

Sheraton Centre Toronto Hotel  
 123 Queen Street West  
 Toronto, ON M5H 2M9  
 Canada  
 Tel: (416) 361-1000 Fax: 416-947-4854



**Sheraton**

Ms Susan Fielding

Page Number : 1 Invoice Nbr : 524968  
 Guest Number : 6379403  
 Folio ID : A  
 Arrive Date : 29-JAN-17 07:28  
 Depart Date : 31-JAN-17  
 No. Of Guest : 2  
 Room Number : 3018  
 Club Account :

Information Invoice

Tax ID : 844048108  
 Sheraton Centre JAN-31-2017 06:40 9999

Date	Reference	Description	Charges (CAD)	Credits (CAD)
29-JAN-17	DEPOSIT	Deposit-VI-8601		-242.44
29-JAN-17	5901	BNB Restaurant	26.00 ✓	
29-JAN-17	RT3018	Room Chrg Grp Association	209.00 ✓	
29-JAN-17	RT3018	Rooms HST	27.17 ✓	
29-JAN-17	RT3018	Destination Marketing Program	5.56 ✓	
29-JAN-17	RT3018	HST Dest Marketing Prgm	0.71 ✓	
30-JAN-17	RT3018	Room Chrg Grp Association	209.00	
30-JAN-17	RT3018	Rooms HST	27.17	
30-JAN-17	RT3018	Destination Marketing Program	5.56	
30-JAN-17	RT3018	HST Dest Marketing Prgm	0.71	
JAN-31-2017	VI	Visa		-268.44 ✓
** Total			510.88	-510.88
*** Balance			0.00	

For your convenience, we have prepared this zero-balance folio indicating a \$0 balance on your account. Please be advised that any charges not reflected on this folio will be charged to the credit card on file with the hotel. While this folio reflects a \$0 balance, your credit card may not be charged until after your departure. You are ultimately responsible for paying all of your folio charges in full. Please note that your guest room will be checked out at 12 noon.

FINANCE DEPARTMENT	
Prices, Extensions & Totals Checked:	
Cheque No.	20338
CL Account No.	180-4313
Approved By:	

Continued on the next page

From (dd/mm/yy)	To (dd/mm/yy)
1/1/2017	1/31/2017

Name of Claimant: Surname, First Name
Susan Fielding

I warrant that I have a valid driver's licence and vehicle insurance coverage.

X  
Claimant's Signature

2/10/2017  
Date (DD/MM/YY)

Approval

16/02/17  
Date (DD/MM/YY)

Business Travel Detail						
Item No.	Date (dd/mm/yy)	Destination/Explanation	Daily Travel (km)	From (Location)	To (Location)	Includes return km (Yes/No)
1	1/29/2017	ROMA	79	Home	Sheraton Toronto Centre	N
2	1/31/2017	" "	79	Sheraton Toronto Centre	Home	N
3						
4						
5						
6						
7						

Total Kilometers 158  
Rate/km \$ 0.50  
Total Mileage \$ 79.00

Business Expense Detail (Attach all original and itemized invoices/receipts)				
Item No.	Date (dd/mm/yy)	Item Description	Total Expenses (including taxes)	General Ledger Account Code
1				
2				
3				
4				
5				
6				
7				

FINANCE DEPARTMENT	
Prices, Extensions & Totals Checked:	
Cheque No.	20919
GL Account No.	180-4308
Approved By:	

Totals \$ -  
Total \$ Amount Due \$ 79.00