

Cumberland and District Historical Society

You paid \$100.00 CAD

to Cumberland and District Historical Society
Details

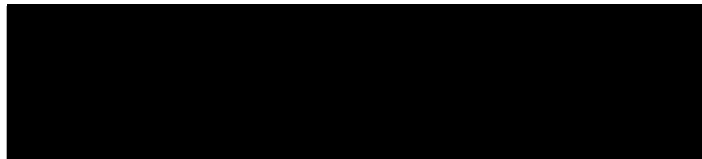
1 x Miner's Memorial Weekend Fair Trade Bouquet	\$100.00 CAD
Subtotal	\$100.00 CAD
Total	\$100.00 CAD

Paid with

Visa  \$100.00 CAD

This transaction will appear on your statement as PAYPAL *CUMBERLAND

Shipped to



Purchase details

Receipt number: 41012758130724

From: receipts+f1j2WQ6v59gsvOSWYyXq@stripe.com on behalf of Fairware Promotional Products Ltd. <receipts+f1j2WQ6v59gsvOSWYyXq@stripe.com>
Sent: June 6, 2017 10:24 AM
To: [REDACTED]
Subject: Your Fairware Promotional Products Ltd. receipt [#1864-8863]

CA\$1,975.96 at Fairware Promotional Products Ltd.

 3215

June 6, 2017

#1864-8863

Description	Amount
Deposit Invoice #D39970 (Canada Day Summer Giveaways)	CA\$1,975.96
Total	CA\$1,975.96

Have a question or need help? Send us an email or give us a call at (604) 732-3247.

Something wrong with the email? View it in your browser.
You are receiving this email because you made a purchase at Fairware Promotional Products Ltd..

DOLLARAMA

3555 Johnston Rd Unit 402-3
Port Alberni BC V9Y 8K2
GST [REDACTED]

CANADA FLAG
CANADA FLAG
CANADA FLAG
CANADA FLAG

SUBTOTAL
GST 5%
PST 7%
TOTAL
VISA

1.25 FP
1.25 FP
1.25 FP
1.25 FP
\$5.00
\$0.25
\$0.35
\$5.60
\$5.60

TYPE: PURCHASE

ACCT: VISA

AMOUNT:

\$ 5.60

CARD NUMBER:
DATE/TIME:
REFERENCE #:
AUTHOR. #:

17/06/12
66228113 001001770 H
060059

VISA
A0000000031010

01/027 APPROVED - THANK YOU
NO SIGNATURE TRANSACTION

-- IMPORTANT --
Retain This Copy For Your Records
*** CUSTOMER COPY ***

=====

NO EXCHANGE
NO RETURN
THANK YOU FOR SHOPPING AT DOLLARAMA
CUSTOMER COPY

2017-06-12
000648 02

[REDACTED]
WWW.DOLLARAMA.COM

0010



**BRITISH
COLUMBIA**

Tech, Innovation & Citizens' Svcs
Queen's Printer
Storefront Services
250-952-4435
Email: qpinvoices@gov.bc.ca

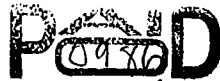
Bill To: [REDACTED]

SCOTT FRASER - MLA
CONSTITUENCY OFFICE
3945B JOHNSTON RD
PORT ALBERNI BC V9Y 5N4

Invoice	
Document Number	Date
[REDACTED]	05-Apr-2017
Sales Order/PO No.	
201744144058556	
Customer Ref./PO Date	
04-Apr-2017	
Delivery Number	Date
83164033	07-Apr-2017
Order Number	Date
33148390	04-Apr-2017
Customer Number/2nd Reference No.	
[REDACTED] /	
Originator/Telephone	
[REDACTED] /	250-720-4515

Page 1 of 1

Product #	Description	Quantity	Price/Unit	Amount	Tax
9910841004	PIN, LAPEL, STELLER'S JAY	125 EA	1.25 /EA	156.25	PG
Subtotal				156.25	
GST/HST #	[REDACTED]	5.000 %	156.25	7.81	
PST	[REDACTED]	7.000 %	156.25	10.94	
Total (CAD)				175.00	



To our valued customer, if you would like to expedite payment, please pay by credit card. VISA, Master Card and AMEX are accepted. Please call 250-952-4435 or 778-678-2589.

Please make cheques payable to **MINISTER OF FINANCE** and remit to:
Queen's Printer, P.O. Box 9451 Stn Prov Govt, Victoria BC V8W 9V7

A \$30 SERVICE FEE WILL BE CHARGED FOR EACH DISHONoured CHEQUE. NOTICE: TERMS NET 30 DAYS.
INTEREST WILL BE CHARGED ON OVERDUE ACCOUNTS IN ACCORDANCE WITH GOVERNMENT REGULATIONS.

STAPLES Canada
Store # 321
3555 Johnston Road Unit 501
Port Alberni, BC V9Y8K2
250-720-2460

Sale 00093 2 004 27491
0321 06/16/17

ENTER TO WIN!
\$1,000 STAPLES SHOPPING SPREE

Staples listens and values your feedback.
Tell us how we did today!

Visit www.StaplesListens.ca

Your Survey Code: Barcode at the bottom
Expires: 06/23/2017

1831586

1	SHARPIE BLK FINE 12P	
	071641300019	12.69B
1	SS MEETING NOTE	
	021200507267	15.99B
1	VLOCTY RT BLD BP	
	070330184879	3.00B
1	VELOCITY RT BOLD	
	070330184886	3.00B
1	PM INKJOY 550 RT BLU	
	071641052130	13.15B
1	PEN,BALL BIC GRIP	
	070330137257	2.49B
1	BIC WITE OUT TAPE	
	070330505926	4.96B
1	WITEOUT 2IN1 CORR FL	
	070330516441	3.99B
1	eSPIRAL 400 MESS 2PA	
	069775331849	10.89B
1	OB:STENOBOOK:WHT 120	
	718103043939	11.66B
1	MS SCULPT ERGO	
	885370599589	69.64B
1	RECYCLING FEE B.C.	
	812096	0.50B
1	TRNSP TAPE DISP2PK	
	051131950832	8.60B
1	GW ALL PURPOSE CLEAN	
	055500010646	3.99B
1	OB FSC PAPER CASE	
	718103125710	63.96B
	Subtotal	228.51
	PST 7.00%	16.00
	GST 5.00%	11.43
	Total	\$255.94
	Visa	255.94

Please keep the bottom portion for your records and return the top portion with your payment

Ship To [REDACTED] Invoice # [REDACTED] Bill To [REDACTED] Invoice Date 03/31/2017

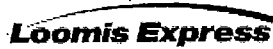
Product #	Description	Quantity	Price/Unit	Amount	Tax
7777000100	Letters Mailed	7 EA	0.83 /EA	5.81	G
7777000800	Packages Mailed	2 EA	5.85 /EA	11.70	G

Subtotal				17.51	
GST/HST # [REDACTED]	5.000 %	17.51		0.88	
Total (CAD)				18.39	

PAID
04/06

Please make cheques payable to **MINISTER OF FINANCE** and remit to:
Queen's Printer, P.O. Box 9451 Stn Prov Govt, Victoria, BC , V8W 9V7
A \$30 SERVICE FEE WILL BE CHARGED FOR EACH DISHONoured CHEQUE. NOTICE: TERMS NET 30 DAYS.
INTEREST WILL BE CHARGED ON OVERDUE ACCOUNTS IN ACCORDANCE WITH GOVERNMENT REGULATIONS.

Tax Indicators: G - GST/HST P - PST PST# PST- [REDACTED] Printed: 04/06/2017 11:40:10



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- [▶ e-SOLUTIONS](#)
- [▶ PRODUCTS & SERVICES](#)
- [▶ TRANSIT TIMES](#)
- [▶ ABOUT](#)
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- [▶ SHIP](#)
- [▶ ADDRESS BOOK](#)
- [▶ SHIPPING HISTORY](#)
- [▶ SHIPMENT REPORT](#)
- [▶ TRACK](#)

Loomis-Express.com Credit Card Receipt

Thank you for your order. Click [here](#) for a printer friendly version of your receipt.

ORDER SUMMARY

Order Date and Time: 6/7/2017 4:14:29 PM

Order Payment

Credit Card Type: **MasterCard**
 Credit Card Number: XXXXXXXXXXXX [REDACTED]
 Authorization Number: 007487

Cost: **CAD 18.93**
 GST: **CAD 0.95**
 PST: **CAD 0.00**

TOTAL: **CAD 19.88**

ORDER DETAILS

Shipment Date	Shipment Number	From Address	To Address	Number of Pieces
06/08/2017	[REDACTED]	PORT ALBERNI BRITISH COLUMBIA CANADA V9Y5N4	NANAIMO BRITISH COLUMBIA CA [REDACTED]	1 pcs

[Back](#)

*Landlord
 Tenant
 Dispute Resolution
 Notice.*

FROM/DÉ: MLA CONSTITUENCY OFFICE
3945B JOHNSON ROAD
PORT ALBERNI, BC V9Y5N4
250-720-4515

TO/A: NANAIMO JUSTICE
302-65 FRONT STREET

SIN: [REDACTED]
PIN: [REDACTED]

NANAIMO, BC V9R5S1

REF: [REDACTED]
WGT: 0.90 LBS
DWT: 0.01 LBS
DIM: 1X1X1 INCHES

ATTN: [REDACTED]

INSTRUCTIONS:
NO SIGNATURE REQUIRED

GRD

PREPAID



PIN: 111

DATE: 6/8/2017

*Provincial
Court Papers*



RECOMMANDÉ
RÉGIME INTÉRIEUR
REÇU DU CLIENT

REGISTERED
DOMESTIC
CUSTOMER RECEIPT



Destinataire

Nom

Adresse

City / Prov. / Postal Code

Declared Value

Value

déclarée \$

38-086-584 (14-06)

FOR DELIVERY
CONFIRMATION
www.canadapost.ca

CONFIRMATION
DE LA LIVRAISON
www.postes.mad.ca

1 888 550-6333

07/0U
EPC Tracking Number

Numero de suivi de la SPP

WOO
TR751745

\$1.80

kg
4

st votre

er Mail Cut

Le service de Garantie a été traité après 1
'heure limite

G/S 5% 1@ \$9.00 \$9.00
Registered/Recommandé

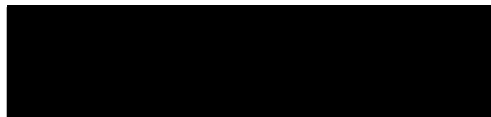
G/S 5% 1@ \$0.00 \$0.00
Coverage \$100.00/Couverture \$100.00

SUBTL/SOUS-TOTAL \$10.80
GST/TPS \$0.54
TOTAL/TOTAL \$11.34

CDN Cash / Espèces CAN \$20.00
CHG. DUE / MONNAIE (\$8.66)
RND. CHG. / MONNAIE ARRONDIE (\$8.65)

Tell us how we did today.
Complete the survey at
canadapost.ipsosinteractive.com
and enter to WIN one of two
\$250 Prepaid Visa Cards.

Dite-Nous comment a été votre expérience
aujourd'hui.
Répondez à un court sondage sur le site
canadapost.ipsosinteractive.com et
courez la chance de GAGNER l'une des
deux cartes Visa prépayées de 250 \$.



Track your package by web or phone:
Some exceptions apply
Repérage sur le Web ou par téléphone :
Certaines conditions s'appliquent
WWW.CANADAPOST.CA / WWW.POSTESCANADA.CA
800-267-1177

STAPLES Canada
Store # 321
3555 Johnston Road Unit 501
Port Alberni, BC V9Y8K2
250-720-2460

Sale 00092 3.003 78733
0321 05/03/17

1749649

1 STAPLES PAPER REAM
718103027113 6.00B

1 STAPLES PAPER REAM
718103027113 6.00B

Subtotal 12.00

PST 7.00% 0.84

GST 5.00% 0.60

Total \$13.44

Debit 13.44

***** Purchase

Interac H FLASH DEFAULT

Authorization Number 162124

0010014410 78733 66164306

92 05/03/17

00/001 APPROVED - THANK YOU

Interac A0000002771010

8000008000

Thank you for shopping at STAPLES!

We will not be undersold!

Visit Staples.ca

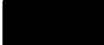
IMPORTANT

Retain This Copy for Your Records

GST No. [REDACTED]



Expense Form
Scott Fraser, MLA Community Office

Staff Name: 

Request Date: May 8, 2017

Travel Date(s): March 30 & May 3, 2017

Kilometers travelled: 87 km X 0.52 = \$ 45.24

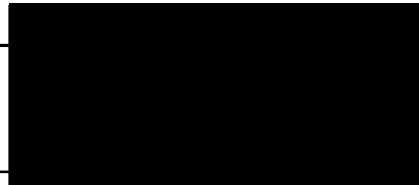
Parking (receipt to accompany claim): \$

Accommodations (receipt to accompany claim): \$

Meals (as per diem - \$61/full day) ___ Breakfast(\$27) ___ Lunch(\$27) ___ Dinner(\$36)
___ Breakfast & Lunch(\$39.50) ___ Lunch & Dinner (\$48.50)



Applicant Signature



MLA Approval

Office Space

Re: Oceanside Homelessness mtg & office supplies

Total: \$58.68

JANI-KING OF VANCOUVER ISLAND
 Commercial Cleaning Services
 (250) 389-0214



Sold To:
 SCOTT FRASER M.L.A.

For:
 SCOTT FRASER M.L.A.

3945-B JONSTON RD.

3945-B JOHNSON RD.

PORT ALBERNI BC V9Y 5N4

PORT ALBERNI BC V9Y 5N4

Order No	Date	Cust No	Slsmn No	PO Num	Franchisee	Due Date	
VIC04170074	04/01/2017	[REDACTED]	[REDACTED]		[REDACTED]	04/30/2017	
Quantity	Description				Unit Price	Extended Price	
1	MONTHLY CONTRACT BILLING AMOUNT FOR APRIL				234.04	234.04	
<p>Make All Cheques Payable To: JANI-KING OF VANCOUVER ISLAND</p>						Amount of Sale	\$ 234.04
						G/ST	\$ 11.70
						PST	\$ 0.00
						Total	\$ 245.74

INVOICE

Orange Bridge Communications

#310 2970 King George Blvd
Surrey, BC V4P 0E6
250 735 4174



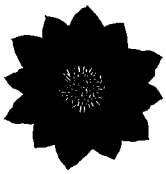
DATE: March 28 2017
INVOICE #
FOR: Communications Services
BILL TO: Scott Fraser
MLA, Alberni Pacific Rim
3945b Johnston Road
Port Alberni BC
250 720 4515

DESCRIPTION	AMOUNT
Social Media Fee	\$1,000.00
Facebook Boosted ads	\$0.00

PAID

SUBTOTAL	\$ 1,000.00
TAX RATE	0.00%
SALES TAX	-
OTHER	-
TOTAL	\$ 1,000.00

Please make all cheques payable to [REDACTED]
THANK YOU FOR YOUR BUSINESS!



Your TELUS Mobility Bill

April 09, 2017



Account number: [REDACTED]

Account summary – turn over for details

Balance forward from your last bill \$78.40
This reflects payments of \$0.00

New charges

Mobile services	\$70.00
Other charges and credits	\$1.57
GST / HST	\$3.50
PST	\$4.90

Total new charges **\$79.97**

Total due **\$158.37**

PAID
0485

Did you forget your payment? The balance of \$78.40 from your last bill is overdue and payable now. Please note that any payment received on or after the bill date of April 09, 2017 will be reflected on your next bill. If payment was already made, thank you.

Can we help?

Visit our self-serve website at:
telus.com/support
Dial *611 from your handset
Call toll-free 1-866-558-2273

Write to us at:
TELUS
PO Box 8950
Stn Terminal
Vancouver, BC
V6B 3B3

GST/HST# [REDACTED] QST# [REDACTED] TELUS is a trade name of TELUS Communications Company

For payment options, see page 2.

JANI-KING OF VANCOUVER ISLAND
 Commercial Cleaning Services
 (250) 389-0214



Sold To:
 SCOTT FRASER M.L.A.
 3945-B JONSTON RD.
 PORT ALBERNI BC V9Y 5N4

For:
 SCOTT FRASER M.L.A.
 3945-B JOHNSON RD.
 PORT ALBERNI BC V9Y 5N4

Order No	Date	Cust No	Slsmn No	PO Num	Franchisee	Due Date
VIC05170074	05/01/2017	[REDACTED]	[REDACTED]		[REDACTED]	05/31/2017
Quantity	Description				Unit Price	Extended Price
1	MONTHLY CONTRACT BILLING AMOUNT FOR MAY				234.04	234.04
PAID 09/18/17						
					Amount of Sale	\$ 234.04
					G/HST	\$ 11.70
					PST	\$ 0.00
					Total	\$ 245.74
Make All Cheques Payable To: JANI-KING OF VANCOUVER ISLAND						



CALEDONIA
FIRE PROTECTION LTD.

103-2046 Boxwood Road, Nanaimo BC V9S 5W7
Regional Offices: Courtenay, Duncan, Port Alberni
Email: admin@caledoniafireprotection.com

Tel : 250 244 6303 Fax : 250 244 3649

WWW.CALEDONIAFIREPROTECTION.COM

Invoice #

18975-I

Date

5/02/2017

P.O. No.

Technician

S.O. No.

18605

Invoice To

Office of MLA Scott Fraser
3945B Johnston Rd
Port Alberni, BC V9Y 5N4
Attn: [REDACTED]


Job Location

Office of MLA Scott Fraser
3945B Johnston Rd
Port Alberni, BC V9Y 5N4

Item	Description	Qty	Rate	List Price	Amount
aif	Annual inspection of fire extinguishers	1	73.00		73.00
PAID					
Subtotal					\$73.00
Sales Tax Summary GST (3) On Sales@5.0%					3.65
Total Tax					3.65
Total					\$76.65
Payments/Credits					\$0.00
Balance Due					\$76.65
Terms					Payment due on receipt

GST/HST No. [REDACTED]

Inspection, Testing and Maintenance of Portable Fire Extinguishers

 <p>CALEDONIA FIRE PROTECTION LTD.</p> <p>103-2046 Boxwood Road, Nanaimo BC V9S 5W7 Regional Offices: Courtenay, Duncan, Port Alberni Email: admin@caledoniafireprotection.com Tel : 250 244 6303 Fax : 250 244 3649 WWW.CALEDONIAFIREPROTECTION.COM</p>	Date of Service 1 May 2017	Time	Page 1 of 1
	Monthly <input type="checkbox"/>	Annual <input checked="" type="checkbox"/>	Last Service Date 2016
	Owner:		Phone: Fax:
	Contact Person:		Phone: Fax:
Building Name: Office of MLA Scott Fraser	Address 3945B Johnston Rd	City Port Alberni	Postal Code

“S” - Acceptable “R/S” - Requires Service or Repair “N/R” – Non Rechargeable “S/E”– Service Exchange “N/A” – No Access


LOCATION	MANUF.	SIZE	SERIAL #	S	R/S	N/R	S/E	N/A	Next 6Yr Due	Next HST Due	Deficiency Completed Date
Side exit	Strike First	5lb ABC	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2020		
Front entrance	Strike First	5lb ABC	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2020		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Comments:

I state that the information on this form is correct at the time and place of my inspection, and that all equipment was tested in conformance with applicable codes or the Manufactures requirements. At this time was left in operational condition upon completion of this inspection except as noted in comments.

Derek Ross			May 2017		
Technician	Certification #	Permit #	Date	Time	Owner or Authorized Agent

Inspection, Testing and Maintenance of Building Fire Protection Systems

 <p>CALEDONIA FIRE PROTECTION LTD.</p> <p>103-2046 Boxwood Road, Nanaimo BC V9S 5W7 Regional Offices: Courtenay, Duncan, Port Alberni Email: admin@caledoniafireprotection.com Tel : 250 244 6303 Fax : 250 244 3649 WWW.CALEDONIAFIREPROTECTION.COM</p>	Date of Service 1 May 2017	Time:	
	Owner:	Phone:	
		Fax:	
	Contact Person:	Phone: Fax:	
Building Name: Office of MLA Scott Fraser	Address: 3945B Johnston Rd	City: Port Alberni	Postal code. V9Y 5N4

This master form shall be completed by the technician to indicate what fire protection systems are provided the building. This form shall accompany the completed "Inspection, Test and Maintenance forms which are to be kept on file as required by the Fire Code. This form is intended to provide the owner or fire inspector with an overview of what fire protection systems exist in the building and which systems were inspected and tested by the technician.

Building Fire Protection Systems	yes	no	FP #	Init	Comments
Fire Alarm System					
Fire Extinguishers	Y			DR	
Unit Emergency Lighting					
Sprinkler Systems					
Standpipe/Hose Systems					
Fire Hydrant					
Emergency (Generator Sets)					
Fixed Extinguishing System					
C02 systems					
Backflow Preventor					
Fire Pump					

Note: If fire protection equipment/systems exist within the building and have not been tested in conformance with the Fire Code, have you advised the owner or the owner's agent that this work is required. Yes No



CO Receipt Confirmation Form

Member Name: Fraser, Scott

Expense Description	Bank Fees
Vendor	Bank
Amount	\$30.75
Explanation	Financial Services has confirmed that the expense appears on the member's credit card or bank statement.