

# Fort McMurray Catholic Board of Education

9809 Main Street, Fort McMurray, Alberta, T9H 1T7 Phone: (780) 799-5700

DATE	DESCRIPTION	REFERENCE	AMOUNT
03/01/15	ASBA Meeting Expenses	V79687	587.56

VENDOR NUMBER

( ) -4089

CUSTOMER NUMBER

CHEQUE NUMBER

64950

TOTAL AMOUNT

587.56

THIS CHEQUE CONTAINS A SECURITY WATERMARK ON REVERSE - HOLD AT AN ANGLE TO VIEW!

## Fort McMurray Catholic Board of Education

9809 Main Street, Fort McMurray, Alberta, T9H 1T7 Phone: (780) 799-5700

Province of Alberta - Treasury Branch  
Fort McMurray, Alberta

DATE 0 4 0 2 2 0 1 5  
M M D D Y Y Y Y

PAY THE SUM OF EXACTLY \$587 DOLLARS 56 CENTS  
TO THE ORDER OF

\$ \*\*\*\*\*587.56

PAULA GALENZOSKI

Chairman

*Tracy McKinnon*

Secretary-Treasurer

*Luigi Horn*

⑈066950⑈ ⑈08⑈ 20... 110⑈ ⑈00000⑈



# Fort McMurray Catholic Schools Expense Claim

Employee Name <u>Paula Galenzoski</u>		Facility <u>TRUSTEE</u>	
Date		Destination	
Purpose of meeting for function <u>ASBA Meeting</u>			
Leave Fort McMurray Date <u>Feb 26</u>		Arrive Fort McMurray Date <u>Feb 27</u>	
Time <u>3</u> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>		Time <u>9</u> AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	

			AMOUNT CLAIMED
Prov. Vehicle Usage	No. of KM. <u>874</u>	Rate per KM \$ 0.44	<u>384.56</u>
*Air/Rail/Bus Fare	Mode of Transportation		
Per Diem	No. of 24 hr. Periods <u>1</u>	Per Diem Rate <u>\$193/day</u>	<u>193.00</u>
*Hotel Accommodations	No. of Nights	Rate Deducted Pers, Expenses	Amount
Breakfast	Lunch	Dinner	
No.   Rate \$9.20	No.   Rate \$11.60	No.   Rate \$20.75	
Registration Fees			
Taxis/Busses/Parking	<u>parking</u>		<u>\$10.00</u>
Honorarium			
Other expenses (provide details)			

ENTERED  
 APR 02 2015

I Certify that the above is a true statement of my expenses and that all expenditures were incurred on district business.

Paula Galenzoski  
Employee Signature

**Additional Information:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sub-Total  
\$ 587.56

Less Advance  
\$ \_\_\_\_\_

Amount Claimed  
\$ 587.56

General Leger Account #	Amount
<u>5,460.8140 (S)</u>	<u>394 56</u>
<u>5,281.8140 (BO (Boost))</u>	<u>193 00</u>

Approval Superintendent or Designate  
 \_\_\_\_\_  
 Date

For Finance Department use ONLY:  
 Expenditure office verification: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: \*Attach ALL receipts. Adjustment may be make without notification for calculation errors

**OLD SCONA PARKING**

10425 - 84th Ave, Edmonton

10.00

Charges are for use of parking space only.  
This company assumes no responsibility  
whatever for loss or damage due to fire, theft,  
collision or otherwise, to the vehicle or its  
contents, however caused.

GSTR118894070

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**CHECK IN AND OUT WITH CASHIER**  
INCLUDES G.S.T.

0081985

**OSP**

0081985

# Fort McMurray Catholic Board of Education

9809 Main Street, Fort McMurray, Alberta, T9H 1T7 Phone: (780) 799-5700

DATE	DESCRIPTION	REFERENCE	AMOUNT
04/29/15	ASCA Conference Travel	V80005	1,087.70

VENDOR NUMBER	CUSTOMER NUMBER	CHEQUE NUMBER	TOTAL AMOUNT
( ) -4089		65243	1,087.70

THIS CHEQUE CONTAINS A SECURITY WATERMARK ON REVERSE - HOLD AT AN ANGLE TO VIEW.

## Fort McMurray Catholic Board of Education

9809 Main Street, Fort McMurray, Alberta, T9H 1T7 Phone: (780) 799-5700

65243

Province of Alberta - Treasury Branch  
Fort McMurray Alberta

DATE 0 5 0 8 2 0 1 5  
M M D D Y Y Y Y

PAY THE SUM OF EXACTLY \$1,087 DOLLARS 70 CENTS  
TO THE ORDER OF

\$ \*\*\*\*1087.70

PAULA GALENZOSKI

Chairman

*Tracy McKinnon*

Secretary-Treasurer

*Justin Horn*



# Fort McMurray Catholic Schools Expense Claim

Employee Name <u>Paula Galenzoki</u>		Facility <u>TRUSTEE</u>	
Date <u>APRIL 29/15</u>		Destination <u>EDMONTON</u>	
Purpose of meeting for function <u>ASCA conference</u>			
Leave Fort McMurray Date <u>THURS APRIL 23/15</u> Time <u>3:00</u> <u>AM/PM</u>		Arrive Fort McMurray Date <u>SUN APRIL 26/15</u> Time <u>5:00</u> <u>AM/PM</u>	

			AMOUNT CLAIMED
Prov. Vehicle Usage	No. of KM. <u>874</u>	Rate per KM \$ 0.44	384.56
*Air/Rail/Bus Fare	Mode of Transportation		
Per Diem	No. of 24 hr. Periods <u>2.5</u>	Per Diem Rate	492.00
*Hotel Accommodations	No. of Nights <u>1</u>	Rate Deducted Pers. Expenses	<del>159.04</del>
Breakfast		Dinner	<del>159.04</del>
No.   Rate \$9.20	Lunch No. <u>1</u>   Rate \$11.60	No. <u>2</u>   Rate \$20.75	53.10
Registration Fees			
Taxis/Busses/Parking			
Honorarium			
Other expenses (provide details)			
<b>RECEIVED</b> MAY 08 2015			

I Certify that the above is a true statement of my expenses and that all expenditures were incurred on district business.

Paula Galenzoki  
Employee Signature

**Additional Information:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sub-Total \$

Less Advance \$

Amount Claimed \$ 1088.70

General Ledger Account #	Amount
<u>5.460.8140.80</u>	<u>595.70</u>
<u>5.281.8140.80</u>	<u>492.00</u>
	<u>28.37 GST</u>

[Signature]  
Approval Superintendent or Designate  
8 May 2015  
Date

For Finance Department use ONLY:  
Expenditure office verification: [Signature] Date: \_\_\_\_\_

NOTE: \*Attach ALL receipts. Adjustment may be make without notification for calculation errors



102

04-24-15

	Folio No. :		Room No. : 302
-	A/R Number :		Arrival : 04-23-15
Canada	Group Code :		Departure : 04-24-15
	Company :		Conf. No. : 66662054
	Membership No. : PC	412108300	Rate Code : IGCOR
	Invoice No. :		Page No. : 1 of 1

Date	Description	Charges	Credits
04-23-15	*Accommodation	142.00	
04-23-15	GST Tax - Room 5%	7.10	
04-23-15	Tourism Levy - Room 4%	5.68	
04-23-15	Destination Marketing Fee + GST	4.26	
		<b>Total</b>	<b>159.04</b>
		<b>Balance</b>	<b>159.04</b>

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - [www.ihg.com/reviews](http://www.ihg.com/reviews). We look forward to welcoming you back soon.

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

I have received the goods and / or services in the amount shown hereon. 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 associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

**Aurora Lounge**  
 4404 Gateway Blvd  
 Edmonton, AB  
 Tel: 780-431-3468  
 Review us on TripAdvisor.ca  
 GST#365717755RT0001

7593 Gst 0  
 Apr 24 '15 04:35PM

Subtotal 15.95  
 15.95 GST 0.80  
 Amount Due 16.75

Tip: \_\_\_\_\_

Total: \_\_\_\_\_

Signature \_\_\_\_\_

Print Name: \_\_\_\_\_

Room \_\_\_\_\_

Share Your Experience  
 www.dinedelta.com

*Dinner*  
 DELTA EDMONTON SOUTH  
 4404 GATEWAY BLVD  
 EDMONTON AB T6H 5C2  
 (780) 434-6415

**DEBIT SALE**

Server #: 000117  
 MID: 4297991  
 TID: G4297991 REF#: 00000007  
 Batch # 257 SEQ 257001001007  
 04/24/15 19:37:18  
 # 6367C

**AMOUNT \$16.75**  
**TIP \$3.00**  
**TOTAL \$19.75**

00 - APPROVED - 001

SIGNATURE NOT REQUIRED

INTERAC  
 AID: A0000002771010  
 TVR: 80 80 00 80 00  
 ISI: 68 00

Share Your Experience  
 www.dinedelta.com

MERCHANT COPY

**HOANG LONG NOODLE HOUSE**

GST#861775203

Table #4

514931

Serv: Manager

Apr 24 '15 08:17 PM

Quan Descrip

1 Pop \$2.00  
 1 D3 Beef Satay Noodle \$12.00

Net Total: \$14.00

GST \$0.70

**TOTAL : \$14.70**

Food: \$12.00

Beverage: \$2.00

**THANK YOU**  
**PLEASE COME AGAIN**

*Dinner*  
 HOANG LONG NOODLE  
 8882 170 ST  
 2575  
 EDMONTON AB T5T 4M2  
 (780) 483-0891

**SALE**

MID: 4052636 REF#: 00000106  
 TID: H4052636 SEQ: 209001001106  
 Batch #: 209 04/23/15 21:02:38  
 CVC: Y  
 APPR CODE: 072035

**AMOUNT \$14.70**  
**TIP \$2.00**  
**TOTAL \$16.70**

00 - APPROVED - 001

VISA  
 AID: A0000000031010  
 TVR: 00 00 00 80 00  
 TSI: F8 00

THANK YOU

CUSTOMER COPY

Lunch

HOANG LONG NOODLE  
8882 170 ST  
2575  
EDMONTON AB T5T 4M2  
(780) 483-0891

HOANG LONG  
NOODLE HOUSE

GST#861775203

Table #3

Trans#: 514989 Manager: 3  
4/24/2015 2:54:35 PM # (cust:1)

Quan	Descript	Cost
1	Pop	\$2.00
1	F2 Verm. 2 Colours	\$11.00
Net Total:		\$13.00
GST		\$0.65

TOTAL : \$13.65

Food: \$11.00  
Beverage: \$2.00

THANK YOU  
PLEASE COME AGAIN

SALE

MD: 4052636  
TID: H4052636 REF#: 00000037  
Batch #: 210 SEQ: 210001001037  
04/24/15 14:54:34 CVC: Y

APPR CODE: 030422  
VISA  
\*\*\*\*\*2330C \*\*

AMOUNT \$13.65  
TIP \$2.00  
TOTAL \$15.65

00 - APPROVED - 001

AID: A0000000031010  
TVR: 00 00 00 80 00  
TS: F8 00

THANK YOU  
CUSTOMER COPY



# Fort McMurray Catholic Board of Education

9809 Main Street, Fort McMurray, Alberta, T9H 1T7 Phone: (780) 799-5700



DATE	DESCRIPTION	REFERENCE	AMOUNT
06/09/15	ASBA Spring AGM	V80426	1,107.00
06/09/15	ACSTA Board of Directors Meeting	V80427	299.00

VENDOR NUMBER

( ) -4089

CUSTOMER NUMBER

CHEQUE NUMBER

65638

TOTAL AMOUNT

1,406.00

THE CHECK CONTAINS A SECURITY WATERMARK, OR REVERSE-HOLE, BY AN ANGLE TO THE FIBRE

## Fort McMurray Catholic Board of Education

65638

9809 Main Street, Fort McMurray, Alberta, T9H 1T7 Phone: (780) 799-5700

Province of Alberta - Treasury Branch  
Fort McMurray Alberta

DATE 0 6 2 4 2 0 1 5  
M M D D Y Y Y Y

PAY THE SUM OF EXACTLY \$1,406 DOLLARS 00 CENTS  
TO THE ORDER OF

\$ \*\*\*\*1406.00

PAULA GALENZOSKI

2

Chairman

*Tracy McKinnon*

Secretary-Treasurer

*Luini Ham*



# Fort McMurray Catholic Schools Expense Claim

Employee Name <u>Paula Balenzoski</u>		Facility <u>Trustee</u>	
Date <u>June 9/15</u>		Destination <u>Red Deer</u>	
Purpose of meeting for function <u>ASBA Spring AGM</u>			
Leave Fort McMurray Date <u>May 31/15</u> Time <u>10:00</u> <u>AM</u> /PM		Arrive Fort McMurray Date <u>June 3/15</u> Time <u>4:30</u> AM/ <u>PM</u>	

			AMOUNT CLAIMED
Prov. Vehicle Usage	No. of KM. <u>1200</u>	Rate per KM <u>\$0.44</u>	<u>528.00</u>
*Air/Rail/Bus Fare	Mode of Transportation <u>193.00</u>		<u>579.00</u>
Per Diem	No. of 24 hr. Periods <u>3</u>	Per Diem Rate <u>199.00</u>	<u>597.00</u>
*Hotel Accommodations	No. of Nights	Rate Deducted Pers, Expenses	Amount
Breakfast	Lunch	Dinner	
No.   Rate \$9.20	No.   Rate \$11.60	No.   Rate \$20.75	
Registration Fees			
Taxis/Busses/Parking			
Honorarium			
Other expenses (provide details)	<b>ENTERED</b> <u>JUN 24 2015</u>		

I Certify that the above is a true statement of my expenses and that all expenditures were incurred on district business.

*Paula Balenzoski*  
Employee Signature

**Additional Information:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Sub-Total  
\$ 1107.00  
~~1125.00~~  
 Less Advance  
 \$ 1107.00  
 Amount Claimed  
 \$ 1125.00

General Ledger Account #	Amount
<u>5.281.8040 80</u>	<u>579.99</u>
<u>5.460.8040 80</u>	<u>528</u>

*Superis*  
Approval Superintendent or Designate  
22 Jun 2015  
Date

For Finance Department use ONLY:  
 Expenditure office verification: *fm* Date: \_\_\_\_\_

NOTE: \*Attach ALL receipts. Adjustment may be make without notification for calculation errors



# Fort McMurray Catholic Schools Expense Claim

RECEIVED  
JUN 13 2015

Employee Name <u>Paula Galenzok</u>		Facility <u>TRUSTEE</u>	
Date <u># June 9, 2015 4089</u>		Destination <u>EDMONTON</u>	
Purpose of meeting for function <u>ACSTA Board of Directors Meeting</u>			
Leave Fort McMurray		Arrive Fort McMurray	
Date <u>May 28/15</u>	Time <u>8:00 AM</u>	Date <u>6:00 MAY 30/15</u>	Time <u>6:00 AM</u>

			AMOUNT CLAIMED
Prov. Vehicle Usage	No. of KM.	Rate per KM	\$ 0.44
*Air/Rail/Bus Fare	Mode of Transportation		
Per Diem	No. of 24 hr. Periods <u>1.5</u>	Per Diem Rate <u># 193 / # 106</u>	<del>\$ 299.00</del>
*Hotel Accommodations	No. of Nights	Rate Deducted Pers, Expenses	Amount
Breakfast	Lunch	Dinner	
No.   Rate \$9.20	No.   Rate \$11.60	No.   Rate \$20.75	
Registration Fees	<u>1 day @ \$ 193</u>		
Taxis/Busses/Parking	<u>1/2 day @ 106</u>		
Honorarium			
Other expenses (provide details)	<u>(Board Policy GP 7)</u>		

I Certify that the above is a true statement of my expenses and that all expenditures were incurred on district business.

*Paula Galenzok*  
Employee Signature

**Additional Information:**

ENTERED  
JUN 24 2015

Sub-Total \$

Less Advance \$

Amount Claimed \$ 299.00

General Ledger Account #	Amount
<u>5 281.8040.80</u>	<u>299.00</u>

*[Signature]*  
Approval Superintendent or Designate  
22 Jun 2015  
Date

For Finance Department use ONLY:  
Expenditure office verification: *[Signature]* Date: \_\_\_\_\_

NOTE: \*Attach ALL receipts. Adjustment may be make without notification for calculation errors



1200. 9925.109 Street Edmonton Alberta Canada T5K 2J8  
 Phone 780.451.7142 or 1.800.661.3470 Fax 780.455.0167

**Alberta School Councils' Association**

**Invoice**

Date	Invoice #
18/03/2015	200001182

<b>Bill To</b>
Jill Tully Fort McMurray Catholic Schools 9809 Main Street Fort McMurray, AB T9H 1T7 Canada

<b>Ship To</b>
Paula Galenzoski Fort McMurray Catholic Schools 9809 Main Street Fort McMurray, AB T9H 1T7 Canada

PO Number	Terms	Due Date
	Due on receipt	18/03/2015

Qty	Description	Price	Totals
1	A. Conference & AGM Event Pass ASCA Member - Paula Galenzoski	\$325.00	\$325.00
<b>Sub-Total</b>			\$325.00
<b>Total</b>			\$325.00

**Payments/Adjustments**

Qty	Description	Price	Totals
1	Payment via Credit Card (using card xxxxxxxxxxxx <i>Applied to invoice on 18/03/2015 12:55:18 PM</i> )	-\$325.00	-\$325.00
<b>Total Payments/Adjustments</b>			-\$325.00
<b>Balance Due</b>			\$0.00

1200, 9925.109 Street Edmonton Alberta Canada T5K 2J8  
 Phone 780.451.7142 or 1.800.661.3470 Fax 780.455.0167  
**Alberta School Councils' Association**

# Invoice

Date	Invoice #
18/03/2015	200001183

<b>Bill To</b>
Jill Tully Fort McMurray Catholic Schools 9809 Fort McMurray, AB T9H 1T7 Canada

<b>Ship To</b>
Paula Galenzoski Fort McMurray Catholic Schools 9809 Main Street Fort McMurray, AB T9H 1T7 Canada

PO Number	Terms	Due Date
	Due on receipt	18/03/2015

Qty	Description	Price	Totals
1	Friday Pre-session ASCA Member Customer Response: Registering for Session A. Sponsorships for Schools	\$45.00	\$45.00
<b>Sub-Total</b>			\$45.00
<b>Total</b>			\$45.00

## Payments/Adjustments

Qty	Description	Price	Totals
1	Payment via Credit Card (using card xxxxxxxxxxxx) Applied to invoice on 18/03/2015 1:01:44 PM	-\$45.00	-\$45.00
<b>Total Payments/Adjustments</b>			-\$45.00
<b>Balance Due</b>			\$0.00





**Invoice**

**Invoice Number** 1693372-80181520  
**Registration ID:** 80181520  
**Registration Date:** 02/04/2015  
**Invoice Date:** 02/04/2015  
**Issued By:** Alberta School Boards Association  
 e.g., "VAT Number 1234"  
**Event:** Student voices: SGM 2015

**Registrants**

Name	Registration ID	Board/Organization	Type
<u>George McGuigan</u>	80181520	Fort McMurray Catholic Schools	Conference - Member
<u>Paula Galenzoski</u>	80181806	Fort McMurray Catholic Schools	Conference - Member
<u>Tracy McKinnon</u>	80181899	Fort McMurray Catholic Schools	Conference - Member
<u>Geraldine Carbery</u>	80181978	Fort McMurray Catholic Schools	Conference - Member
<u>Keith McGrath</u>	80182084	Fort McMurray Catholic Schools	Conference - Member

**Billing Information**

George McGuigan  
 Fort McMurray Catholic Schools  
 9809 Main Street  
 Fort McMurray, AB T9H 1T7  
 7807995700  
 george.mcguigan@fmcsd.ab.ca

**Fees**

Fee	Quantity	Unit Price	Amount
Conference Event Fee	5	CDN\$600.00	CDN\$3,000.00
Subtotal:			CDN\$3,000.00
GST:			CDN\$150.00
Total:			CDN\$3,150.00



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**Transactions**

<b>Transaction Type</b>	<b>Date</b>	<b>Amount</b>	<b>Balance</b>
Transaction Amount	02/04/2015	CDN\$3,150.00	CDN\$3,150.00
<b>Current Balance:</b>			<b>CDN\$3,150.00</b>

**Payment Method**

Payment Method: Check

**Payment Instructions**

**DO NOT SEND PAYMENT.** The Alberta School Boards Association will be issuing invoices after the conference.  
Thank you

**Refund Information**

**Cancellations/refunds**

The deadline for cancellations is May 22, 2015. No refunds will be issued after this date. Delegate substitutions are accepted.

( ) -4089 Paula Galenzoski CUST ACCT #  
 CURR ( 5,035.89 ) ADJ ( ) PREV ( 8,255.33 ) NEXT ( )

INV DATE	TY	NUMBER	PO NUMBER	AMOUNT	CHEQUE	TY	PAY TO (*FROM)	BATCH	CHQ DATE	CLEARED	DUE DATE	HOLD
06/09/15	IN	V80426		1107.00	65638	CH	ASBA Spring AGM	13805	06/24/15	06/29/15		N
06/09/15	IN	V80427		299.00	65638	CH	ACSTA Board of Directors Meeting	13805	06/24/15	06/29/15		N
04/29/15	IN	V80005		1087.70	65243	CH	ASCA Conference Travel	13673	05/08/15	05/14/15		N
03/01/15	IN	V79687		587.56	64950	CH	ASBA Meeting Expenses	13583	04/02/15	04/09/15		N
11/25/14	IN	V78346		1954.63	63713	CH	ACSTA & ASBA Convention Travel	13140	11/27/14	12/02/14		N

5,035.89 +  
 532.00 +  
 682.50 +  
 630.00 +  
 325.00 +  
 45.00 +

006

7,250.39