



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 = _____ (if applicable)			Invoice Number** EXP 0A24-JA24/19
Vendor Name** Ned Sabev			Vendor Number** 1010366
Division** EDC	Work Address** 100 Queen street West, 8th floor, East Tower	Postal Code** M5H 2N2	Invoice Date** (m/d/yyyy) January 24, 2019
Name and Location of Conference / Seminar / Training / Business Travel** ULI Toronto: The Business of Cannabis: Real Estate Issues 2019			Payment Amount** \$ <u>0</u> 67.80
Start Date** (m/d/yyyy) Thursday, January 24, 2019		End Date** (m/d/yyyy) Thursday, January 24, 2019	

Description	GL Account**	Cost Centre/ WBS Element/ Internal Order**	Functional Area**	Net Amount**	HST**	Total Including Taxes**	
Registration Fees	4256	ED0160	1540200000	60.00	7.8	67.80	
Travel <input type="checkbox"/> Air <input type="checkbox"/> Train <input type="checkbox"/> Bus							
Baggage Fees / Insurance							
Use of Personal Vehicle Kms X <input type="checkbox"/> \$0.52/km or <input type="checkbox"/> \$0.55/km						-	
Accommodation days @ \$ _____ /day						-	
Ground Transportation (to and from Airport) ON ie: taxis and car rental TORONTO						-	
Ground Transportation (to and from Airport) ie: taxis and car rental DESTINATION *Foreign Transactions- NO TAX*						-	
Ground Transportation (DESTINATION-LOCAL) ie: taxis, bus, subway & car rental *Foreign Transactions- NO TAX*						-	
Per Diem (See Bus. Expense Policy) days @ \$ _____ / day						-	
Other (Please specify)						-	
Training	4310					-	
TOTAL EXPENSES						\$67.80	
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	ED0160	1540200000	1200009282	-\$60.00	-\$7.80	67.80
Air Travel					-	-	-
Accommodation					-	-	-
Grds Transportation (To & Fr. Airport) ON.					-	-	-
Grds Transportation (To & Fr. Airport) Destination					-	-	-
Grds Transportation (local-des. taxi, bus, train, etc.)					-	-	-
Other (Please specify)					-	-	-
TOTAL ADVANCES & PREPAYMENT AMOUNT**							-\$67.80
TOTAL PAYABLE TO INDIVIDUAL / CITY							\$0.00

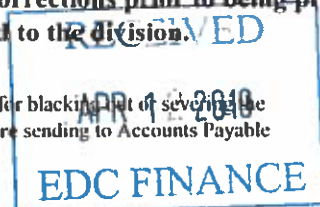
Employee Name: Ned Sabev
 Title: Policy & Research Consultant EDC
 Date: April 10, 2019
 Telephone: _____
 Signature: _____

Authorized by: Larissa Deneau
 Title: Manager, Policy & Development EDC
 Date: April 10, 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 of severable full credit card numbers and/or non-business phone numbers that may appear on original receipts before sending to Accounts Payable for processing.

ASF.0030.02



Updated: June 2015

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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:	Ned Sabev		
Division:	Program Support - EDC		
Work Address:	City Hall, 100 Queen Street West, 8 floor East tower		
Name of Conference/Seminar/Training:	The Business of Cannabis: Real Estate Issues 2019		
	Within GTA <input checked="" type="checkbox"/>	Outside GTA & within Ontario <input type="checkbox"/>	Outside Ontario/Canada <input type="checkbox"/>
Destination:	22 Adelaide St. West, Suite #3400		
Start Date:	24-Jan-19	End Date:	24-Jan-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)			
n/a			

Purpose: Use space provided below for full description
 Recreational cannabis was legalized in October, but the impacts on real estate in Ontario continue to unfold. This event will address many questions on the minds of real estate practitioner.
 With an ever-evolving legal and regulatory regime, an untested approach to retail in Ontario, and constantly fluctuating markets, this is sure to be a lively and thought-provoking presentation.

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)				\$60.00
Accommodation: (Standard Single Room)				
Number of Days: _____ X \$ _____ /day incl. taxes				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
Ground transportation: (including car rental, to/from airports) Specify estimates:				n/a
Sundry Expenses: (See Business Expense Policy; Meals provided are deducted)				
Number of Days: _____ X \$65.00 CAD or USD				n/a
Sub-Total Estimated Costs:				\$60.00 + 13% HST
- Other Business Meeting expenses outside of Conference costs, please specify:				
TOTAL ESTIMATED COST:				\$67.80

Cost Centre/ WBS Element to be charged:	ED0160
Functional Area to be charged:	

I certify that all estimated costs relating to this

Signature of Employee: _____

01/10/2019
(date)

I have confirmed that approved funds are available for this purpose

Approval for Proposed Expense

Division Head or	Mike Williams		Jan 15/19
	(print name)	(signature)	(date)

Deputy City Manager:			
	(print name)	(signature)	(date)

City Manager/Mayor:			
	(print name)	(signature)	(date)

Committee & Report No. (if applicable)			
			(date)



Urban Land Institute

Urban Land Institute
2001 L Street, NW
Suite 200
Washington, DC 20036

Email: customerservice@uli.org
1-800-321-5011 or 202-624-7109

Customer #: 0011364811

Mr. Ned Sabev
100 Queen Street West
Toronto, ON M5H 2N2
CANADA

Receipt

Invoice #: 2787897
Invoice Date: 01/16/2019

Description	Product Code	Quantity	Price	Discount	Amount
81511946 Non-Member Registration CAD	Non-Member	1	\$60.00	\$0.00	\$60.00

This invoice must be paid in full within 30 days of the invoice date. Questions can be directed to customerservice@uli.org or by calling +1-800-321-5011 or +1-202-624-7109.

Invoice Total	\$60.00
Taxes	\$7.80
Amount Paid	\$67.80
PLEASE PAY	\$0.00

PLEASE DETACH AND REMIT WITH YOUR PAYMENT

Customer #: 0011364811

Mr. Ned Sabev
100 Queen Street West
Toronto, ON M5H 2N2
CANADA

Select Payment Method	
<input type="checkbox"/>	Check Enclosed
Card Provider _____	Exp Date ____/____
Card # _____	
Card Holder's Name _____	
Card Holder's Signature _____	

Remit Payment To: **Urban Land Institute**
2001 L Street, NW, Suite 200, Washington, DC 20036

Total Due: **\$0.00**
Amt Remitted : _____