



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36385
MLA Name: Routley, Bill VM150069 **Claim Date:** April 03, 2016
Constituency: Cowichan Valley
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Riding **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
April 03, 2016	72(km)	\$38.16
April 07, 2016	72(km)	\$38.16
April 03, 2016	MLA Per Diem - Victoria	\$61.00
April 05, 2016	Lunch and Dinner Only-Victoria	\$48.50 ✓
April 06, 2016	Breakfast and Dinner Only-Victoria	\$48.50
April 07, 2016	Lunch and Dinner Only-Victoria	\$48.50

Total Payable \$282.82

Date 07 Apr 2016

Signature [REDACTED]
 Routley, Bill VM150069
certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

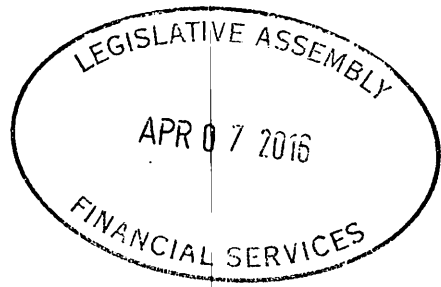
ACCOUNTS OFFICE USE ONLY

Organization Code	Account Code	STOB Code	Amount
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[REDACTED]

Date 4/11/16

Signature [REDACTED]
 Spending Authority Signature





**Members Of The Legislative Assembly
Travel Claim Form**

Claim Number: 36466
 MLA Name: Routley, Bill VM150069 Claim Date: April 10, 2016
 Constituency: Cowichan Valley
 Type Of Trip: MLA Travel
 Prepared By: [REDACTED]
 Claimant Type: Member of Legislative Assembly
 Travel From: Riding Travel To: Victoria
 Trip Details:

Date	Expenses	Amount
April 10, 2016	72(km)	\$38.16
April 11, 2016	MLA Per Diem - Victoria	\$61.00
April 12, 2016	MLA Per Diem - Victoria	\$61.00
April 13, 2016	MLA Per Diem - Victoria	\$61.00
April 14, 2016	MLA Per Diem - Victoria	\$61.00
Total Payable		\$282.16

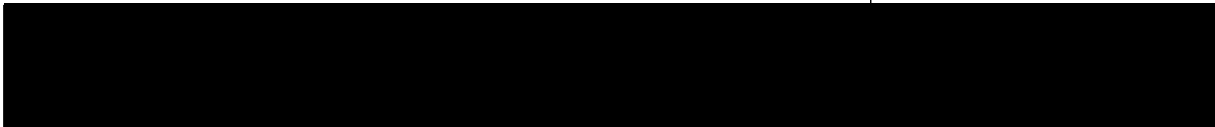
Date 14 Apr 2016

Signature [REDACTED]

certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

ACCOUNTS OFFICE USE ONLY

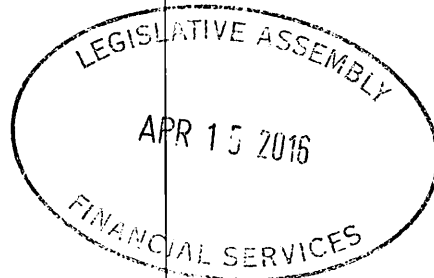
Organization Code Account Code STOB Code Amount



Date 4/18/16

Signature [REDACTED]

Spending Authority Signature





Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36541
MLA Name: Routley, Bill VM150069 **Claim Date:** April 14, 2016
Constituency: Cowichan Valley
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Victoria **Travel To:** Kelowna
Trip Details:

Date	Expenses	Amount
April 16, 2016	982(km)	\$520.46
April 14, 2016	Ferry	\$145.00 ⁺
April 15, 2016	MLA Per Diem	\$61.00
April 16, 2016	Accommodation Expenses	\$236.90 ⁺
April 16, 2016	Ferry	\$71.50 ⁺
April 16, 2016	MLA Per Diem	\$61.00
Total Payable		\$1095.86

Date 27 Apr 2016

Signature

[REDACTED SIGNATURE]
 Routley, Bill VM150069
 certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

ACCOUNTS OFFICE USE ONLY

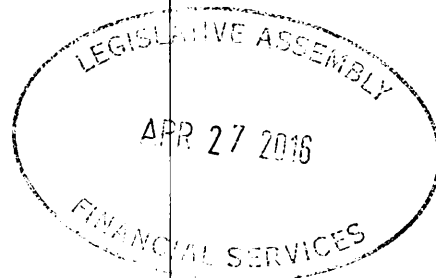
Organization Code	Account Code	STOB Code	Amount
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[REDACTED ACCOUNTS OFFICE USE ONLY SECTION]

Date 4/28/16

Signature




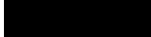
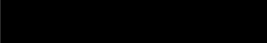
[REDACTED SIGNATURE]
 Spending Authority Signature


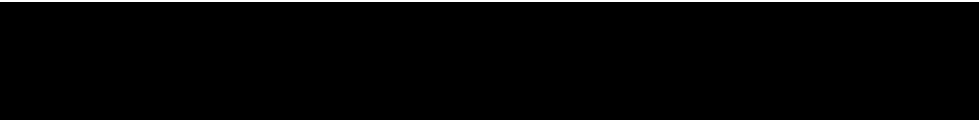


36541

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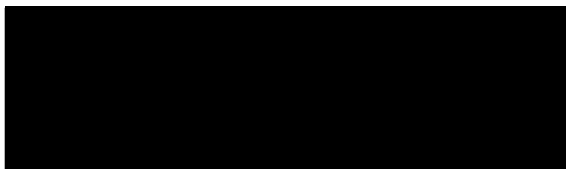
04-15-16

Bill Routley  Canada	Folio No. :		Room No. :	
	A/R Number :		Arrival :	04-14-16
	Group Code :		Departure :	04-16-16
	Company :	Government British Columbia	Conf. No. :	
	Membership No. :		Rate Code :	IP2KO
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
04-14-16	*Accommodation	103.00	
04-14-16	P. S. T.	8.24	
04-14-16	Accommodation Tax	2.06	
04-14-16	G.S.T. Room	5.15	
04-15-16	*Accommodation	103.00	
04-15-16	P. S. T.	8.24	
04-15-16	Accommodation Tax	2.06	
04-15-16	G.S.T. Room	5.15	
04-15-16	Visa XXXXXXXXXXXX 		236.90
		Total	236.90
		Balance	0.00

Signature: _____

I have received the goods and / or services in the amount shown heron. 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.



36541

PURCHASE
BCFerries

PURCHASE
BCFerries

2016/04/14
Swartz Bay
To
Tsawwassen
AUTH ONLY
1 Priority Load 73.50
20' Undersize Vehi 56.45
1 Adult 17.20
Fuel Rebate 2.15-

2016/04/16
Tsawwassen
To
Swartz Bay
AUTH ONLY
20' Undersize Vehi 56.45
1 Adult 17.20
Fuel Rebate 2.15-

Total 145.00
MasterCard 145.00
***** S)
005/01-66223091
0019133990
Approved: 171439 0.00
CHANGE DUE

Total 71.50
MasterCard 71.50
***** S)
005/01-66223129
0019292980
Approved: 225838 0.00
CHANGE DUE

LANE 02

SWB 14 Apr 2016

105075
SEE REVERSE SIDE OF TICKET

LANE 42

TSA 16 Apr 2016

108191327
SEE REVERSE SIDE OF TICKET



Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36568

MLA Name: Routley, Bill VM150069

Claim Date: April 21, 2016

Constituency: Cowichan Valley

Type Of Trip: MLA Travel

Prepared By: [Redacted]

Claimant Type: Member of Legislative Assembly

Travel From: Riding

Travel To: Courteney

Trip Details:

Date	Expenses	Amount
April 21, 2016	222(km)	\$117.66
April 23, 2016	159(km)	\$84.27
April 21, 2016	MLA Per Diem	\$61.00
April 22, 2016	MLA Per Diem	\$61.00
April 23, 2016	Accommodation Expenses	\$281.44 ✓
April 23, 2016	Breakfast & Lunch only	\$39.50
Total Payable		\$644.87

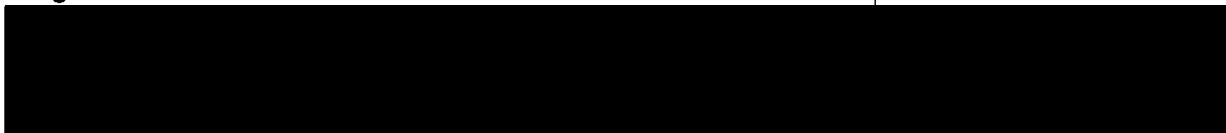
Date 27 Apr 2016

Signature _____

certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

ACCOUNTS OFFICE USE ONLY

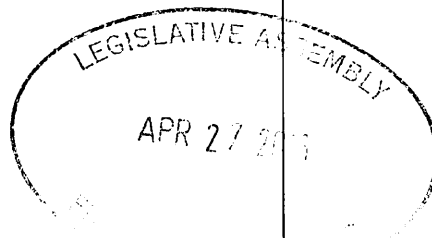
Organization Code	Account Code	STOB Code	Amount
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Date 4/28/16

Signature _____

Spending Authority Signature



36568

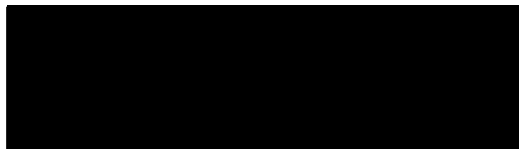
04-23-16

Mr Bill Routley [Redacted] Canada	Folio No. : A/R Number : Group Code : Company : Membership No. : Invoice No. :	Room No. : [Redacted] Arrival : 04-21-16 Departure : 04-23-16 Conf. No. : [Redacted] Rate Code : IDSMT Page No. : 1 of 1
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Date	Description	Charges	Credits
04-21-16	Deposit Transfer at Check-In Advance Deposit Payment for room & taxes		137.96
04-21-16	*Accommodation	119.96	
04-21-16	MRDT 2%	2.40	
04-21-16	GST - 5%	6.00	
04-21-16	PST tax 8%	9.60	
04-22-16	*Accommodation	124.76	
04-22-16	MRDT 2%	2.50	
04-22-16	GST - 5%	6.24	
04-22-16	PST tax 8%	9.98	
04-23-16	Visa		143.48
[Redacted]		Total	281.44
		Balance	0.00

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. 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.

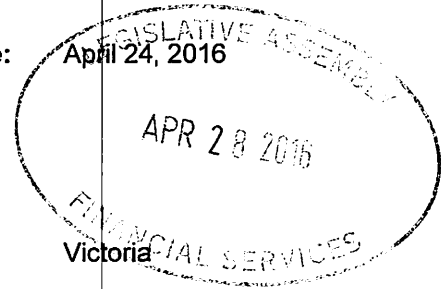




**Members Of The Legislative Assembly
Travel Claim Form**

Claim Number: 36607
MLA Name: Routley, Bill VM150069
Constituency: Cowichan Valley
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Riding
Trip Details:

Claim Date: April 24, 2016



Travel To: Victoria

Date	Expenses	Amount
April 24, 2016	72(km)	\$38.16
April 28, 2016	72(km)	\$38.16
April 25, 2016	Lunch and Dinner Only-Victoria	\$48.50
April 26, 2016	MLA Per Diem - Victoria	\$61.00
April 27, 2016	MLA Per Diem - Victoria	\$61.00 ✓
April 28, 2016	MLA Per Diem - Victoria	\$61.00

Total Payable \$307.82

Date 28 Apr 2016

Signature

[REDACTED]
 Routley, Bill VM150069
certified that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

ACCOUNTS OFFICE USE ONLY

Organization Code Account Code STOB Code Amount

[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
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Date 4/28/16

Signature

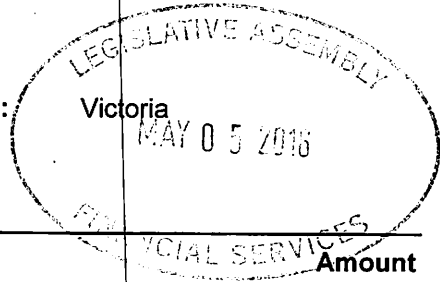
Spending Authority Signature





Members Of The Legislative Assembly Travel Claim Form

Claim Number: 36665
MLA Name: Routley, Bill VM150069 **Claim Date:** April 29, 2016
Constituency: Cowichan Valley
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: Riding **Travel To:** Victoria
Trip Details:



Date	Expenses	Amount
April 29, 2016	144(km)	\$76.32
May 01, 2016	72(km)	\$38.16
May 05, 2016	72(km)	\$38.16
May 02, 2016	MLA Per Diem - Victoria	\$61.00
May 03, 2016	MLA Per Diem - Victoria	\$61.00
May 04, 2016	MLA Per Diem - Victoria	\$61.00
May 05, 2016	MLA Per Diem - Victoria	\$61.00
Total Payable		\$396.64

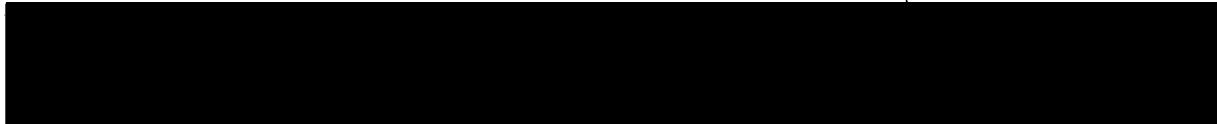
Date 05 May 2016

Signature [REDACTED]

I certify that the amount to be paid is correct, and is in accordance with appropriate statute or other authority for payment

ACCOUNTS OFFICE USE ONLY

Organization Code	Account Code	STOB Code	Amount
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Date 5/5/16

Signature [REDACTED]

Spending Authority Signature



**Members Of The Legislative Assembly
Travel Claim Form**

Claim Number: 36745
MLA Name: Routley, Bill VM150069 **Claim Date:** May 08, 2016
Constituency: Cowichan Valley
Type Of Trip: MLA Travel
Prepared By: [REDACTED]
Claimant Type: Member of Legislative Assembly
Travel From: riding **Travel To:** Victoria
Trip Details:

Date	Expenses	Amount
May 08, 2016	72(km)	\$38.16
May 12, 2016	72(km)	\$38.16
May 09, 2016	MLA Per Diem - Victoria	\$61.00
May 10, 2016	MLA Per Diem - Victoria	\$61.00
May 11, 2016	MLA Per Diem - Victoria	\$61.00
May 12, 2016	MLA Per Diem - Victoria	\$61.00
Total Payable		\$320.32

Date 12 May 2016

Signature _____

[REDACTED]
 Routley
 certified _____
 with appropriate statute or other authority for payment

ACCOUNTS OFFICE USE ONLY

Organization Code Account Code STOB Code Amount

[REDACTED]

Date 5/13/16

Signature _____

Spending Authority [REDACTED]

