Member Name:

Expense Category:	Special Events and	Protocol		Note	Amount
				<u>Note</u>	<u>Amount</u>
Cumulative Balance at Enc	d of Prior Reporting Pe	eriod:		Note 1	\$769.48
Add: Total Amount of Rec	eipts for Current Repo	orting Peri	od:	Note 2	\$101.40
Balance at End of Current	Reporting Period:			Note 3	\$870.88
Note 1	This amount repres disclosure report fo <b>Apr. 1, 2021</b>		-	y for the perio	
Note 2	This amount repres disclosure expense Jan. 1, 2021			t reporting per	
Note 3	This amount repres scanned receipts to report for the perio	otal above		-	•
	Apr. 1, 2021	to	Mar. 31,	2022	
Note 4	3471 A 3472 P	osting Eve ttending E rotocol	ents		ng accounts:

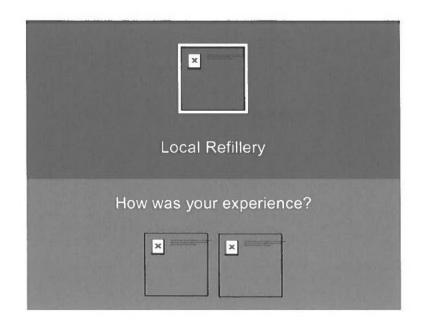
Leonard, Ronna-Rae

-

### Leonard.MLA, Ronna-Rae

From: Sent: To: Subject: Local Refillery via Square <receipts@messaging.squareup.com> November 30, 2021 2:32 PM Leonard.MLA, Ronna-Rae Receipt from Local Refillery 3470

**Categories**:



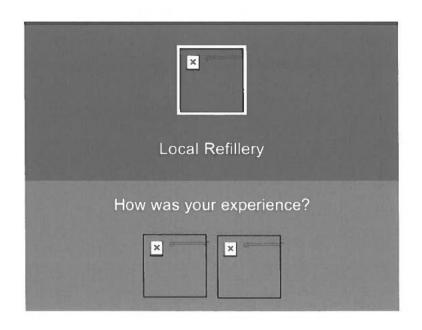
## <sup>\$38.44</sup>

Faithful Friends Dog Treats (Pumpkin Peanut	\$6.60	
Butter)		
(\$6.00/100g) × 1.10000 100g		
Faithful Friends Dog Treats (Beef Liver Bites) (\$6.00/100g) × 3.90000 100g	\$23.40	
Faithful Friends Dog Treats (Pumpkin Peanut	\$4.32	
Butter)		
(\$6.00/100g) × 0.72000 100g		
Purchase Subtotal	\$34.32	
(5%)	\$1.72	
PST- (7%)	\$2.40	
Total	\$38.44	

### Leonard.MLA, Ronna-Rae

From: Sent: To: Subject: Local Refillery via Square <receipts@messaging.squareup.com> December 13, 2021 11:25 AM Leonard.MLA, Ronna-Rae Receipt from Local Refillery 3470

**Categories:** 



# <sup>s</sup>26.21

 Faithful Friends Dog Treats (Beef Liver Bites)
 \$13.44

 (\$6.00/100g) × 2.24000 100g
 \$9.96

 Faithful Friends Dog Treats (Pumpkin Peanut \$9.96
 \$9.96

 Butter)
 (\$6.00/100g) × 1.66000 100g

Purchase S	Subtotal	\$23.40
	(5%)	\$1.17
PST	7%)	\$1.64

Total

\$26.21

Local Refillery



### Leonard.MLA, Ronna-Rae

From: Sent: To: Subject: COMOX VALLEY CHAMBER OF COMMERCE <no-reply@bambora.com> January 29, 2022 9:35 AM Leonard.MLA, Ronna-Rae Purchase Receipt

**Categories:** 

**REQUIRES ACTION** 

3471

INTERNET PURCHASE RECEIPT

Order Date: 2022-01-29 9:34:29 AM Order Number: 10105555 Bank Auth Number: 029128 Order Total: 36.75 CAD

Name on Card: Ronna-Rae Leonard Card Type: MC Email Address: ronna-rae.leonard.mla@leg.bc.ca

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DI		L .		U	
-	_	_		-	

Name: General Public Address Line 1: Address Line 2: City: Courtenay State/Province: BC Zip/Postal Code: Country: CA Phone Number:

MERCHANT INFO: Online Address: Merchant Name: COMOX VALLEY CHAMBER OF COMMERCE Address: 2040 CLIFFE AVENUE City: COURTENAY Province: BC Postal Code: V9N 2L3 Country: CA Phone Number: (250)334 3234

PRODUCT INFO:

1

Member Name:

	-				
Expense Category:	Communications a	nd Advertisi	ng	<u>Note</u>	<u>Amount</u>
Cumulative Balance at End	of Prior Reporting Pe	eriod:		Note 1	\$7,882.21
Add: Total Amount of Rece	eipts for Current Repo	orting Period	:	Note 2	\$3,102.49
Balance at End of Current	Reporting Period:			Note 3	\$10,984.70
Note 1	This amount repres disclosure report fo <b>Apr. 1, 2021</b>		-	y for the period	
Note 2	This amount repres disclosure expense Jan. 1, 2021			t reporting per	

Leonard, Ronna-Rae

Note 3This amount represents the sum of the Q3 ending balance plus the Q4<br/>scanned receipts total above. This amount also equals the Q4 disclosure<br/>report for the period from

Apr. 1, 2021 to Mar. 31, 2022

Note 4	This disclosure expense category consists of the following accounts:
	3475 Advertising
	3476 Subscriptions/Memberships
	3477 Website Maintenance/Design
	-

- \_
- -

	k Press Group Ltd. - 15288 54A Ave.		BIL	LING PERIOD	ADVERTISER/C	LIENT NAME
	ey, B.C. V3S 6T4			21 - 12/31/2	1 RONNA-RAE	LEONARD
		AME AND ADDRESS	INVOIO		TERMS OF PAYMENT	PAGE #
			34192	926	Net 30 Days	1 of 1
			ACCOUN	TNUMBER	BILLING DATE	ADVERTISER/CLIENT
	<b>RONNA-RAE LEO</b>	NARD			12/31/21	
	437 5TH ST COURTENAY BC V9N 1J7		Accour Please	tp://iservices.b ht inquiries: 1-86 pay balance du		
			GST R	EGISTRATION	No.	
DATE	INVOICE #	DESCRIPTION - OTHER COMMENTS/CHARC	GES	SAU SIZE BILLED UNITS	TIMES RUN RATE	NET AMOUNT
1/30		BALANCE FORWARD				1,130.0
	63598	Payment on Account				-730.0
	64324	Payment on Account				-400.0
	01021	i ajmon on toooan			BL	
	PUBLICATION: AD CLASS;	COMOX VALLEY RECORD	) - News			
12/01	34162364	Front Page Ear Lug		1x2.5i	1	85.0
		PAGE: A 1 General		2.5i		
		3 color				0.0
		ePaper				5.2
12/08	34162364	Front Page Ear Lug		1x2.5i	1	85.0
		PAGE: A 1 General		2.5i		
		3 color				0.0
		ePaper				5.2
12/31		BC GST				
12/31						
CURR	ENT NET AMOUNT DUE	30 DAYS 60 DA	VS	OVER 90 DAYS	UNAPPLIED AMOUNT	TOTAL AMOUNT DUE

Finance charge on accounts over 30 days is 2% monthly (24% annual) • Invoice/Statement shall be deemed correct unless advised in writing within 30 days of billing date. We warrant that the information shown on this invoice correctly describes the advertisement that was inserted in the edition of the publication specified.

PLEASE DETACH AND RETURN STUB WITH YOUR REMITTANCE



34192926	12/31/21	\$189.53
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REMIT TO

Black Press Group Ltd. 212 - 15288 54A Ave. Surrey, B.C. V3S 6T4 How to pay your bill:

Online using iServices: http://iservices.blackpress.ca/login

- Pre-authorized Payment Plan from your Bank Account, please call 1-877-851-4540 or email pad@blackpress.ca
- PC or Telephone banking through your Financial Institution
- By credit card, please call 1-866-850-4463
- By cheque payable to Black Press Group Ltd.

	k Press Group Ltd - 15288 54A Ave	1	BILLING PERIOD	ADVERTISER/C	LIENT NAME
	ey B.C. V3S 6T4		01/01/22 - 01/31/2	2 RONNA-RAE	LEONARD
	ACCOUNT	NAME AND ADDRESS	INVOICE #	TERMS OF PAYMENT	PAGE #
			34205044	Net 30 Days	1 of 2
			ACCOUNT NUMBER	BILLING DATE	ADVERTISER/CLIENT
	RONNA-RAE LEC	NARD		01/31/22	
	437 5TH ST COURTENAY BC V9N 1J7		http://iservices.b	rmation and display ad tea <b>tackpress.ca/login</b> 6-850-4463 or ar@blackpr e.	
			GST REGISTRATION	No.	
DATE	INVOICE #	DESCRIPTION · OTHER COMMENTS/CHARGES	SAU SIZE BILLED UNITS	TIMES RUN RATE	NET AMOUNT
2/31		BALANCE FORWARD			189.5
				BL	
	PUBLICATION: AD CLASS:	COMOX VALLEY RECORD - N Display Advertising	lews		
01/05	34205044	jan a	8x12.25	1	1,200.
		PAGE: A 35 General	98i		
		3 color			0.
		ePaper			5.
		Ad Class Totals: \$1,205.25		98.000 inch	0.
	AD CLASS:	Supplements		50.000 men	
01/19	34205044	Family Literancy 2022	4x6i	1	475.
		PAGE: A 10 Literacy	24i		
		3 Color Supplement			0
		ePaper			5
01/19	34205044	Overdose Prevention	4x6i	1	349
01/10	01200011	PAGE: A 12 Overdose	24i	<u>,</u>	010
		3 Color Supplement	£11		0
		ePaper			5
01/26	34205044	Overdose Prevention	4x6i	1	349
01/20	04200044	PAGE: A 40 Overdose	4x6i 24i	1	545
		3 Color Supplement	241		0
		6.6.25			
	ENT NET AMOUNT DUE	30 DAYS 60 DAYS	OVER 90 DAYS	UNAPPLIED AMOUNT	TOTAL AMOUNT DU

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PLEASE DETACH AND RETURN STUB WITH YOUR REMITTANCE

Black Press Media

CO paid \$2,513.70

1	
BILLING DATE	TOTAL AMOUNT DUE
01/31/22	\$ 2,703.23
ADVERTISER/CLI	ENT NAME
RONN	A-RAE LEONARD
	01/31/22 Advertiser/cli

REMIT TO

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- Pre-authorized Payment Plan from your Bank Account, please call 1-877-851-4540 or email pad@blackpress ca
- PC or Telephone banking through your Financial Institution
- By credit card, please call 1-866-850-4463
- By cheque payable to Black Press Group Ltd.

			BILLING PERIOD		ADVERTISE	R/CLIENT NAME
Black Pre	ss Media		01/01/22 - 01/31/2	2	RONNA-R	AÉ LEONARD
	55 IVIC 414		VOICE #	TERMS OF		PAGE #
			4205044	Net 30		2 of 2
VOICE / STATEMENT		A	CCOUNT NUMBER	BILLING		ADVERTISER/CLIENT
				01/3	1/22	
DATE INVOICE #	DESCRIPTION - OTHER COM	MENTS/CHARGES	SAU SIZE BILLED UNITS	TIMES RUN RATE		NET AMOUNT
	ePaper Ad Class Totals:	\$1,188.75		72.000	inch	5.2
1/31	Publication Totals: BC GST	\$2,394.00				119.7
CURRENT NET AMOUNT DUE	30 DAYS	60 DAYS	OVER 90 DAYS	UNAPPLI	ED AMOUNT	TOTAL AMOUNT DUE
2,513.70	189.53					2,703.2

Enance charge on accounts over 30 days is 2% monthly (24% annual) • Invoice/Statement shall be deemed correct unless advised in writing within 30 days of billing date. We warrant that the information shown on this invoice correctly describes the advertisement that was inserted in the edition of the publication specified.

	k Press Group Ltd.	ss Media	INVOICE / STATI		
	- 15288 54A Ave. ey, B.C. V3S 6T4		BILLING PERIOD	ADVERTISER	
Surr	<ul> <li>360 53</li> </ul>	AME AND ADDRESS	02/01/22 - 02/28/2 INVOICE #	2 RONNA-RAE TERMS OF PAYMENT	PAGE #
2104A	ACCOUNT	IAME AND ADDRESS	34219211	Net 30 Days	1 of 1
			ACCOUNT NUMBER	BILLING DATE	ADVERTISER/CLIENT
	RONNA-RAE LEO	NARD	KOODUNT NOMBER	02/28/22	
	437 5TH ST COURTENAY BC V9N 1J7		http://iservices.t	ormation and display ad tea olackpress.ca/login 66-850-4463 or ar@blackp No.	
DATE	INVOICE #	DESCRIPTION - OTHER COMMENTS/CHAR	SAU SIZE GES BILLED UNITS	TIMES RUN RATE	NET AMOUNT
01/31		BALANCE FORWARD			2,703.23
02/16	65372	Payment on Account			-189.5
02/22	65567	Payment on Account			-2,513.7
	PUBLICATION: AD CLASS:	COMOX VALLEY RECORD	- News	BL	
02/23	34219211	Pink Shirt Day	4x6i	1	375.0
		PAGE: A 27 PinkShrt	24i		
		3 Color Supplement			0.0
		ePaper			5.2
		Ad Class Totals: \$380.2	25	24.000 inch	
02/28		Publication Totals: \$380.2 BC GST	25		19.0

Finance charge on accounts over 30 days is 2% monthly (24% annual) Invoice/Statement shall be deemed correct unless advised in writing within 30 days of billing date. We warrant that the information shown on this invoice correctly describes the advertisement that was inserted in the edition of the publication specified.

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	RONNA-RAE LEONARD		
ACCOUNT NUMBER	ADVERTISER/CLI	ENT NAME	
34219211	02/28/22	\$ 399.26	
INVOICE #	BILLING DATE	TOTAL AMOUNT DUE	

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Pre-authorized Payment Plan from your Bank Account, please call 1-877-851-4540 or email pad@blackpress.ca

PC or Telephone banking through your Financial Institution

n By credit card, please call 1-866-850-4463

n By cheque payable to Black Press Group Ltd.

Member Name:

Expense Category:Office SuppliesNoteAmountCumulative Balance at End of Prior Reporting Period:Note 1Add: Total Amount of Receipts for Current Reporting Period:Note 2Balance at End of Current Reporting Period:Note 3\$1,550.17

Leonard, Ronna-Rae

Note 1	This amount represents the Q3 ending balance reported on the Q3 COdisclosure report for this expense category for the period fromApr. 1, 2021toDec. 31, 2021
Note 2	This amount represents the total amount of receipts recorded for thisdisclosure expense category in the current reporting period fromJan. 1, 2021toMar. 31, 2022
Note 3	This amount represents the sum of the Q3 ending balance plus the Q4 scanned receipts total above. This amount also equals the Q4 disclosure report for the period from Apr. 1, 2021 to Mar. 31, 2022
Note 4	This disclosure expense category consists of the following accounts: 3480 Courier/Postage 3481 Office Supplies 3482 Office Equipment/Furniture (non-furniture allowance) - -

## 3481



### Habitat for Humanity ReStore Comox Valley

1755 13th Street	Dec 15, 2021
Courtenay, BC V9N 7B6	
(250) 334-3784	Cashier
https://habitatrestorevin.squ	are.site/
@vinhabitat	

#### PURCHASE

Authorization 071083 Receipt zTdO QST # GST/HST #

PST #

Mastercard AID A0 00 00 00 04 10 10

Houseware × 2 (\$5.00 each) HD (GREEN)	\$10.00
Subtotal	\$10.00
PST	\$0.70
Total	\$10.70
MasterCard (Contactless)	\$10.70

Visit our Online ReStore!

Copy this link to your browser: bit.ly/39jPpel

Return Policy: Items must be accompanied by receipt within 7 days of purchase for exchange or store credit only. Cash retunds on major appliances only, if returned within 7 days, and due to item malfunction. All clearance items are final sale and are not eligible for exchange or credit. All PINK price tag items are final sale.

CCD57150	
588 Crown Isle Blvd	
Courtenay, BC V9N 0A6	
5V Member 1165293 COPV PAPER 41.99 GP	
SUBTIDIAL 41.99	
TAX 5.04	
XXXXXXXXXXXX ACC1: MASTERLARD REFERENCE #: 66291475-0010011590 H AUTH #: 56772 2021/12/19 Invoice Number: 012159 Purchase - Mastercard A0000000041010 0000008000 01 APPROVED - THANK YSU 027 AMOUNT: \$47.03	1
IMPORTANT - retain this cors For your records CUSTOMER COPM	
MasterCard 47.03 CHANGE 0.00	
H (P)PST 7% 2.94 G (G)GST 5% 2.10 TOTAL NUMBER OF TITEMS SOLD = 1 2021/2022 141 68	
*SERISONS GREETINGS & HAPP* HOLIDAYS*	

2ENTRAL HM HWR BLDG CTR 5728-5 610 ANDERTON AVENUE COURTENAY BC

CARD TYPE MASTERCARD DATE 2022/02/01 TIME 5199 RECEIPT NUMBER H84114870-001-338-022-0 PURCHASE TOTAL

\$10.05

Mastercard A0000000041010 29D2B923CC4B81A1 0000008000-

### **APPROVED**

AUTH# 030547 01-027 THANK YOU

### NO SIGNATURE REQUIRED

CARDHOLDER COPY

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS

COURTEN 610 /	t / Postes Can AY DOWNTOWN PO ANDERTON AVE AY, BC V9N2H G#:	
2022/02/01 CC/CC428248	₩/G2	TR744416
G 5% Ltr other	3@\$3.19	\$9.57
Actual Weight 0.11 To V9N9A2	6kg	
Scale Service was -Off time	processed afte	er Mail Cut
SUBTL GST TOTAL		\$9.57 \$0.48 <b>\$10.05</b>
MasterCard Card Number		\$10.05
CHG. DUE RND. CHG.		\$0.00 \$0.00



WWW.CANADAPOST.CA / WWW.POSTESCANADA.CA





\*\* LD DRIFTWOOD MALL 250 703 2838 \*\* LOOKING FOR WORK? www.londondrugs.com

	LEXAR R	EADER		39.99	В
***	TAX	4.80	BAL	44.79	
VF	Master(	ard		44.79	
14	XXXXXXX	XXXXX			
AUTH: 0	74136		_		
	CHANGE			.00	
	(P)ST	2.80	)		
	(G)ST	2.00	)		
	LDExtras	. # :			
VISIT	S UNTIL	NEXT GI	(FT VOL	JCHER = 7	
1/2//2	2	00/7 0/		50303	

1/26/2	22	0067	80	0026 52727
	(B)OTH	= G.S.	Τ.	+ P.S.T.
LONDON	DRUGS L	IMITED	)	GST



Download the London Drugs app to track and redeem rewards + quickly refill prescriptions

CREDIT CARD TRANSACTION RECORD

LONDON DRUGS 67 #4000-2751 CLIFFE AVENUE COURTENAY, BC V9N 2L8

CASH REG.:080 EMPLOYEE: 52727

NO.: XXXXXXXXXXXXXX

AMOUNT

\_\_\_\_\_

\$44.79

1

Н

MASTERCARD PURCHASE

01/26/22 AUTH: 074136 REFERENCE: 66273446 0010016200

APL: Mastercard APN: AID: A0000000041010 TVR: 000008000

01 APPROVED - THANK YOU 027



COURTENAY	ality bobs
GST # GLADBAGWHT30 CUST#	\$3.49 GP
Terminal ID: QF15ET01 Trans #: 1001546 PURCHASE Mastercard ********	[otal: CAD\$3.50 Exp: **/** P
AID: A0000000041010 ACI/ISO 001/00 APPROVED 074817 SEQ 934001001301 TVR: 0000008000	
22/02/15	
*** CUSTOMER COPY	/ ***
PRE-TAX SUBTOTAL GST 5.00% PST 7.00% AMOUNT DUE MASTERCARD CHANGE DUE ITEM COUNT 1	\$3.49 \$0.42 \$0.59 \$3.50 \$9.50 <b>\$0.00</b>
As a Q-CARD Hol You have received the Q-POINTS and BONUS	e following
Q-CARD SALES Q-POINTS TOTAL Q-POINTS Q-POINTS TO DATE	1
Thank you for shop Quality Food an Island Origi 2/15/2022 151 #1001546	İs

Member Name:	Leonard, Ro	onna-Rae	_	
Expense Category:	Travel		<u>Note</u>	<u>Amount</u>
Cumulative Balance at En	d of Prior Reporting Peric	od:	Note 1	\$63.69
Add: Total Amount of Red	ceipts for Current Reporti	ng Period:	Note 2	
Balance at End of Current	Reporting Period:		Note 3	\$63.69
Note 1	This amount represen disclosure report for t <b>Apr. 1, 2021 t</b>	-	ory for the period	
Note 2	This amount represen disclosure expense ca Jan. 1, 2021 t		nt reporting peri	
Note 3	This amount represen scanned receipts total report for the period f	above. This amou from	nt also equals th	•
	Apr. 1, 2021 t	o Mar. 31	, 2022	
Note 4		se category consist onstituency Staff T of-Constituency St	ravel	g accounts:

Member Name:

wieniber wanne.	Leonara, Ronna Rae		
Expense Category:	Other Office Expenses		
		<u>Note</u>	<u>Amount</u>
Cumulative Balance at End	of Prior Reporting Period:	Note 1	\$677.25
Add: Total Amount of Rece	pipts for Current Reporting Period:	Note 2	
Balance at End of Current F	Reporting Period:	Note 3	\$677.25
Note 1	This amount represents the Q3 endi disclosure report for this expense ca Apr. 1, 2021 to Dec		
Note 2	This amount represents the total am disclosure expense category in the c Jan. 1, 2021 to Man	•	
Note 3	This amount represents the sum of t scanned receipts total above. This an report for the period from	-	
	Apr. 1, 2021 to Ma	r. 31, 2022	
Note 4	This disclosure expense category consists of the following accounts: 3490 Miscellaneous Expenses/Liscenses 3491 Consultants/Contractors 3492 Janitorial/Repairs/Maintenance 3493 Security 3494 Utilities 3495 Cell Phone/Cable 3496 Meals/Hospitality fo Staff Members		

Leonard, Ronna-Rae