

AP VOUCHER														
Fiscal Year	Accting Period	Jrnl Date	Number or GL Journal ID	Invoice #	Vendor ID	Vendor Name	Account	Department	Project	Product	Monetary Amount	Journal Line Description	Fund	Department Description
2008	9	2008-12-29	00119610	Chatham file review	0000003143	Algie, R Clive	65400	864000			6,428.10	Expense Distribution	864000	Internal Audit & Program Eval.
											6,428.10			

*Dec 30/08*

In account with

**R. Clive Algie, B.A., LL.B.**  
Barrister & Solicitor

RECEIVED  
OCT 23 2008  
LEGAL AID ONTARIO

YORK LEGAL BUILDING  
17070 YONGE STREET  
SUITE 101  
NEWMARKET, ONTARIO  
L3Y 4V8

Telephone: (905) 836-5922

Facsimile: (905) 836-1176

**STATEMENT OF ACCOUNT**

Thursday, October 23, 2008

Legal Aid Ontario  
40 Dundas Street West  
Toronto, Ontario  
L4A 8B5

Item Number	Cost Centre	Project
1	657400	8161400
2		
3		

Match 1

Authorized Signature or Initials

Signature of Authorized Official

*M. Clive Algie*

Title

Re: Chatham File Review

**THIS IS MY ACCOUNT** for services rendered and disbursements made on your behalf with respect to the above captioned matter, and in particular:

- October 13, 2008

To attendance at the Chatham Area Office at 146 Queen Street, Chatham And to a review of files (12:00 noon to 4:20 p.m.) 4.30 hrs.

To a review of notes made at the Area Office And to transcribing same onto computer. (6:30 p.m. - 8:30 p.m.) 2.00 hr.

Travel: 8:00 a.m. - 12:00 noon (4.0 hr)
- October 14, 2008

To attendance at the Chatham Area Office At 146 Queen Street Chatham, And to a review of files (8:30 a.m. - 4:30 p.m.) 8.00 hr.

To a review of notes made at the Area Office And to transcribing same onto computer (6:30 p.m. - 8:30 p.m.) 2.00 hr.

119610

October 15, 2008	To attendance at the Chatham Area Office At 146 Queen Street Chatham, And to a review of files (8:30 a.m. - 4:30 p.m.)	8.00 hr.
	To a review of notes made at the Area Office And to transcribing same onto computer (6:30 p.m. - 8:30 p.m.)	2.00 hr.
October 16, 2008	To attendance at the Chatham Area Office At 146 Queen Street Chatham, And to a review of files (8:30 a.m. - 3:00 p.m.)	6.50 hr.
	Travel: 3:00 p.m. - 7:00 p.m. (4 hrs.)	
October 20, 2008	To continued transcribing of notes to Summarize file, and to drafting Report; (2:00 p.m. - 5:00 p.m.)	3.00 hr.
October 23, 2008	To completion of report and to a letter To Legal Aid Ontario (10:00 a.m. - 1:30 p.m., 2:00 p.m. - 4:00 p.m.)	5.50 hr.

Total Time: 41.30 hr.  
Total Travel: 8.00 hr

Total Fee:	41.3 x \$125	\$5,162.50
	8.00 x \$53.75	<u>\$430.00</u>
		\$5,592.50
	G.S.T.	<u>\$279.62</u>

**Disbursements**

Hotel Accommodations	\$308.70
Travel: 750k @ .40/k	\$300.00
Meals:	
Oct. 14	\$25.92
Oct. 15	\$23.71
Oct. 16	<u>\$20.50</u>
Total:	\$70.13
G.S.T.	\$678.83
	\$33.94

**PAID**  
DEC 30 2008

Total: \$6,584.89

Total G.S.T. on this account: \$313.56  
G.S.T. (Business) Registration No. 11653 5188 RT0001



**GUEST FOLIO**  
 Box 637, 615 Richmond Street  
 Chatham, Ontario  
 CANADA N7M 5K8  
 519.351.1100 | on the web  
 1.800.265.5257 | wheelsinn.com  
 fax 519.436.5560 | wildzone.com

ALGIE, CLIVE  
 LEGAL AID  
 17070 YONGE ST  
 NEWMARKET, ON L3Y4V8

Room Number: 278  
 Daily Rate: 98.00  
 Room Type: NCD  
 No. of Guests: 1 / 0

ARRIVAL	DEPARTURE			
10/14/08	10/17/08		GOVT	GOVT 11110505031
DATE	ROOM NO.			
10/14/08	278	ROOM CHARGE	#278 ALGIE, CLIVE	\$98.00
10/14/08	278	GST ROOM TAX # 100616697	GST ROOM TAX # 100616697	\$4.90
10/14/08	278	P S T ROOM TAX 5%	P S T ROOM TAX 5%	\$4.90
10/15/08	278	ROOM CHARGE	#278 ALGIE, CLIVE	\$98.00
10/15/08	278	GST ROOM TAX # 100616697	GST ROOM TAX # 100616697	\$4.90
10/15/08	278	P S T ROOM TAX 5%	P S T ROOM TAX 5%	\$4.90
10/16/08	278	ROOM CHARGE	#278 ALGIE, CLIVE	\$98.00
10/16/08	278	GST ROOM TAX # 100616697	GST ROOM TAX # 100616697	\$4.90
10/16/08	278	P S T ROOM TAX 5%	P S T ROOM TAX 5%	\$4.90

**PAID**  
 DEC 30 2008

TOTAL DUE:                      \$323.40

TERMS: DUE AND PAYABLE UPON PRESENTATION. I AGREE THAT MY LIABILITY FOR THIS BILL IS NOT WAIVED AND AGREE TO BE HELD PERSONALLY LIABLE IN THE EVENT THAT THE INDICATED PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF THESE CHARGES.

GUEST SIGNATURE \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

CITY / PROV./STATE/POSTAL/ZIP CODE \_\_\_\_\_

come  
again  
Val!

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WHEELS INN  
AXLE AMMIES  
OCT 30 HALLOWEEN & MURDER MYSTERY DINNER  
SEE HOST/HOSTESS FOR TICKETS  
GST# R100616697  
SRV 60 TABLE 250/1 TIME 18:00  
TANYA

1 LARGE POP 2.00  
1 ALL YOU CAN EAT 19.95  
FOOD TAX 1.76  
GOODS & SERVICES TAX 1.10  
-----  
NET SALES 21.95 GRAND TOTAL 24.81

ROOM.....GRATUITY.....

NAME.....TOTAL.....

SIGNATURE.....

10/15/08 GUEST 1 NUMBER 1690486

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WHEELS INN  
AXLE AMMIES  
OCT 30 HALLOWEEN & MURDER MYSTERY DINNER  
SEE HOST/HOSTESS FOR TICKETS  
GST# R100616697  
SRV 131 TABLE 250/1 TIME 17:41  
VAL

1 NEW YORK STRIP 22.00  
SAUTEED ONIONS  
1 LARGE POP 2.00  
FOOD TAX 1.92  
GOODS & SERVICES TAX 1.20  
-----

NET SALES 24.00 GRAND TOTAL 27.12

ROOM.....GRATUITY.....

NAME.....TOTAL.....

SIGNATURE.....

10/14/08 GUEST 1 NUMBER 1690392

MERCI  
THANK YOU

GST/TPS #:

Date	Table	Personnes Guests	Serveur(euse) Server	
				562311

Shrimp 6.50

Peppino Ligetoni 10.25

Coffee 2.00

REPAS

PAID

DEC 3 11 2008