>1</sup>	Accommodation	Per Diems <sup>2</sup> (no receipts)	Meals (with receipts)	Other <sup>3</sup>	Total
Sept 18	Edmonton, AB	Parking-meeting with Alberta Health	\$ -	\$ -	\$ -	\$ -	\$ 9.52	\$ 9.52
Sept 25-26	Calgary, AB	Meeting in the Calgary office and attended Right to Know Forum	134.67	131.72	57.62	-	9.53	333.54
<b>Total</b>			<b>\$ 134.67</b>	<b>\$ 131.72</b>	<b>\$ 57.62</b>	<b>\$ -</b>	<b>\$ 19.05</b>	<b>\$ 343.06</b>

<sup>1</sup>Transportation includes: airfare, mileage, rental vehicle, Red Arrow

<sup>2</sup>Where receipts are not provided, Government of Alberta approved per diem meal rates and daily incidental rates are claimed.

<sup>3</sup>"Other" Includes taxis, parking, telephone long distance and other sundry travel costs supported by receipts.

**Hospitality/Working Session Expenses**

Date Expenses Incurred	Description/Rationale	Hospitality	Working Session	Total
<b>Total</b>		<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>Total Expenses</b>				<b><u>\$ 343.06</u></b>



Nuvo Hotel Suites  
 827 12th Ave SW  
 Calgary, AB, CA T2R 0J1

# Check-in receipt

Name: LeRoy Brower  
 Check-in: Monday Sep 25, 2017  
 Check-out: Tuesday Sep 26, 2017  
 Confirmation #: 16034986  
 Invoice number: 38883  
 GST#: 790429526RT0001

LeRoy Brower  
 null  
 CA

*RTK / meeting in Calgary office*

Date	Description of services	Cost(CAD)
2017/09/25 2017/09/25	Unit 401: Queen Bed Suite - Government Discount Rate Parking	126.65 10.00
	<i>#121.72 Expense</i> <i>#6.33 GST</i> <i>#9.53 Expense</i> <i>.47 GST</i> <hr/> <i>#148.05</i>	
	Sub-total	136.65
	GST	6.33
	TL	5.07
	Total	148.05
	MasterCard: Sep 25, 2017 - XXXX XXXX XXX	148.05
	Amount owing (CAD)	<b>0.00</b>

Please make check payable to: Nuvo Hotel Suites

I agree that my liability for this bill is not waived and I agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of or the full amount of these charges. I also agree that I am responsible for any damages to the room, and that the hotel is 100% non-smoking, with a \$400 charge if caught smoking in the suite (including balcony). The parking access card, if assigned, must also be returned or a \$400 charge will apply. Also in case of public disturbance including noise nuisance, I agree that I am responsible for the charge of up to \$500.

Customer signature: \_\_\_\_\_

MUVO HOTEL SUITES  
827 12 AVE SW  
CALGARY AB T2R0J1  
4038792337

**SALE**

MID: 6048112                    HST: 1234567890  
TID: 001                        REF#: 00000009  
Batch #. 442  
09/25/17                        11:42:31  
APPR CODE: 134236  
MASTERCARD                    Chip  
\*\*\*\*\*                        \*\*/\*\*

**AMOUNT                    \$148.05**

APPROVED

MasterCard  
AID: A0000000041010  
TVR 00 00 00 80 00  
TSE E8 00

BY ENTERING A VERIFIED PIN, CARDHOLDER AGREES  
TO PAY ISSUER SUCH TOTAL IN ACCORDANCE WITH  
ISSUER'S AGREEMENT WITH CARDHOLDER  
IN ACCORDANCE WITH ISSUER'S  
AGREEMENT  
WITH CARDHOLDER

THANK YOU / MERCI!

CUSTOMER COPY

ATB PLACE  
GST:887315638RT001  
RECEIPT C2

IN: 18.09.17 08:15  
OUT: 18.09.17 10:06  
AMOUNT: \$ 10.00  
CC-DATA:  
-----

----- TRANSACTION  
RECORD -----

Card #:  
\*\*\*\*\*  
Card Entry:CHIP  
Account:MASTERCARD  
Trans:PURCHASE  
Amount:\$10.00  
Auth #:120715  
Sequence #:000002  
Term ID: 003  
Date:17/09/18  
Time:10:06:03

APPROVED

BY ENTERING A VERIFIED  
PIN, CARDHOLDER  
AGREES TO PAY ISSUER  
SUCH TOTAL IN  
ACCORDANCE WITH  
ISSUERS AGREEMENT WITH

CARDHOLDER

Application Label:  
MasterCard  
TVR: 0000008000  
AID: A0000000041010  
TSI: E800  
TC: 85B3B6FB663EDCFC

\*\*\* CUSTOMER  
COPY \*\*\*

*Meeting - Alberta  
Health*

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GSTt:887315638RT001  
Thank you for  
Visiting!  
6008

*10.00 - Expense  
.48 - Less GST  
9.52*