

Proactive Disclosure of Expenses

Jonathan Gebert, Vice President, Finance & Services For the period April 1, 2013 to May 31, 2013

Overview

Non-Travel Expenses					
Item#	Date	Description	Amount		
1.	March 25, 2013	Annual CA Professional Fees	\$ 1233.75		
<u> </u>					



Proactive Disclosure of Expenses

Jonathan Gebert, Vice President, Finance & Services For the period April 1, 2013 to May 31, 2013

Detail for Non-Travel Expenses

For	Jonathan Gebert, Vice President, Finance & Services				
Details	Annual Professional CA Fees				
Date	March 25, 2013				
Location	Calgary, Alberta				
Type of Expense	Meals	Parking	Other	Total	
Amount	\$	\$	\$1233.75	\$1233.75	
Notes	CA profession Services Posi	•	equirement of the Vio	ce President, Fin	



Institute of Chartered Accountants of Alberta

580 Manulife Place 10180 - 101 Street Edmonton, AB T5J 4RZ

Ph. (780) **424-7391 (E**dmonton); Toll Free **1-**800-232-9406 Fax (780) **425-**8766 Web site www.albertaCAs.ca

2013 / 2014 Member Fees



Member #: 5.17(1) GST Reg #: K107508533

Invoice #: 1001276474

				INVOICE	
			CICA (Paid to Albe ICAA (Resident)	rta)	\$440.00 \$735.00
	Jonathan GEBERT, CA		TOTAL MEMBERS	HIP FEES:	\$1,175.00
	6.17(1)		Made from a relative for	,	
	9.17(1)				
****	DUE DATE: APRIL 1 - 61 Days to pay with		GST and/or HST**		\$58.75
	Amount payable June 1 - June 30	\$1,295.44			400.70
	Amount payable July 1 - July 31	\$1,357.13			
	Amount payable Aug. 1 - Aug. 31	\$1,418.82	TOTAL AMOUNT	DUE	\$1,233.75
	FINAL PAYMENT DEADLINE: AUG Automatic suspension and publication if not pa				
11	NCOME TAX RECEIPT REQUIRED: ☐ No	☐ Yes	**GST: \$ 58.75	HST on CICA Fees:	\$ 0.00
A. I	MEMBER DECLARATION - TO BE COMPLETE	D, SIGNED AND F	RETURNED WITH A	PPROPRIATE PAYM	MENT BY MAY 31
X	My billing status is unchanged from that indicated a	bove. My fees are e	nclosed (if applicable).		
	My billing status is changed from that indicated above	ve (proceed to sectio	ns B & C below - refer	to information in enclos	ure).
B. (CHANGED CICA OR ICAA FEES - COMPLETE	BELOW			
CIC	A fees change:			Free comments to the plant of the second of	
	CICA fees are deducted; they are now paid to the			provincial Institute.	
	CICA fees are added, I wish to pay this fee through t	the Alberta Institute.			
ICA	A fees change:				
<u> </u>	Non-resident fees are included (and resident fees de Institute or a recognized foreign accounting organize		onger reside in Alberta ;	and I am a member of a	another provincial
	Resident fees are included (and non-resident fees d	educted) since I now	reside in Alberta or I a	m no longer eligible for	non-resident fees.
C.	FEES REDUCTION (INITIAL APPLICATION OR	CHANGE) - CHE	CK ONLY ONE BOX	BELOW	
Acti (or S	ve earnings criteria: Member is not gainfully employe 30,000 plus annual tuition if enrolled in full-time univer	ed such that earning sity education).	s from all types of empl	oyment or business do	not exceed \$30,000
	I declare that I meet the active earnings criteria (aboremitted accordingly.	ove). I have reduced	my ICAA & CICA fee a	mounts by 50%, adjust	ed GST/HST and
	I declare that I meet the active earnings criteria (about organization equals 90 or more. I have reduced my	ove) AND my age plu ICAA & CICA fee ar	us years of CA member mounts by 75%, adjuste	ship in a recognized a ed GST/HST and remitte	ccounting ed accordingly.
	I declare that I meet the active earnings criteria (abo	ove) AND my age is	70 or more years. I have	ve reduced my ICAA &	CICA fee amounts by
	I declare that I meet the active earnings criteria (abo	*			
	I no longer meet the active earnings criteria for a re I have removed the reduction granted me and enclo	duction in fees, my nose the full ICAA& C	nembership registration ICA fee amounts along	should return to my for with the appropriate G	rmer fee paying rate. ST/HST.

malher Sebert Member signature

MEMBERSHIP DETAILS

Member #: 19591

1. CURRENT CONTACT DETAILS

The details displayed in the "Current Contact Information" below were extracted from the Institute's current database records. Please clearly print any changes to your contact information in the "Updated Contact Information" below.

CURRENT CONT	FACT INFORMATION	UPDATED CONT	ACT INFORMATION		
HOME:		HOME DETAILS TO BE UPDATED:			
Home Address:	5.17(1)	Home Address:			
Home City, Prov.	Calgary, AB	Home City, Prov.			
Home Postal Cd: 4	5.17(1)	Home Postal Cd:			
Home Phone:	5.17(1)	Home Phone:			
Home E-Mail:	•	Home E-Mall:			
Home Fax:		Home Fax:	a service who have all the control of the control o		
Home Cell:	The second secon	Home Cell:	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
BUSINESS:		BUSINESS DETAILS TO BE UPDATED:			
Employer Name:	University of Calgary	Employer Name:			
Business Address:	A100 2500 University Drive NW	Business Address:			
Bus. City, Prov.:	Calgary, AB	Bus. City, Prov.:			
Bus. Postal Cd:	T2N 1N4	Bus. Postal Cd:			
General Phone:		General Phone:			
General Fax:		General Fax:			
General E-Mail:	517(1) * VPfs Quealgay.ca	General E-Mail:	Vpfs@ucalgay.ca		
Direct Phone:	403-220-8435 403-220-3645	Direct Phone:	403-220-3645		
Direct Fax:	403-289-6800	Direct Fax:			
Direct E-Mail:	jgebert@ucalgary.ca	Direct E-Mail:			
Position/Title:	Vice President (Finance and Services)	Position/Title:			
Seniority Level:	Senior Management	Seniority Level			
Sector/Subsector:	Sector: Subsector:	Sector/Subsector:	Sector: Subsector:		

2. MAIL PREFERENCES

Please check your current mail preferences. If you wish to alter your preference, please check (\checkmark) the appropriate box in the right-hand column. For more details on the types of mailings listed below, please see the schedule attached.

MAIL PREFERENCES -	(see attachment for detaile	d description of	mail preference	3\$)		
CURRENT MAIL PREFE	RENCES:	MAIL PRE	FERENCES T	O BE UPDATE	D:	
Mail Type:	Current Preferences:	<u>Distribution Method:</u> (Select one only)		Preferred: (Select one only)		Suppress:
Catalog	Post - Home	☐ Post	☐ E-Mail	☐ Home	☐ Bus.	□s
Courier/Freight Delivery	Post - Home	☐ Post		☐ Home	Bus.	n/a
CPD Confirmation	E-Mail - Bus.		☐ E-Mail	☐ Home	☐ Bus.	n/a
General Correspondence	E-Mail - Bus.		☐ E-Mail	☐ Home	☐ Bus.	n/a
Monthly Mailing Package	E-Mail - Bus.		☐ E-Mail	☐ Home	Bus.	□s
Publication	Post - Home	☐ Post		☐ Home	☐ Bus.	□s
Regulatory Information	Post - Home	☐ Post		☐ Home	☐ Bus.	n/a
Invoice	Post - Home	☐ Post		☐ Home	☐ Bus.	n/a
Urgent Member Notices	E-Mail - Bus.		☐ E-Mail	☐ Home	☐ Bus.	□s

Location: Hame > Complete Payment

Thank You, Transaction Successful

Your transaction has been successfully processed.

Please find your receipt below. We recommend you print a copy for your records.

Institute of Chartered Accountants of Alberta

580 Manulife Place 10180 - 101 Street Edmonton Alberta, T5J 4R2 Canada

Invoice Address:

Jonathan GEBERT CA

9.17(1)

CANADA

G.S.T. REG #:

107508533

Member #:

Order ID #:

201347598

Date:

3/25/2013 3:42 PM

Card Number:

5.17(1)

Card Holders

Name:

Jonathan Gebert

Authorization

Number:

062305

Payment Received:

Description

2013/2014 Member Fees

Amount

\$1,233.75

Total Received:

\$1,233.75

(Canadian funds)