



MLA Travel Expenses

Paid in the period April 1, 2023 to December 31, 2023

For Members of Cabinet (the Premier, Ministers and Ministers of State), most travel expense claims are processed by the Ministry of Finance and this information is available on the Province of British Columbia [website](#). Occasionally, however, Members of Cabinet may need to submit travel expense claims (e.g. for Accompanying Person travel) to the Legislative Assembly of BC and in these cases redacted receipts will be included with the disclosure reports.

GST input tax credits are not included in the amounts of the travel expenses in this report and therefore, the amounts of the travel expenses in receipts do not agree to the amounts of the travel expenses in this report.

**MEMBERS OF THE LEGISLATIVE ASSEMBLY
TRAVEL CLAIM FORM**

MLA NAME: Selina Robinson		CONSTITUENCY: Coquitlam	
TRAVEL BY: (NAME IF OTHER THAN MLA; IF CA INCLUDE ADDRESS)		SPOUSE/DEPENDENT <input type="checkbox"/>	CONSTIT.ASSISTANT <input type="checkbox"/>
TRIP DETAILS: Caucus Retreat in Langley			
TRAVEL FROM: Coquitlam		TO: Langley	RETURN TRIP <input checked="" type="checkbox"/>

TRAVEL EXPENSES FOR REIMBURSEMENT

		DATES INCLUDING STARTING AND ENDING LOCATION		AMOUNT CLAIMED
MILEAGE (\$.61/KM)	27	KMS	September 13th, Coquitlam-Langley	\$ 16.47
MILEAGE (\$.61/KM)	27	KMS	September 14th, Langley-Coquitlam	\$ 16.47
AIRFARE/FERRY:				\$
OTHER EXPENSES:				\$
HOTEL: [REDACTED]				\$323.64
PER DIEM: Dinner & Incidentals Sept. 13th				\$ 36.00
TOTAL AMOUNT CLAIMED				\$392.58

Prepared by: [REDACTED]

****PLEASE ATTACH ALL RECEIPTS****

October 5, 2023

MEMBER'S SIGNATURE

DATE

CA'S SIGNATURE

DATE

VM150081 Caucus Retreat Sept 13, 2023

ROBINSON, SELINA
 501 BELLEVILLE ST
 ROOM 310
 VICTORIA BC V8V 1X4
 CANADA

name address
 room number: [REDACTED]
 arrival date: 9/13/2023
 departure date: 9/14/2023
 adult/child: 1/0
 room rate: 279.00

If the debit/credit card you are using for check-in is attached to a bank or checking account, a hold will be placed on the account for the full anticipated dollar amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such funds will not be released for 72 business hours from the date of check-out or longer at the discretion of your financial institution.

TAX #:
 Confirmation Number [REDACTED]

Rates subject to applicable sales, occupancy, or other taxes. Please do not leave any money or items of value unattended in your room. A safety deposit box is available for you in the lobby. 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 part or the full amount of these charges. I have accepted delivery of The Globe & Mail. If refused, a \$1.00 (Mon-Fri) & \$2.00 (Sat) credit will be applied to my account. In the event of an emergency, I, or someone in my party, require special evacuation due to a physical disability. Please indicate yes by checking here:

9/14/2023

signature:

date	reference	description	amount
9/13/2023	1495727	GUEST ROOM	\$279.00
9/13/2023	1495727	ROOM GST	\$13.95
9/13/2023	1495727	HOTEL ROOM TAX	\$22.32
9/13/2023	1495727	MUNICIPAL TAXES	\$8.37
9/14/2023	1495816	VS [REDACTED]	(\$323.64)
		BALANCE	\$0.00

EXPENSE REPORT SUMMARY

ROOM AND TAX \$323.64
 DAILY TOTAL \$323.64

Total Invoice Amount \$279.00