



EXPENSE REPORT

DATE: November 1 - 30, 2023

Name: Max Gibb

Title: HRA Board Member

1) Travel

Travel Type	Expense Description	Date	Amount	Notes
HRA Board Meeting	accommodations	Aug 23	153.35	Lacombe
			<u>153.35</u>	

2) Conferences

Conference Name	Expense Description	Date	Amount	Notes
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3) Professional membership dues

Membership Type	Expense Description	Date	Amount	Notes
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Lacombe Inn & Suites
4751 63 Street
Lacombe, AB T4L 1K7

Fax: (403)786-2270
Email: frontdesk@bestwesternlacombe.com

Phone: (403)782-3535

Web:



Guest Charges

Folio #: 111393 Guest : **Gibb, Max** Conf #: 105283
Room #: 205 CRS #: BW 640908125-01
Payment Method : Credit Card Billing Reference :
Rate : Company : Arrival: 8/23/2023
8/23/2023 \$143.99 Departure: 8/24/2023

x,

Date	Department	Reference	Voucher	Room	Charge	Credit	Balance
8/23/2023	ROOM			205	\$143.99		\$143.99
8/23/2023	GSTR			205	\$7.20		\$151.19
8/23/2023	TRL			205	\$5.76		\$156.95
8/23/2023	VA	Reservation cancelled - VI4937		205		\$156.95	\$0.00
Balance							\$0.00

Credit Card Payment

Payment Type: Credit Card Amount Paid: \$156.95
Account: VI4937 Approval Code: _011005_
Account Holder: Approval Amount: (\$156.95)

I agree that my liability for all charges is not waived. GST# 826029704

Thank you for staying with us, we appreciate your business and hope to see you again soon.

156.95
(7.20)
3.60
153.35

Guest Signature _____