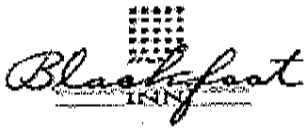


Trip #	Trip Begin Date	Destination	Purpose	Governor/Staff	Data	Total			
10	6/23/2005	Calgary	Fort McMurray Oil Sands Plant; Rosevear Plant	Governor	Flight Cost				
					Lodging Cost	61.40			
					Other (Meals, Reg Fees, Misc.)	58.00			
								Total	139.40
			Northern Lights/Trans Canada	Governor	Flight Cost				
					Lodging Cost	162.80			
					Other (Meals, Reg Fees, Misc.)	80.40			
					Total	243.20			
			Flight Crew	Flight Crew	Flight Cost				
Lodging Cost	695.34								
Other (meals, Reg Fees, Misc.)	506.17								
Total	1,201.51								



5940 Blackfoot Trail SE, Calgary  
AB, T2H 2B5

10482

Tel. 403-252-2253 Fax 403-252-3574

Sunday, June 26, 2005

**Schweitzer, Nancy**  
1490 Km Ranch Road  
Whitefish, MT, 59937  
Group: Bowness/Thompson Wedding

Arrival Date **June 23, 2005**  
Departure Date **June 26, 2005**

Room No. **505**  
Adults **1**

Folio Items	Item Description	Price	Qty	Ext. Price
<b>Thursday, June 23, 2005</b>				
	Room Charge			99.00
	POS Charges (TOS): (Folio#: 65839)		81.40	60.66
<b>Friday, June 24, 2005</b>				
	Room Charge			99.00
	POS Charges (LOBBY LOUNGE): (Folio#: 66292)		81.40	31.57
	POS Charges (GREENS): (Folio#: 66400)			70.85
<b>Saturday, June 25, 2005</b>				
	Room Charge			99.00
	POS Charges (GREENS): (Folio#: 66756)		81.40	8.15
<b>Subtotal</b>				<b>468.23</b>
<b>G.S.T. - 7%</b>				<b>20.79</b>
<b>TOURISM LEVY</b>				<b>11.88</b>

**Payment Details**

Payment	Amount
---------	--------

**Total \$ 500.90**  
**Payments \$ 0.00**  
**Balance \$ 500.90**

411.85 ch  
82.23%

**Blackfoot Inn**  
5940 Blackfoot Trail SE  
Calgary, AB  
T2H 2B5

PRE-AUTH ADVICE  
Account: MASTERCARD

Amount: 500.90

Card #: 0000 1234 5678 9010  
Date/Time: 06/25 10:43:13  
Reference #: 0000 1234 5678 9010016260 M  
Author. #: 017576

01 APPROVED - THANK YOU 027

SIGNATURE:

Cardholder will pay card issuer above amount pursuant to Cardholder Agreement.

JUNE 05

# Credit Card Transactions

Receipt

Don't Have

Post Date	Tran Date	Cardholder Name	Cardholder Secondary Name	Cardholder Account #
6/28/2005	6/24/2005	SCHWEITZER, BRIAN		

Line Amount	Tran Amount	Item Description	Item Cost
26.07	26.07	Purchasing Card Item	26.07

Supplier Name	Supplier City	State	Zip Code
CHECKER CABS LTD.-CAL.	CALGARY	AB	

Account	BU/Org	Fund/Subclass
62426	31010-10	01100-080H1

Cycle Date	Journal	chk
6/30/2005	0001229388	9/29/2006

Comment

*6/28/05*

# Credit Card Transactions

Receipt

Don't Have

Post Date	Tran Date	Cardholder Name	Cardholder Secondary Name	Cardholder Account #
6/28/2005	6/24/2005	SCHWEITZER, BRIAN		

Line Amount	Tran Amount	Item Description	Item Cost
20.47	20.47	Purchasing Card Item	20.47

Supplier Name	Supplier City	State	Zip Code
CHECKER CABS LTD.-CAL.	CALGARY	AB	

Account	BU/Org	Fund/Subclass
62426	31010-10	01100-080H1

Cycle Date	Journal	Chk
6/30/2005	0001229388	9/29/2006

Comment

6/24/05

ASSOCIATED CAR ALTA LTD  
387 - 41 AVE  
(800) 295-1111  
THANK YOU CALL AGAIN

DATE: 2005/08/26  
PICK-UP TIME: 10:45  
DROP-OFF TIME: 11:07  
TRIP TO: 0  
CAR NUMBER: 0145  
CARD TYPE: MC  
CARD: \*\*\*\*\*4582  
EXPIRY: 01/08  
AUTH: AP689242

TAX: 21.58  
TOTAL: 0.00  
TOTAL (\$): 21.58

FIP (\$): \_\_\_\_\_

TAX (\$): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

BE PARTICULAR INSIST  
ON THE PROFESSIONALS

DRIVER'S COPY

*\$ 19.04 chg*

*6/2/05*

STATE OF MONTANA

IMPORTANT

- Carbonless paper (no carbon required). Remove the 3-part set before attempting to record the required information.
- Refer to instructions before preparing.
- Do not submit vouchers more than twice monthly.

TRAVEL EXPENSE VOUCHER

Name/Address

Brian Schweitzer  
2 Carson  
Helena MT 59601

MONTH/YEAR

6/05

DEPARTMENT/  
HEADQUARTERS

Bov

RESPONSIBILITY  
CENTER(S)

10

Purpose

Briefly explain nature of trip(s):

See attached for detail of  
trips

Day	1		2		3	4	5	6	7		8	9
	Departure Time	A (a.m.) P (p.m.)	Arrival Time	A (a.m.) P (p.m.)					Travel Details	Mode of Travel		
1	11:30	A	9:30	P	Home - Whitefish	SA				18-		
2					W.F.							
3			10:00	A	Helena	SA						
4												
5												
6												
7												
8	5:00	A	0.N.		D.C.				*	28-		
9					D.C.				*	28-		
10			12:00	A	D.C. - Helena				*	28-		
11	12:15	P	0.N.		Polson + Colorado	SA+CA			*	12-		
12			0.N.		Colorado				*	28-		
13			0.N.		Colorado				*	28-		
14			7:00	P	CO to Helena	CA				28-		
15												
16	7:45	A	5:00	P	Lidley	SA				6-		
17												
18	10:45	A	4:30	P	Dillon	SA				6-		
19												
20												
21	9:00	A	11:15	A	Bozeman	SA						
22												
23	4:45	P	0.N.		Calgary	SA			*	38.76		
24			0.N.		Calgary				*	14.62		
25			0.N.		Calgary				*			
26			6:00	P	3Coven - Helena	SA				20.62	**	
27												
28												
29	1:15	P	5:30	P	Great Falls	SA						
30												
31												

▼ FOR AGENCY USE ONLY ▼		10	Column Totals	284	284-
FORM 231 NO.		11	Less Travel Advance Received	Food on State Card	286 628.0
FORM 241 NO.		12	Net Reimbursement Due Me		215.10
		13	Net Payment Due State		

Misc. Expenses  
6/2: appts 10-2:00; 6/24: 8-6:00 appts  
\* lodging on state credit card  
\*\* - Calgary B state-L 14.62+6

I hereby certify that this is a valid travel claim to the State in accordance with statutes and administrative procedures.

Employee's Signature: *Brian Schweitzer*

Date: 7/13/05

SUPERVISOR'S APPROVAL: \_\_\_\_\_