



UNIVERSAL HELICOPTERS NEWFOUNDLAND AND LABRADOR LP
 P.O. BOX 529, Station C Happy Valley-Goose Bay, NL A0P 1C0
 Telephone: (709) 896-2444 Fax: (709) 896-0996 Website: www.uhnl.nf.ca
 HST# 84327 9035 RT0001

BILL TO: Department of Finance Corporate Financial Services Division 657 Topsail Road St. John's, NL A1E 2E3 Canada		SHIP TO: Fire & Emergency Services - NL 28 Hallett Crescent St. John's, NL A1B 4C4	INVOICE NUMBER IN000008299
CUSTOMER NUMBER DEPOFF		CUSTOMER P.O. NUMBER 218036688	INVOICE DATE 2/4/2019
AIRCRAFT 206L Helicopter C-GLSH		GOVERNMENT AFA NUMBER 72909	PAGE 1
FLYING AS PER ATTACHED FLIGHT REPORT(S) 8630 & 8631			

CFS RMS 232544 - PO increased as per Tina English -KD

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
0.5	Flying Hours - February 3, 2019	364.91	182.46
5.7	Flying Hours - February 4, 2019	364.91	2,079.99
806.0	Litres of Fuel - Pasadena	1.60	1,289.60
1.0	Expense Claim # 2019-3	14.00	14.00

REMIT TO:
 Bank of Montreal
 215 Hamilton River Road
 P.O. Box 12, Station B
 Happy Valley-Goose Bay, NL A0P 1E0
 Account Number: 1001-058
 Transit Number 26931
 Institution Number: 001
 We also accept Visa & MasterCard - Please call 896-2444

Subtotal before taxes	3,566.05
Total taxes	534.91
Total amount \$	4,100.96

PAYMENT TERMS:
 Due on receipt of invoice.
 Interest at 18% per annum (1 1/2% per month) will be charged on all past due invoices.

Customer Copy



**UNIVERSAL HELICOPTERS
NEWFOUNDLAND LIMITED**

P. O. Box 529, Station C, Happy Valley-Goose Bay, Labrador, NL A0P 1C0
Tel: (709) 896-2444 Fax: (709) 896-0996

8830

Flight Date	Day / Month / Year
	03 / 02 / 2019

Base No.	Aircraft Type	Flight Code	Customer #	Tariff Zone	Aircraft Call Sign		
222	206L2			15	C-66511		
Customer Information: SAIR			Dispatch No.		Pilot Signature <i>Thyl V. Tuzen</i>		
Name:			W-0994				
Address:			A.F.A. No. 72709				
City: Province:			P.O. No. 218536688				
Postal Code:			Dangerous Goods Transported		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Tel. No.:		Freight	Flight Type		Minimums		
Contact Person:		No. Passengers 0	Charter	(Contract)	Yes (No)		
Flight Description			Take Off Time	Landing Time	Revenue Hours	Non-Revenue Hours	
			0837	08107	0.5		
Comments:			Total Hrs.		0.5		
Extra Charges Meals / Accommodations / Misc.			Tariff Rate	\$			
			Min. Hrs.	\$			
Description	Pilot	Engineer	Location	Expense Claim #	Location	Litres	Rate/Litre
Breakfast					UHNL Fuel	65	\$
Lunch					UHNL Fuel		\$
Dinner					UHNL Fuel		\$
Accommodation					UHNL Fuel		\$
Misc. (Specify)					Customer Fuel		\$
Misc. (Specify)							\$
Landing Fees							\$
Landing Fees							\$
Totals					Total Expenses		\$
					Tax		\$
			No. of Airport Landings 0		Total		\$
The carriage of passengers, baggage and goods by Universal Helicopters Newfoundland Limited is subject to the terms, conditions and limitations of liability set forth in its tariff (e.g. liability for loss or damage to goods is limited to 50 cents per pound), an extract of which is available for examination at the office of Universal Helicopters Newfoundland Limited.			Signed for by Charterer:				
			Print Name:				
			Passengers:				

Payment is due on receipt of invoice. Interest of 18% per annum. (1 1/2% per month) will be charged on all past due invoices.

INVOICE COPY



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P. O. Box 529, Station C, Happy Valley-Goose Bay, Labrador, NL A0P 1C0
Tel: (709) 896-2444 Fax: (709) 896-0996

8631

Flight Date	Day / Month / Year
	04 Feb 2014

Base No.	Aircraft Type	Flight Code	Customer #	Tariff Zone	Aircraft Call Sign		
282	206L1K			13	C-206-11		
Customer Information:			Pilot Signature				
Name:	Dispatch No.	W-09914					
Address:	A.F.A. No.	729-7					
City:	Province:	P.O. No.	218-36-88				
Postal Code:	Dangerous Goods Transported			<input type="checkbox"/> Yes <input type="checkbox"/> No			
Tel. No.:	Freight	Flight Type		Minimums			
Contact Person:	No. Passengers	Charter	Contract	Yes	No		
Flight Description		Take Off Time	Landing Time	Revenue Hours	Non-Revenue Hours		
Kivalliq → search area along route		7:50					
→ Kivalliq			11:07	3.0			
Kivalliq → search area → plus fuel		11:43					
→ end of mission location →			14:25	2.7			
Kivalliq							
Comments:			Total Hrs.	5.7			
Extra Charges Meals / Accommodations / Misc.			Tariff Rate	\$			
			Min. Hrs.	\$			
Description	Pilot	Engineer	Location	Expense Claim #	Location	Litres	Rate/Litre
Breakfast					UHNL Fuel	141	\$
Lunch	✓		Kivalliq, NL		UHNL Fuel		\$
Dinner					UHNL Fuel		\$
Accommodation					UHNL Fuel		\$
Misc. (Specify)					Customer Fuel		\$
Misc. (Specify)					Oil:	Hrs @	/Hr. = \$
Landing Fees					Total Expenses \$		
Landing Fees					Tax \$		
Totals					Total \$		
			No. of Airport Landings	8			
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INVOICE COPY

AIRCRAFT FLIGHT REPORT

03

CARRIER NAME UHL

AUTHORIZATION # 72909

FLIGHT DATE 04-Feb-2019

ADDRESS Goose Bay

DISPATCH # N-0994

CAPTAIN/PILOT K. Ingram

TYPE AIRCRAFT Boeing

AIRCRAFT CALL SIGN C-GLSH

DEPT. SAR

AIRCRAFT BASE Pasadena

FROM	TO	DISTANCE TRAVELLED	TAKE OFF	LAND	FLYING TIME	PASSENGERS
<u>Pasadena</u>	<u>Pasadena</u>		<u>0837</u>	<u>0907</u>	<u>0.5</u>	<u>0</u>

TOTAL FLYING TIME 0.5 HRS. TOTAL DISTANCE TRAVELLED _____ MILES

FOR CARRIER USE ONLY WHERE APPLICABLE	
Fuel Consumed	Amount
<u>65</u>	<u>@lgaals @ Pasadena</u>

CONTRACT AIRCRAFT <input checked="" type="checkbox"/> OR CHARTER AIRCRAFT <input type="checkbox"/>	HOURLY RATE : _____
SPECIAL CONSIDERATIONS	

SIGNED FOR CARRIER: Thy L.N. Ingram

SIGNED FOR DEPARTMENT: _____

TO CARRIERS:

It is important to properly complete this form and attach copy 1 of the Flight Authorization. Failure to do so will result in a delay and/or non payment of invoices. The Department of Transportation and Works reserves the right to verify the contents of this report with your Aircraft Log(s). GOVERNMENT EMPLOYEES WILL NOT SIGN A BLANK REPORT.

Exhibit P-147

AIRCRAFT FLIGHT REPORT

CARRIER NAME UHL AUTHORIZATION # 72909 FLIGHT DATE 04-Feb-2019
 ADDRESS George Bay DISPATCH # U-0994 CAPTAIN/PILOT K. Ingram
 TYPE AIRCRAFT Boeing AIRCRAFT CALL SIGN C-GLSH DEPT. SAR
 AIRCRAFT BASE Pasadena

FROM	TO	DISTANCE TRAVELLED	TAKE OFF	LAND	FLYING TIME	PASSENGERS
<u>Pasadena</u>	<u>Pasadena</u>		<u>0806</u>	<u>1107</u>	<u>3.0</u>	<u>0</u>
<u>Pasadena</u>	<u>Pasadena</u>		<u>1143</u>	<u>1425</u>	<u>0.7</u>	<u>2</u>

TOTAL FLYING TIME 5.7 HRS. TOTAL DISTANCE TRAVELLED _____ MILES

FOR CARRIER USE ONLY WHERE APPLICABLE	
Fuel Consumed	Amount
<u>Pasadena</u>	<u>741</u>
<u>Pasadena</u>	<u>741</u>

CONTRACT AIRCRAFT <input checked="" type="checkbox"/> OR CHARTER AIRCRAFT <input type="checkbox"/>	HOURLY RATE : _____
SPECIAL CONSIDERATIONS	

SIGNED FOR CARRIER: [Signature] SIGNED FOR DEPARTMENT: _____

TO CARRIERS:
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