

**Michelle Seguin (VP, Corporate Services) - 2010/11 4th Quarter Expense Report**  
 January 1, 2011 to March 31, 2011

| Date      | Purpose   | Cost            |
|-----------|---|-----------------|
| 18-Jan-11 | <b>Purchase of planning materials from Sherwood &amp; Associates Ltd.</b> |                 |
|           | Accommodation   | \$0.00          |
|           | Hospitality   | \$0.00          |
|           | Meals   | \$0.00          |
|           | Transportation  | \$0.00          |
|           | Other   | \$118.09        |
|           | <b>Total</b>  | <b>\$118.09</b> |

| <b>Summary of Expenses</b>           |                 |
|--------------------------------------|-----------------|
| Accommodation                        | \$0.00          |
| Hospitality                          | \$0.00          |
| Meals                                | \$0.00          |
| Transportation                       | \$0.00          |
| Other                                | \$118.09        |
| <b>Total Expenses (Q4 - 2010/11)</b> | <b>\$118.09</b> |

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Michelle Seguin (VP, Corporate Services) - Addendum to 2010/11 4th Quarter Expense Report**

This addendum contains expenses incurred in the 2nd & 3rd quarter of FY10 that have been submitted in the 4th quarter

| Date      | Purpose  | Cost           |
|-----------|--|----------------|
| 13-Sep-10 | <b>Trip to CRO to attend ACLCO quarterly meeting</b> |                |
|           | Accommodation  | \$0.00         |
|           | Hospitality  | \$0.00         |
|           | Meals  | \$0.00         |
|           | Transportation                                       | \$24.00        |
|           | Other  | \$0.00         |
|           | <b>Total</b>   | <b>\$24.00</b> |

|           |  |                |
|-----------|--|----------------|
| 18-Oct-10 | <b>Lunch in Toronto for CIM Executive Steering Committee</b> |                |
|           | Accommodation  | \$0.00         |
|           | Hospitality  | \$21.93        |
|           | Meals  | \$0.00         |
|           | Transportation   | \$0.00         |
|           | Other  | \$0.00         |
|           | <b>Total</b>   | <b>\$21.93</b> |

| Summary of Expenses                  |                |
|--------------------------------------|----------------|
| Accommodation                        | \$0.00         |
| Hospitality                          | \$21.93        |
| Meals                                | \$0.00         |
| Transportation                       | \$24.00        |
| Other                                | \$0.00         |
| <b>Total Expenses (Q4 - 2010/11)</b> | <b>\$45.93</b> |

MONTHLY EXPENSE CLAIM

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| NAME: Michelle Seguin, Vice-President and CAO |  |              |             |         |         |                   |       |             |       |           |       |                |          |        |      |
|---|--|--------------|-------------|---------|---------|-------------------|-------|-------------|-------|-----------|-------|----------------|----------|--------|------|
| DATE  | DETAILED DESCRIPTION OF EXPENSE<br>(Include Purpose, Place, # of people, Names & Titles) | EXPENSE CODE | COST CENTRE | PROJECT | PROGRAM | DUTY COUNSEL CODE | HOTEL | HOSPITALITY | MEALS | TRANSPORT | OTHER | KMS            |          | AMOUNT |      |
|   |  |              |             |         |         |                   |       |             |       |           |       | S \$0.40       | N \$0.41 |        |      |
| 18-Jan-11                                     | A. Sherwood and Associates Limited - Communications Planners                             | 64200        | 830010      |         |         |                   |       |             |       |           |       | 118.09         |          | 118.09 |      |
|   |  |              |             |         |         |                   |       |             |       |           |       |                |          | 0.00   |      |
|   |  |              |             |         |         |                   |       |             |       |           |       |                |          | 0.00   |      |
|   |  |              |             |         |         |                   |       |             |       |           |       |                |          | 0.00   |      |
|   |  |              |             |         |         |                   |       |             |       |           |       |                |          | 0.00   |      |
|   |  |              |             |         |         |                   |       |             |       |           |       |                |          | 0.00   |      |
|   |  |              |             |         |         |                   |       |             |       |           |       |                |          | 0.00   |      |
|   |  |              |             |         |         |                   |       |             |       |           |       | TOTAL KMS      | 0        | 0      | 0.00 |
|   |  |              |             |         |         |                   |       |             |       |           |       | SUBTOTAL       |          | 164.02 |      |
|   |  |              |             |         |         |                   |       |             |       |           |       | (LESS ADVANCE) |          | 0.00   |      |
|   |  |              |             |         |         |                   |       |             |       |           |       | TOTAL          |          | 164.02 |      |

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\*\* By signing this expense claim it is understood that the supervisor and/or manager who approves this claim have read and understands Legal Aid Ontario's Travel, Meal and Hospitality Expenses Policy. The supervisor and/or manager acknowledges that by signing this expense claim it is in compliance with the policy.  
NOTE: PLEASE ATTACH ALL ORIGINAL RECEIPTS WITH YOUR CLAIM BY THE 15th OF MONTH FOLLOWING THE MONTH THE EXPENSES WERE INCURRED.

FOR PROVINCIAL OFFICE USE

DATE: \_\_\_\_\_

SIGNATURE: President/CEO

TITLE: \_\_\_\_\_

CERTIFIED COPY

DATE: Feb 4/11

SUPERVISOR'S SIGNATURE: Ke Feb 7/2011

# 166937

**A SHERWOOD & ASSOCIATES LTD**  
**2861 SHERWOOD HGTS DR #41**  
**OAKVILLE ON L6J 7K1**  
**905-829-1111 1800-661-7197**

# INVOICE

| Date       | Invoice # |
|------------|-----------|
| 18/01/2011 | 9890      |

PLS DO NOT REDIRECT PARCEL (RTS) TKS

| Bill To:   |
|--|
| MICHELLE SEGUIN<br>LEGAL AID ONTARIO<br>40 DUNDAS ST<br>TORONTO, ON M5G2H1 |

| Ship To:   |
|--|
| MICHELLE SEGUIN<br>LEGAL AID ONTARIO<br>40 DUNDAS ST<br>TORONTO, ON M5G2H1 |

| Customer P.O.# | Salesperson | Department | Ship Method | Terms          |
|----------------|-------------|------------|-------------|----------------|
|                |             |            |             | Due On Receipt |

| Item Code | Product Name        | Description/Mfg.    | Qty | Price | Ext. Price |
|-----------|---------------------|---------------------|-----|-------|------------|
| PJ0111    | JR. COMM. PLANNER   |                     | 10  | 9.50  | 95.00      |
| Z         | SHIPPING & HANDLING | SHIPPING & HANDLING | 1   | 9.50  | 9.50       |



|              |                 |        |
|--------------|-----------------|--------|
| <b>NOTES</b> | <b>Subtotal</b> | 104.50 |
|              | <b>HST 13%</b>  | 13.59  |
|              |                 | 0.00   |
|              | <b>Total</b>    | 118.09 |

### Transaction Successful

|  |   |
|--|---|
| <b>Transaction Receipt</b>                 |   |
| <b>Merchant:</b>                           | <b>PRIORITY MANAGEMENT PROGRESSIVE - (OAKVILLE, ON)</b> |
| <b>Date/Time:</b>                          | <b>01/18/2011 11:28:49 AM EST</b>                       |
| <b>Transaction ID:</b>                     | <b>1342455406</b>                                       |
| <b>Transaction Type:</b>                   | <b>Card Sale</b>  |
| <b>Amount:</b>                             | <b>118.09</b>   |
| <b>Credit Card Information</b>             |   |
| <b>CC Type:</b>                            | Visa  |
| <b>CC Number:</b>                          | *****5351   |
| <b>Auth. Code:</b>                         | 054847  |
| <b>Processor:</b>                          | PRIORITY MANAGEMENT PROGR                               |
| <b>Billing Information</b>                 | <b>Shipping Information</b>                             |
| MICHELLE SEGUIN<br>LEGAL AID ONTARIO<br>CA |   |
| <b>Order Information</b>                   |   |
| <b>Order ID:</b>                           | 9890  |

MONTHLY EXPENSE CLAIM

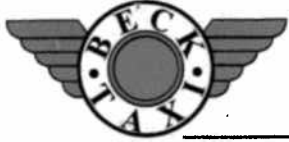
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| NAME   | Michelle Seguin, Vice-President and CAO  |  |              |             |         |                         |                   |   |             |       |           |                |                             |        |        |
|--|--|--|--------------|-------------|---------|-------------------------|-------------------|---|-------------|-------|-----------|----------------|-----------------------------|--------|--------|
|  | DATE   | DETAILED DESCRIPTION OF EXPENSE<br>(Include Purpose, Place, # of people, Names & Titles) | EXPENSE CODE | COST CENTRE | PROJECT | PROGRAM                 | DUTY COUNSEL CODE | HOTEL   | HOSPITALITY | MEALS | TRANSPORT | OTHER          | KMS<br>S N<br>\$0.40 \$0.41 |        | AMOUNT |
| 13-Sep-10  | Taxi from 40 Dundas Street West to LAO Clinic Resource Office, 425 Adelaide Street to attend ACLCO Quarterly Meeting           |  | 61100        | 830010      |         |                         |                   |   |             |       | 12.00     |                |                             |        | 12.00  |
| 13-Sep-10  | Return taxi from 425 Adelaide Street West to 40 Dundas Street West following ACLCO Annual Meeting                              |  | 61100        | 830010      |         |                         |                   |   |             |       | 12.00     |                |                             |        | 12.00  |
| 18-Oct-10  | The Croissant Tree - Lunch for CIM Executive Steering Committee (Michelle Seguin, Sue McCaffrey, Linden Parris, Leslie Howard) |  | 61100        | 830010      |         |                         |                   |   |             | 21.93 |           |                |                             |        | 21.93  |
|  |  |  |              |             |         |                         |                   |   |             |       |           |                |                             |        | 0.00   |
|  |  |  |              |             |         |                         |                   |   |             |       |           |                |                             |        | 0.00   |
|  |  |  |              |             |         |                         |                   |   |             |       |           |                |                             |        | 0.00   |
|  |  |  |              |             |         |                         |                   |   |             |       |           |                |                             |        | 0.00   |
|  |  |  |              |             |         |                         |                   |   |             |       |           |                |                             |        | 0.00   |
|  |  |  |              |             |         |                         |                   |   |             |       |           |                |                             |        | 0.00   |
| <p>** By signing this expense claim it is understood that the supervisor and/or manager who approves this claim have read and understands Legal Aid Ontario's Travel, Meal and Hospitality Expenses Policy. The supervisor and/or manager acknowledges that by signing this expense claim it is in compliance with the policy.</p> <p>NOTE: PLEASE ATTACH ALL ORIGINAL RECEIPTS WITH YOUR CLAIM BY THE 15th OF MONTH FOLLOWING THE MONTH THE EXPENSES WERE INCURRED.</p> |  |  |              |             |         |                         |                   |   |             |       |           | TOTAL KMS      | 0                           | 0      | 0.00   |
|  |  |  |              |             |         |                         |                   |   |             |       |           | SUBTOTAL       |                             | 164.02 |        |
|  |  |  |              |             |         |                         |                   |   |             |       |           | (LESS ADVANCE) |                             | 0.00   |        |
|  |  |  |              |             |         |                         |                   |   |             |       |           | TOTAL          |                             | 164.02 |        |
| FOR PROVINCIAL OFFICE USE  |  |  |              |             |         | CERTIFIED COPY          |                   |   |             |       |           |                |                             |        |        |
| <br>DATE   |  | SIGNATURE<br><i>President/CEO</i><br>TITLE   |              |             |         | DATE<br><i>Feb 4/11</i> |                   | <br>SUPERVISOR'S SIGNATURE**<br><i>Ke Feb 7/2011</i> |             |       |           |                |                             |        |        |

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Atrium On Bay  
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fax (416) 920-9372  
Toronto, Ontario M5G 2C2

Transaction #: 118,020  
Date: Oct 18, 2010 11:27:07 AM  
Seller: Administrator

| Product         | Price  |    | Total  |
|-----------------|--------|----|--------|
| Cheese & Vegeta | \$4.16 | x1 | \$4.16 |
| Haw & Swiss     | \$4.82 | x1 | \$4.82 |
| Combo Salad MD  | \$3.76 | x1 | \$3.76 |
| Lunch Special   | \$6.93 | x1 | \$6.93 |

Total quantity: 4

|              |                |
|--------------|----------------|
| Subtotal     | \$19.67        |
| PST          | \$1.27         |
| GST          | \$0.99         |
| <b>Total</b> | <b>\$21.93</b> |
| Payment      | \$50.00        |
| Change       | \$28.07        |

GST No. #96592011  
THANK YOU FOR YOUR PURCHASE.