Accounting Services Division Corporate Accounts Psyable	Corporate Business Expense Claim Attendance at Conference/ Seminars/ Training, and Business Travel								
Conference This for	n shoold be su	bmitted with	in 10 business day	raining s of return fr	om the conferen	ce/semina			
Atte	ach original ap	proved "Rec	uest for Authoriza	tion Form" :	and all original :	receipts.		Number**	
oreign Currency Exchange Rate** Exchange Rate applied to convert from loca	d corrency to	CAD =						IAPH-M	217/19
				(if applicable)					THE T
endor Name**						ľ	/ endor	Number**	(
Chris Selman Division**	Address** Postal Code**				1	Invoice Date** (m/d/yyyy)			
Conomic Development & Culture	tic Avenue, Toronto, Ontario M6K 1X9					05 01/2	ام الم		
Name and Location of Conference / Semina Canadian Museums Association National Con	r / Training / 1	Business Tra	ivel ^{es} et West Toronto Or	nterio MSH 21	2	Į,	s S	a Amount	904.00
Canadian Museums Association National Con Sant Date** (m/d/yyyy)	ICTURCE, 143 FC	chinoud Sue	et wear, toronto, or	End Date*	· (m/d/yyyy)				
	April 14, 2019				W	ednesday.	April	7, 2019	
			Cost Centr	w/			_		Total
m - 1 at -		GL	WBS Eleme		Functional Area	Net Amor		HST	Including Taxes
Description		00	44		88	88		**	- 44
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Registration Fees		4256							904.00
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Kms X	km				-	-		\vdash	· · ·
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e: taxis and car rental TORONTO						_			-
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re: taxis, bus, subway or car rebus Foreign Transactions—NO TAX*			1 _						
Per Diem (See Bus. Expense Policy)			4 (6)	- 1776					
days @ \$/ day						l.			
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Other (Please specify)							Dis.		
							10.30		
Training		4310							-
	450.50	-0.00000000000			T	OTAL EXI	PENSES	3,800 0	\$904.00
Less: Advances & Prepayments:									
*Mandatory if applicable		er.	Cost Centre/	Functional	SAP	Ne	4		Total
William Co. J. L. Spranner		GL Account	WBS Element/ Internal Order	Area	Document	Amo	unt	HST	Including Taxes
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Grds Transportation (To & Fr. Aisport) Dection									-
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Other (Please specify)		22/20							
									40.50
TOTAL ADVANCES & PREPAYMENT AMO	UND	(12)	G. A. S. G. S.	-					\$0.00
35580 932 = 10 10 25	TOTAL P	AYABLE 1	O INDIVIDUA	L CITY				44.79	\$904.00
Frankrige News	Chris Selman	-	Ant	thorized by:	Cher	yl R	lac	kman	
Employee Name: Reg	Chris Selman istration Assistant				D.	Cheryl Blackman Director			<u></u>
Title:	Man I gove	1			U	recru	יכ		
Date:	May 1, 2019	į	Dat	le:					
Telephone:			Tel	ephone:					
Signature			Sie	neture:					
Signature:					-				
**This form may not be altered	n anv man	ner. All w	andatory field	ls must be	completed a	nd fille	d		
**This form may not be altered in electronically. Incomplete for for payment. Hand written form	ms will be r	eturned t	o the originato	r for corr	ections prior	r to bein	d ng pro	cess	ied

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.

ASF.0030.02

Updated: June 2015



REPORT ON CONFERENCE

	Cnns Seiman						
Employee Name:							
Division:	EDC - Museums & Heritage Services						
Date Submitted:	May 1, 2019						
Name of Conferen	ce: Canadian Museums Asso	clation National Conference					
Location:	Toronto, Ontario						
Date(s) Attended:	April 15-18, 2019						
Describe the benefito the City):	ts from attending the Conference	(including any benefits to you and					
be useful in my day-i	nd workshops offered at this conferen	nce covered a range of topics that will n Assistant. Specifically, I was able to standards, creating sustainable ibition spaces.					
Networking: The conference provacross Canada, inclu	ided an excellent opportunity for eng Iding those working at federal, provin	gage with heritage professionals from notal, and municipal institutions.					
Learning new process streamline our existing conference also prov	ding financial benefits): sees and standards which can be sha ng departmental workflow and developed within the wider context of the nation	ared with my colleagues should help op new work methods. Attending the e Services department and the onal museum system.					
Employee's sign	nature:	Date: May 1, 2019					
Approved by (p	ease print): Mike William Division Head or D						
Si	gnature:_	Date:					

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



Corporate Accounts Payable

Request for Authorization
Attendance at Conferences/Seminars, Training and Business Travel

This form should be comp any training, business trav The \$3,500 limit does not	el, and/or attending any	conference/se	eminar.			
Conference				o 1.	Business Travel	
Name:	Chris Selman			ř		
Division:	Economic Developm	ent & Cult	шге	III	\$2	
Work Address:	98 Atlantic Avenue,	Toronto, C	entario en la composición de la composición dela composición de la composición de la composición de la composición dela composición de la composición dela composición dela composición de la composición de la composición de la composición dela composición del composición dela composición			
Name of Conference	Seminar/Training:	JEL	Ca	anadian Museums	Association National C	onference
Within GTA		outside GTA	& within Ontario		Outside Ont	ario/Canada L
Destination:	145 Richmond Stree	t West, To	ronto, Ontario,	M5H 2L2	1	
	Monday, April 14, 2			End Date:		April 17, 2019
Are breakfast, lunch a in Business Exp Policy		provided by	the Sponsor?	Please specify: (h	feals will be deducted fro	m per Diem as stated
		lays. Becaus	se the conference	e is in Toronto, I w	ill be able to return home	for dinners after the
conference has conclud		10.0			V .	
	provided below for fi			10 6 6	MA 2019 offers a hub for	. la caracteria de la c
and a showcase of best management standards, offers a chance to intered discuss, problem solve, CMA conference also h	practices. This include digital museums, sust act and engage with a c and better understand telps to convey the Cit	es many disc ainable collediverse grou the issues a y and its sta	cussions and wor ecting, and displ up of museum pround events currer and events currer off as being engag	rkshops that directly aying collections in office of the manual office o	y pertain to my work scop n non-traditional spaces. I host of different organiza useum field across the na ctice on a national scale. I iem costs be covered by t	pe, such as: collection The conference also tions in order to tion. Attendance at a Because the conference
70	MIN (A TIED COCTY	2. 70%		id in alvida UST and	d all other applicable tay	ae)
*Use Exchange rate(s):	1 unit local currency =	o: (Ine estin		CAD	d all other applicable tax	3)
	1 unit local currency =	E E	\$		Foreign Currency*	Canadian\$ (incl.tax)
-	1 unit local currency =	■ N#	\$			
· Registration Fees:	(Conference/Semina	ar/Training)	10	•	
Includes \$150 in addi	tion to conference fla	at rate for a	ittendance to fu	ill-day workshop	- 14	\$800
- Accommodation: (Standard Single Room)			8	J.	
Number of Days:	X	\$	/day i	ncl. taxes	ō.	N/A
· Travel Method:	_				*	
Air	☐ Train		Bus		19	,,,,
Personal Vehicle:	km X	\$0	CAD/km	1.0		N/A
Ground transportat	tion: (including car r	ental, to/ird	om airports) Sp	ecity estimates:		N/A
Sunday Evnenses:	(See Business Expen	se Policy:	Meals provided a	re deducted)		NA
Number of Days:	Х	\$00		or USD	30	N/A
rumber of Days.		- Logical		Estimated Costs		\$800
Other Business Mee	ting expenses outsid	e of Confe			•	397
			TOTAL EST	IMATED COST	:	\$800
Cost Centr	re/ WBS Element to b	e charged:	A	H0059		Ma
	Functional Area to b			0100000 1		Ma
1 cer	tify that all estimated o	osts relating	e to this travel h	ave been included i	in this form.	
Signature of Empl	•			(%) •	÷.	Feb 27, 2019
I have confirmed the	nt approved funds are a	vailable for	this numose:	and the constant of the		(unic)
			min harhana.	<u> </u>		VIII (
Approval for Propos					2	Mar41- 1 2019 1
Division Head or	Mike Williams (print name)			(signature)		(date)
Deputy City Manager:	Giuliana Carbone (print name)		<u> </u>	(signature)	(<u></u>	(date)
City Manager/Mayor:	(print name)			(signature)		(date)
Committee & Report No				(2)Eumme)	1.	[
	- 14 approcuries				(de	nte)
Updated: March 2016					5.7	



RECEIPT

SEND TO: Chris Seiman RECEIPT NO: 20602 DATE PAID: 6-Mar-2019

CMA 2019 National Conference

DESCRIPTION	AMOUNT
Chris Seiman	
Basic Conference fee (member rate) - \$650.00 Basic Multi-Delegate Rate (plus tax)	\$650.00
Please select the price below \$75.00 Collection Management in Canadian Museums (plus tax)	\$75.00
Please select the price below \$75.00 Prioritizing Inclusion to Create Accessible Exhibits (plus tax)	\$75.00
EventTax13 on \$800.00	\$104.00
Total	\$904.00
Total Paid	\$904.00

Transaction #	Date	Paid by	Amount
060319A43-FE32F090-3644-4893-90AF-DF8C79A637F2	03/06/2019 13:42	MC	\$904.00

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 Use the drop-down menus below to view transactions since your last statement, view one of your last three statements or to sort your transactions by account access if applicable.

Transaction amounts displayed for pending transactions may differ from actual purchase amounts. This is common with merchants such as hotels, gas stations or car rental companies who charge a pre-authorized amount. The final purchase amount will display when the transaction is posted to your account, usually within 3-5 business days.

Download Account Details Request a Statement Copy

March 18, 2019

Overall Account

Transaction Date - Posting Date

Description

Amount

06/03/2019

07/03/2019

CANADIAN MÜSEUM ASSOCI



BMO CashBack Mastercard

Statement Date

Mar. 18, 2019

Customer Name

CHRISTOPHER SELMAN

Mar. 7

CANADIAN MUSEUM ASSOCI 888-8222907 ON

904.00