



Accounting Services Division  
Corporate Accounts Payable

## Corporate Business Expense Claim

### Attendance at Conference/ Seminars/ Training, and Business Travel

Conference     Seminar     Training     Business Travel

This form should be submitted within 10 business days of return from the conference/seminar.

Attach original approved "Request for Authorization Form" and all original receipts.

Foreign Currency Exchange Rate** Exchange Rate applied to convert from local currency to CAD = _____ <small>(if applicable)</small>			Invoice Number** <b>EXP/AP14-17/19</b>
Vendor Name** Cheryl Blackman			Vendor Number** <b>1019693</b>
Division** EDC- Museums & Heritage Services	Work Address** Metro Hall, 55 John Street, 8th Floor	Postal Code** M5V 3C6	Invoice Date** (m/d/yyyy) Thursday April 18, 2019
Name and Location of Conference / Seminar / Training / Business Travel** Canada Museum Association Conference Hilton, Toronto, 145 Richmond Street W, Toronto, On M5H 2L2			Payment Amount** \$ <b>6</b>
Start Date** (m/d/yyyy) Sunday April 14, 2019		End Date** (m/d/yyyy) Wednesday April 17, 2019	

Description	GL Account **	Cost Centre/ WBS Element/ Internal Order **	Functional Area **	Net Amount **	HST **	Total Including Taxes **
Registration Fees	4256	AH0047 Cheryl's Pcard	<del>1570200000</del> <b>1570100000</b>	945.00	\$122.85	1,067.85
Travel <input checked="" type="checkbox"/> Air <input checked="" type="checkbox"/> Train <input type="checkbox"/> Bus	4215					
Baggage Fees / Insurance						
Use of Personal Vehicle Kms X <input type="checkbox"/> \$0.52/km or <input type="checkbox"/> \$0.54/km						
Accommodation days @ \$ _____ /day						
Ground Transportation (to and from Airport) ON ie: taxis and car rental    TORONTO	4220					
Ground Transportation (to and from Airport) ie: taxis and car rental    DESTINATION *Foreign Transactions- NO TAX*	4220					
Ground Transportation (DESTINATION-LOCAL) ie: taxis, bus, subway & car rental *Foreign Transactions- NO TAX*	4220					
Per Diem (See Bus. Expense Policy) _____ days @ \$ _____ / day	4230					
Other (Please specify)						
Training	4310					
<b>TOTAL EXPENSES</b>						<b>\$1,067.85</b>

Less: Advances & Prepayments: *Mandatory if applicable	GL Account **	Cost Centre/ WBS Element/ Internal Order **	Functional Area **	SAP Document Number	Net Amount **	HST **	Total Including Taxes **
Registration Fees	4256	AH0047	1570200000	<del>5202-200-5300-000</del>	-\$945.00	-\$122.85	1,067.85
Air Travel	4215			<b>12-15523</b>	-	-	-
Accommodation				<b>12-15524</b>	-	-	-
Grds Transportation (To & Fr. Airport) ON.					-	-	-
Grds Transportation (To & Fr. Airport) Destination					-	-	-
Grds Transportation (local-des. taxi, bus, train, etc.)					-	-	-
Other (Please specify)					-	-	-
<b>TOTAL ADVANCES &amp; PREPAYMENT AMOUNT**</b>							<b>-\$1,067.85</b>
<b>TOTAL PAYABLE TO INDIVIDUAL / CITY</b>							<b>\$0.00</b>

Employee Name: Cheryl Blackman  
 Title: Director, Museums & Heritage Services  
 Date: May 14 2019  
 Telephone: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Authorized by: Mike Williams  
 Title: General Manager, EDC  
 Date: MAY 22 2019  
 Telephone: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**\*\*This form may not be altered in any manner. All mandatory fields must be completed and filled in electronically. Incomplete forms will be returned to the originator for corrections prior to being processed for payment. Hand written forms will not be accepted and will be returned to the division.**

**Important note:** Employees seeking reimbursement and program administration staff are responsible for blacking out or severing the full credit card numbers and/or non-business phone numbers that may appear on original receipts before sending to Accounts Payable for processing.

**RECEIVED**  
 MAY 21 2019  
 Updated: June 2015

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**REPORT ON CONFERENCE**

**Employee Name:** Cheryl Blackman  
**Division:** EDC- Museums & Heritage Services  
**Date Submitted:** Thursday April 18, 2019

**Name of Conference:** Canadian Museums Association Annual Conference  
**Location:** The Hilton Hotel, Toronto, ON  
**Date(s) Attended:** Sunday April 14<sup>th</sup>-Wednesday April 17<sup>th</sup>, 2019

**Describe the benefits from attending the Conference (including any benefits to you and to the City):**

**Personal Development:**  
CMA 2019 offered as a hub for knowledge sharing, providing ample opportunity to network with peers and colleagues from across Canada. The conference showcased today's best practices, to shine a light on the museum of tomorrow; the 2019 theme explored how museums can learn from what is happening today to successfully plan the future.

**Networking:** During the conference I was able to meet more than 30 museums representatives from across Canada. In addition, I attended the Museum Directors Symposium on the Sunday before the conference, and we played host to the Canadian History Museum Directors meeting at Fort York on the Monday before the Conference.

**City Benefits (including financial benefits):**  
From the Conference, a partnership has been struck with the Museums of Nova Scotia to work on new models for the visitor experience in heritage museums. Talks have begun with the Canadian Museum for Human Rights to acquire travelling exhibits like Nelson Mandela which they are now touring.

**Employee's signature:** [Redacted] **Date:** 05/17/19

**Approved by (please print):** Mike Williams  
Division Head or Designate

**Signature:** [Redacted] **Date:** MAY 22 2019

**Note: Please complete this form within 10 days after attending the conference.**

RECEIVED  
MAY 21 2019

# Request for Authorization

## Attendance at Conferences/Seminars, Training and Business Travel

This form should be completed and the necessary approvals obtained at least 10 business days in advance of undertaking any training, business travel, and/or attending any conference/seminar.  
The \$3,500 limit does not apply to training. Please refer to the completion guidelines of this form and all related policies.

Conference  Seminar  Training  Business Travel

Name:	Cheryl Blackman		
Division:	Economic Development and Culture		
Work Address:	Metro Hall, 55 John Street, M5V 3C6		
Name of Conference/Seminar/Training:	Canadian Museum Association Conference		
	Within GTA <input checked="" type="checkbox"/>	Outside GTA & within Ontario <input type="checkbox"/>	Outside Ontario/Canada <input type="checkbox"/>
Destination:	Hilton Toronto, 145 Richmond Street West, Toronto, ON, M5H 2L2		
Start Date:	14-Apr	End Date:	17-Apr-19
Are breakfast, lunch and/or dinner meals provided by the Sponsor? Please specify: (Meals will be deducted from per Diem as stated in Business Exp Policy)			
included			
<b>Purpose: Use space provided below for full description</b>			
Attending this conference will offer a hub for knowledge sharing, providing opportunity to network with peers and colleagues from across Canada. The conference will showcase today's best practices and explore how museums can learn from what is happening today to successfully plan for the future.			

**ESTIMATED COSTS: (The estimated costs should include HST and all other applicable taxes)**

*Use Exchange rate(s):	1 unit local currency =	\$ _____ CAD	Foreign Currency*	Canadian\$ (incl. tax)
	1 unit local currency =	\$ _____		
	1 unit local currency =	\$ _____		
Registration Fees: (Conference/Seminar/Training)				
\$750+HST (Conference fee) \$195+HST (Symposium fee)			N/A	\$1,067.85
Accommodation: (Standard Single Room)				
Number of Days: _____ X \$ _____ /day incl. taxes			N/A	N/A
Travel Method:				
Air <input type="checkbox"/> Train <input type="checkbox"/> Bus <input type="checkbox"/>				
Personal Vehicle: _____ km X \$0. _____ CAD/km			N/A	N/A
Ground transportation: (including car rental, to/from airports) Specify estimates:			N/A	N/A
Sundry Expenses: (See Business Expense Policy; Meals provided are deducted)				
Number of Days: _____ X \$ _____ CAD or USD			N/A	N/A
<b>Sub-Total Estimated Costs:</b>				\$1,067.85
- Other Business Meeting expenses outside of Conference costs, please specify:				N/A
<b>TOTAL ESTIMATED COST:</b>				\$1,067.85

Cost Centre/ WBS Element to be charged:	AH0047
Functional Area to be charged:	1570200000

I certify that all estimated costs relating to this travel have been included in this form.

Signature of Employee:

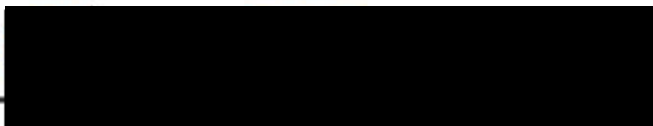


Mar 1, 2019  
(date)

I have confirmed that approved funds are available for this purpose:

Approval for Proposed Expense

Division Head or Mike Williams  
(print name)



March 4, 2019  
(date)

Deputy City Manager:  
(print name)

(signature)

(date)

City Manager/Mayor:  
(print name)

(signature)

(date)

Committee & Report No. (if applicable)

(date)



# RECEIPT

**SEND TO:**

Cheryl Blackman  
City of Toronto Museums & Heritage Services  
City of Toronto - Museums & Heritage Services 55 John St. 8th Floor  
Toronto ON M5V 3C6

RECEIPT NO: 20605  
DATE PAID: 6-Mar-2019

**2019 Directors' Symposium**

DESCRIPTION	AMOUNT
Cheryl Blackman	
Event Fees - \$195.00 Directors Symposium (also attending CMA 2019) (plus tax)	\$195.00
EventTax13 on \$195.00	\$25.35
<b>Total</b>	<b>\$220.35</b>
<b>Total Paid</b>	<b>\$220.35</b>

Transaction #	Date	Paid by	Amount
060319A43-E570837D-9FD5-4117-A333-B84131779BE9	03/06/2019 14:00	MC	\$220.35

*Business No.: 10686 4374 RT0001*  
*THANK YOU FOR YOUR PAYMENT*

Canadian Museums Association  
280 Metcalfe Street Suite 400  
Ottawa, ON K2P 1R7  
Phone: 613-567-0099



# RECEIPT

**SEND TO:**

Cheryl Blackman  
Museums and Heritage Services, City of Toronto

RECEIPT NO: 20599  
DATE PAID: 6-Mar-2019

**CMA 2019 National Conference**

DESCRIPTION	AMOUNT
Cheryl Blackman	
All Inclusive Conference fee (member rate) - \$750.00 All Inclusive Multi-Delegate Rate (plus tax)	\$750.00
EventTax13 on \$750.00	\$97.50
Total	\$847.50
Total Paid	\$847.50

Transaction #	Date	Paid by	Amount
060319E3C-8D2407DC-C0BA-4DDB-AD2F-6949058BCD14	03/06/2019 12:57	MC	\$847.50

*Cheryl's Peard*  
*SAP# 5202-200*

Business No.: 10686 4374 RT0001  
THANK YOU FOR YOUR PAYMENT

Canadian Museums Association  
280 Metcalfe Street Suite 400  
Ottawa, ON K2P 1R7  
Phone: 613-567-0099