

Proactive Disclosure of Expenses

Dr. John Reynolds, Acting Vice-President (Research) For the period of August 1, 2016 to September 30, 2016

Overview

| Travel Expenses | | | | |
|-----------------|---------------------|-----------------------------------------------------------|----------|--|
| Item # | Date | Description | Amount | |
| 1. | August 29, 30, 2016 | Travel to Banff to attend Executive Leadership Team (ELT) | \$113.16 | |
| | | retreat. | | |

| Non-Travel Expenses | | | | |
|---------------------|-------------------|--------------------------------------------------------------|---------|--|
| Item # | Date | Description | Amount | |
| 2. | August 9-25, 2016 | Parking while attending meetings and events on behalf of the | \$41.75 | |
| | | University. | | |

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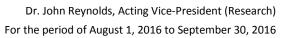
Dr. John Reynolds, Acting Vice-President (Research) For the period of August 1, 2016 to September 30, 2016



Detail for Travel Expenses

| Travel Expenses-Item 1 Detail | | | | | | | |
|-------------------------------|--------------------------------------------------------------------|------------------|--------|--------|--------|----------|--|
| For | Dr. John Reynolds, Acting Vice-President (Research) | | | | | | |
| Description/Purpose | Travel to Banff to attend Executive Leadership Team (ELT) retreat. | | | | | | |
| Date | August 29, 30, 2016 | | | | | | |
| Destination | Banff, Alberta | | | | | | |
| Type of Expense | Airfare | Other Transport* | Hotel | Meals | Other | Total | |
| Amount | \$0.00 | \$113.16 | \$0.00 | \$0.00 | \$0.00 | \$113.16 | |
| Notes | Other Transport*: 246 kilometers @ \$0.46 per kilometer. | | | | | | |

Proactive Disclosure of Expenses





Detail for Non-Travel Expenses

| Non-Travel Expenses-Item 2 Detail | | | | | |
|-----------------------------------|---------------------|--------------------------------------------------------------------------|--------|---------|--|
| For | Dr. John Reynolds, | Dr. John Reynolds, Acting Vice-President (Research) | | | |
| Description/Purpose | Parking while atter | Parking while attending meetings and events on behalf of the University. | | | |
| Date | August 9-25, 2016 | August 9-25, 2016 | | | |
| Destination | Calgary, Alberta | Calgary, Alberta | | | |
| Type of Expense | Meals | Parking | Other* | Total | |
| Amount | \$0.00 | \$41.75 | \$0.00 | \$41.75 | |
| Notes | | | | | |
| | | | | | |



2500 University Drive NW Calgary, Alberta T2N 1N4 Telephone (403)210-7279

LOST RECEIPT DECLARATION FORM

This form is to be completed if you are unable to produce original receipts.

| I, John Reynolds , | UCID# | s.17(1) | |
|-----------------------------------------------------|--------------|------------------|---------------|
| hereby declare that I have either lost, never | received or | am unable to | produce an |
| original receipt. I further declare that I have not | and will not | use this receipt | (if found) to |
| claim reimbursement from any other source, | or to suppor | rt any claim for | income tax |
| deductions in the future. | | | |
| | | | |

A detailed list of the goods and/or services purchased is as follows:

| Vendor Name: | Impark | |
|------------------------------------------|------------------------|--|
| Vendor Address: | 112 - 10th Avenue S.E. | |
| | | |
| Vendor Phone: | 403-299-7275 | |
| Date of Purchase: | August 8, 2016 | |
| Amount of Purchase: | \$33.60 | |
| Description of goods/services purchased: | | |
| receipt lost in transit | | |
| | | |
| | | |
| L | | |

John Reynolds

Printed Name of CLAIMANT

Signed Name of CLAIMANT

PRINT



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| original receipt. I further declare that I have not | and will not | use this receipt (if found) to |
| claim reimbursement from any other source, o | or to suppor | t any claim for income tax |
| deductions in the future. | | |

A detailed list of the goods and/or services purchased is as follows:

| Vendor Name: | Indigo Kensington Gate | | |
|------------------------------------------|---------------------------------------|--|--|
| Vendor Address: | 101 - 10A Street N.W. | | |
| | | | |
| Vendor Phone: | 403-296-1820 | | |
| Date of Purchase: | August 24, 2016 | | |
| Amount of Purchase: | \$3.15 | | |
| Description of goods/services purchased: | | | |
| receipt lost in transit | | | |
| | | | |
| | | | |
| | · · · · · · · · · · · · · · · · · · · | | |

Printed Name of CLAIMANT

Signed Name of **CLAIMANT**

PRINT

WWW.SPARKSCIENCE.CA

WWW.SPARKSCIENCE.CA

Terminal: 719 Plate: s.17(1)

Zone: Plate : 8310 C s.17(1)

Valid through: FRIDAY 26 AUG 16 8:47 AM

AMOUNT PAID: \$5.00 (GST incl.) Start Time: 8/25/2016 8:47 AM

Auth No: 074492 Receipt No: 31782