

expense | monthly tracking report

claimant | Pitman, Joanne
position | Chief Superintendent of Schools
level | Superintendent
reporting period | March 1 to April 30, 2025
date of report | Friday, May 30, 2025



Description	Date (mm/dd/yyyy)	Details and/or Rationale	Amount (CDN\$)	Category	Expense Type
Cell Phone	03/15/2025	Monthly Invoice	\$50.09	other disclosed	telecom/cell phone
CASS Conference Edmonton	03/21/2025	Conference Fees	\$1,123.50	travel	PD course or registration fee
CASS Conference Edmonton	03/21/2025	Mileage	\$204.00	travel	PD mileage
CASS Conference Edmonton	03/21/2025	Accommodation	\$585.33	travel	PD accommodation
ASBA Engagement Edmonton	03/27/2025	Mileage	\$204.00	travel	BUS mileage
ASBA Engagement Edmonton	03/27/2025	Accommodation	\$184.13	travel	BUS accommodation
ASBA Engagement Edmonton	03/27/2025	Parking	\$60.00	travel	BUS general
Cell Phone	04/15/2025	Monthly Invoice	\$50.09	other disclosed	telecom/cell phone

Service ID:

Subscriber:JOANNE PITMAN

Account Detail

Assignment Joanne Pitman
Account No.

Contract Detail \$ 44.20

Contract Name 5GB Pooled Voice & D

Options Charges \$ 3.50

Calgary BoE Cimpl Bundle @ \$3.50 \$ 3.50

Voice Charges \$ 0.00

Charges for Additional Minutes \$ 0.00
Peak Minutes
Off Peak Minutes
Total Airtime Minutes

Data Charges \$ 0.00

Data Volume (MB) \$ 0.00
Browser Charge \$ 0.00

Text Messages \$ 0.00

Text Messages \$ 0.00

Long Distance Charges \$ 0.00

Long Distance Charges \$ 0.00

Roaming Charges \$ 0.00

Voice Charges \$ 0.00
Data Charges \$ 0.00

Other Fees \$ 0.00

411 Service \$ 0.00
Monthly Access Fees \$ 0.00
Discount \$ 0.00

Other Charges and Credits \$ 0.00

Other Charges and Credits \$ 0.00

Taxes \$ 2.39
Total \$ 50.09

From:

Sent:

To:

Subject:

ATTENTION: This message came from outside of the CBE and could be Spam or Phishing.

Do not click links or open attachments unless you recognize the sender and you are certain that the content is safe. [\[Learn More\]](#)

Forward suspicious messages to phishing@cbe.ab.ca.

Below is a registration summary from

Order Summary

Order #:	
Transaction ID:	
Credit Card:	
Card #:	
Authorization Code:	
Subtotal:	\$110.00
GST:	\$5.50
Amount Paid:	\$115.50
Order Timestamp:	

Event Details

Title:	2025 Annual Learning Conference (Conference Registration)
Date(s):	• March 20, 2025
Location:	Fantasyland Hotel, Edmonton

Registrant Information

Order Information

Description: 2025 Annual Conference

Invoice Number

Billing Information	Shipping Information
Total: \$1008.00 (CAD)	

Payment Information

Date/Time: 31-Jan-2025 8:10:42 PST
Transaction ID:
Payment Method:
Transaction Type:
Auth Code:

Merchant Contact Information

College of Alberta School Superintendents Society



Kilometre Travel Log

Directions: Complete this form to track kilometres travelled. To receive payment, please enter the total weekly kilometres into your timesheet in PeopleSoft, and then submit a hardcopy of the Kilometre Travel Log form to your Manager or Principal. You may wish to retain a copy for your own records **Subs and Casuals:** Refer to [Substitute Teacher/Casual Employee Travel Log](#)

To be completed by Employee

Employee ID:*		First Name:*	Joanne	Last Name:*	Pitman
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To be completed by Employee

Record the date, purpose, beginning and ending locations, and distance of each trip on a separate row.

[illegible]

To be completed by Employee and Approver

The approver must create a PDF copy of the completed Travel Log and send to: cbeincoming@wcdconnect.com

Employee Signature:*			Time Approver Name:*	Patricia Bolger
Employee Phone:*	(Time Approver Signature:*	
Date DD-MM-YY: *	25-Mar-2025	Time Approver Phone:*		Date DD-MM-YY:* 26-Mar-2025

Personal information is collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act (FOIP). This information will be used for the management of personnel and for the delivery of Human Resources programs at the Calgary Board of Education. It will be treated in accordance with the privacy protection provisions of FOIP. If you have any questions about this collection of personal information, please contact a HR Employee Contact Centre Representative at 403-817-7333 to direct your question.

FANTASYLAND HOTEL

17700 87 AVE
EDMONTON AB T5T 4V4

Pitman , Joanne

Confirmation Number:

Room Number:

Room Type:

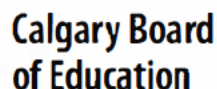
No. of Guests: 1

ARRIVAL	DEPARTURE	RATE PLAN
03/18/2025	03/21/2025	GROUP

DATE	CODE	DESCRIPTION	AMOUNT (CAD)
03/18/2025	RM	Room Charge	179.00
03/18/2025	RT	Alberta Tourism Levy	7.16
03/18/2025	GST	GST	8.95
03/19/2025	RM	Room Charge	179.00
03/19/2025	RT	Alberta Tourism Levy	7.16
03/19/2025	GST	GST 8458	8.95
03/20/2025	RM	Room Charge	179.00
03/20/2025	RT	Alberta Tourism Levy	7.16
03/20/2025	GST	GST	8.95
03/21/2025	MC		(585.33)

TOTAL DUE: 0

TERMS: If a credit card was provided upon check-in, a hold was placed on the card for the full amount to be owed to the hotel, plus estimated incidentals. This hold may display as pending for telephone or online banking portals and may not be released for 72 hours or longer after departure at the discretion of your card issuer.



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To be completed by Employee

Employee ID:*	First Name:*	Joanne	Last Name:*	Pitman
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[illegible]

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Employee Signature:*			Time Approver Name:*	Patricia Bolger	
Employee Phone:*			Time Approver Signature:*		
Date DD-MM-YY: *	28-Mar-2025	Time Approver Phone:*		Date DD-MM-YY:*	28-Mar-2025

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Mrs Joanne Pitman

INVOICE

Room No. : 0
Arrival : 03-26-25
Departure : 03-27-25
Page No. :
Folio No. :
Conf. No. :
Cashier No. :
Custom Ref. :

Company Name : Alberta School Boards Association
Group Name : ASBA - Board Chairs Meeting
Guest Name :

Date	Description	Charges	Credits
03-26-25	Room Revenue	164.00	
03-26-25	Destination Marketing Fee	4.92	
03-26-25	Room GST	8.45	
03-26-25	Tourism Levy	6.76	
03-27-25			184.13
Total Charges		184.13	
Total Credits			184.13
Balance			0.00

Merchant ID	Credit Card #
Transaction ID	Credit Card Expiry
Approval Code	Capture Method
Approval Amount	Transaction Amount

184.13

I agree that I am personally liable for payment of this account, and if this person, company or association indicated does not settle within a reasonable period, my liability for payment should be joint and several with such person, company or association.

Matrix Hotel | 10640 100 Ave NW | Edmonton, AB T5J 3N8
Reservations: (866) 465-8150 | Telephone: (780) 429-2861 | Fax: (780) 420-4962
Email: info@matrixedmonton.com
www.matrixedmonton.com

RECEIPT
Impark

License Plate Number

Expiration Date/Time

06:00 PM
MAR 27, 2025

Purchase Date/Time: 05:51pm Mar 26, 2025

Total Parking: \$57.14

Total GST: \$2.86

Total Due: \$60.00

Rate: \$60.00- evn j + day

Total Paid: \$60.00

Pmt Type: CC (Swipe)

Auth #:

gst #887315638RT0006
NO IN AND OUT PRIVILEGES

ENT PARKING RECEIPT REÇU DE STATIONNEMENT PARKING RECEIPT REÇU DE STATIONNEMENT

Service ID:

Subscriber:JOANNE PITMAN

Account Detail

Assignment Joanne Pitman
Account No.

Contract Detail \$ 44.20

Contract Name

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