## Trustee Professional Development & Travel Expenses

**Trustee - Jan Foster**

**Period - December 1, 2017 - February 28, 2018**

<table>
<thead>
<tr>
<th>Event or Expenditure Item</th>
<th>Board Business</th>
<th>Professional Learning</th>
<th>Dates</th>
<th>Hotel</th>
<th>Flight</th>
<th>Mileage</th>
<th>Other</th>
<th>Per Diem</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Woods Homes Registration - Benefit Gala</td>
<td>X</td>
<td></td>
<td>11-Dec-17</td>
<td></td>
<td></td>
<td></td>
<td>$125.00</td>
<td></td>
<td>$125.00</td>
</tr>
<tr>
<td>McFamily Charity Dinner</td>
<td>X</td>
<td></td>
<td>28-Feb-18</td>
<td></td>
<td></td>
<td></td>
<td>$80.00</td>
<td></td>
<td>$80.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$205.00</td>
<td>$0.00</td>
<td>$205.00</td>
</tr>
</tbody>
</table>
The following information was recorded for your registration:

Early Individual Registration $125.00

- Jen Foster
- Donna Hunt
- Christine Light
- Lola Major
- Christine Lee

Total $625.00

Amount paid: $625.00
Payment Method: Visa Credit card ending in 4902
Date: 11/12/2017
Company Name: Lethbridge School District No. 51

On behalf of our entire organization, thank you again for registering, and we look forward to seeing you at the event on March 24, 2018!

[http://www.woodshomes.ca/site/PageNavigator/LethbridgeChildrensBenefitGalaRegistrationList/006]
5th Anniversary McFamily Charity Gala & Auction

March 15, 2018
Family Centre Charity Gala

Tickets

Table of eight @ $600.00 x _______ = $_______ (seats are by registration through Eventbrite)

Individual seat 2 @ $80.00 x 80.00 = $160.00 (seats are by registration through Eventbrite)

I cannot attend the March 15/18 Gala at the Lethbridge Lodge. Please accept my donation of $_______ instead.

(Charitable tax receipts will be issued for donations over $25.00 if requested. Please note: tax receipts will NOT be issued for corporate sponsorship as the sponsor (as defined by CRA) gains a marketing or advertising advantage.)

Company (or Individual) Name: Lethbridge School District No. 51

Address: 433 15 Street South
Postal Code: T1J 2Z5

Contact person: LeeAnne Tedder
Phone #: 403-380-5301

E-Mail: leeanne.tedder@lethsd.ab.ca

Signature: __________________________

Guest names & emails (for thank you purposes) & food allergies please:

Table Host: Jan Foster
email: jan.foster@lethsd.ab.ca
Allergy: ____________________________

Guest #2: Christine Lee
email: christine.lee@lethsd.ab.ca
Allergy: ____________________________

Guest #3:
email: ____________________________
Allergy: ____________________________

Guest #4:
email: ____________________________
Allergy: ____________________________

Guest #5:
email: ____________________________
Allergy: ____________________________

[Receipt image]

RECEIVED FROM
REQUIRE
DATE Feb 28/18

LeeAnne Tedder (Leth. Dist. 51)
$160.00

One hundred sixty ____________ 00
100 DOLLARS

FOR
Gala tickets

[Credit card details]

APPROVED
AUTH No. 073320 01-02-27

CARDISSUER ABOVE AMOUNT PURSUANTTO CARDHOLDER AGREEMENT.

IMPORTANT - RETAIN THIS COPY FOR YOUR RECORDS.