

Travel Expense Chart

Employee Name	David Goodis		
Employee Title	Assistant Commissioner, Policy & Corporate Services		
Date of Travel	May 10-11, 2018		
Destination (s)	Hamilton, ON		
Purpose	Attend Reaching Out to Ontario (ROTO)		
Related Costs:			
Airfare	\$		-
Accommodation	\$	149.64	
Meals	\$	60.92	
Other transportation	\$		-
Hospitality	\$		-
Other expenses	\$		-
Total:	\$		210.56

May 16, 2018

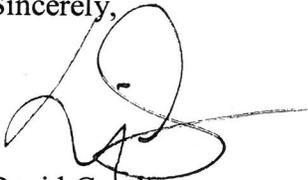
Re: Missing Itemized Receipt – Meal Expense – Receipt #2

Please accept this letter as my declaration that I was not provided with or have misplaced the original itemized receipt for the meal expense incurred on May 11, 2018 during my trip to Hamilton, Ontario for the Reaching Out to Ontario (ROTO) speaking engagement.

Attached to my expense claim is the credit card receipt for this meal (Receipt #2 – \$17.45).

I declare that the information provided in this letter is true and accurate, that the transaction did not include the purchase of alcohol, and I have not and will not use this receipt (if found) to claim reimbursement from any other source.

Sincerely,

A handwritten signature in black ink, appearing to read 'David Goodis', with a long horizontal flourish extending to the right.

David Goodis
Assistant Commissioner
Policy and Corporate Services

1

NIQUE
123 JAMES ST N UNIT 101
HAMILTON ON

CARD *****
CARD TYPE
DATE 2018/05/10
TIME 0662 21:10:34
SERVR ID Athena
CHECK # 52891
TABLE # 43
RECEIPT NUMBER
C82006166-001-001-060-0

PURCHASE
AMOUNT \$36.84
TIP \$6.63
TOTAL
\$43.47

CREDIT
A0000000031010
5E9DAF794506DF14
8080008000-6800
24F1B2383A1F8977
8080008000-7800

APPROVED
AUTH# 009851 01-027
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

NIQUE RESTAURANT
123 James Street North
Hamilton, Ontario
Tel: (905) 529-8000

Server: Athena Check: 52891
Table : 43 Date : 5/10/2018
Guests: 5 Time : 8:58:53 PM
Seat : 1,4

1 Trout 24.00
0.2 Green Beans 1.40
0.4 Sushi Nachos 7.20

SUBTOTAL: 32.60
HST: 4.24

TOTAL : 36.84

Thank you for dining with us!
HST# 772581690RT0001

2

BROWN DOG BOOTLEG CAFE

Date: 5/11/2018 Time: 12:30:12 PM

Status: Approved

Card Type: Canadian Debit
Card Number: XXXXXXXXXXXX
Swipe/Manual: Swipe
Server ID: 28 Amy
Check Number: 254917
Tab Number: 2883
Persons:

AMOUNT 17.45

Approval: 01192I

I AGREE TO COMPLY WITH
THE CARDHOLDER AGREEMENT

Canadian Debit: 16.95

.MERCHANT ID: 8505494B

. SALE

.*****

ENTRY METHOD: CHIP

.DATE: 2018/05/11 TIME: 12:30:39

.INV#: 254917 APPR CODE: 01192I

.RETRIEVAL #: 0034

.AMOUNT CAD\$ 16.95

.TIP CAD\$ 0.50

.=====

.TOTAL CAD\$ 17.45

. APPROVED - THANK YOU

.BY ENTERING A VERIFIED PIN, CARDHOLDER
.AGREES TO PAY ISSUER SUCH TOTAL IN
.ACCORDANCE WITH ISSUER'S AGREEMENT WITH
.CARDHOLDER

.Application Label:
CREDIT

.AID:A0000000031010

.TVR:8080008000

.TSI:7800

.RESP CD:00

. NO SIGNATURE REQUIRED

*** ORIGINAL COPY ***



3

84

05-15-18

David Goodis	Folio No. :		Room No. :	307
	A/R Number :		Arrival :	05-10-18
	Group Code :		Departure :	05-11-18
	Company :	Government Canada	Conf. No. :	67366253
	Membership No. :		Rate Code :	IMCGV
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
05-10-18	*Accommodation	129.00	
05-10-18	HST 13%	16.77	
05-10-18	D.M.P. SERVICE CHARGE	3.43	
05-10-18	D.M.P. HST	0.44	
05-11-18	XXXXXXXXXXXXX		149.64
Total		149.64	149.64
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.