

AHS Board and Executive Expense Report

Name Dr. Blair O'Neill
Title ACMO Strategic Clinical Networks
Location Edmonton

Expenses submitted during the month of October 2016

Travel (1)										
MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Oct-16	Expense Claim	Meetings		21		387	408			
Oct-16	Direct Billing	Meetings	1,531				1,531			
Total			\$ 1,531	\$ 21	\$ -	\$ 387	\$ 1,939	\$ -	\$ -	\$ -

Total for the Month \$ 1,939

Maximum daily single meal expense claimed in the month \$ 21
 Maximum daily base hotel rate claimed in the month \$ -
 Non economy air travel in the month \$ -

1) Travel expenses

Includes local and out of province/country travel expenses. Other travel includes items such as taxis, parking mileage, car rental and other expenses related to travel.

2) Professional Development

Includes conference, seminar and course registration fees and material

3) Hosting and Hospitality expenses

Hospitality and Hosting expenses may be incurred to advance AHS' mission, vision and values. For example, may include working lunches with staff and prospective employees meetings with government officials, dignitaries, public interest groups, donors other public or private organizations.

4) Other

Other expenses include expenses incurred in the normal course of business that are required for work purposes. May include small item technology purchases, books, etc.

5) Remuneration, Allowances Reported in the Financial Statements

Car allowance, honoraria, meeting fees, and any other employment benefits reported in the annual financial statements are excluded from this report.

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
O'NEILL, BLAIR	ACMO, Strategic Clinical Networks	Edmonton	\$ 408.15								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
9/7/2016	Mileage from home to airport and return. Flight to Calgary to attend PPEC Meeting		Mileage-Local-Home Zone	\$ 32.24			Mileage from home to airport and return. Flight to Calgary to attend/present at PPEC meeting.	1			62
9/7/2016	PPEC Meeting in Calgary	AB - Other Zones	Parking - Lot or Parkade	\$ 25.00			Airport Parking for the day. Flight to Calgary to attend/present at PPEC meeting.	1			
9/8/2016	SCN Team Meeting		Mileage-Local-Home Zone	\$ 32.24			Mileage to Leduc to attend SCN Team Meeting.	1			62
9/13/2016	SPOR Steering Committee Meeting	AB - Local	Parking - Lot or Parkade	\$ 24.00			Attended the SPOR Steering Committee Meeting from 1-4pm at Bell Tower, Edmonton, AB	1			
9/14/2016	Alberta Health Meeting	AB - Local	Parking - Lot or Parkade	\$ 30.00			Attended Alberta Health Meeting re: ACPLF Discussion at ATB Place	1			
9/19/2016	Emergency SCN Core Meeting		Mileage-Local-Home Zone	\$ 35.57			Mileage from home to Leduc and return. Attended the Emergency SCN Core Committee Meeting.	1			68.4
9/20/2016	PPIH Core Committee Meeting and SCN Team Leadership Meeting		Mileage-Local-Home Zone	\$ 32.34			Mileage from Edmonton to Nisku and return home to attend the PPIH Core Committee Meeting and F2F SCN Team Leadership Meeting.	1			62.2
10/13/2016	Calgary ZMAC presentation and f2f meetings	AB - Other Zones	Meals Per Diem	\$ 20.75			Breakfast and Lunch. Presented at Calgary ZMAC meeting and at Southport Attended SCN meetings. Dinner = \$20.75	1			

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
O'NEILL, BLAIR	ACMO, Strategic Clinical Networks	Edmonton	\$ 408.15

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
10/13/2016	Calgary ZMAC Presentation	AB - Other Zones	Taxi	\$ 63.25			Taxi from Fort Calgary to Southport. Presented at Calgary ZMAC meeting re: Appropriateness of Care.	1			
10/13/2016	Calgary ZMAC & F2F SCN meetings	AB - Other Zones	Taxi	\$ 80.21			Taxi from Southport to Calgary Airport. Face to face meetings.	1			
10/26/2016	Policy AH Meeting	AB - Local	Parking - Lot or Parkade	\$ 32.55			Attended AMA/Alberta Health Policy Meeting.	1			

Approver(s) for the claim	Approval Status	Approval Date
BELANGER, FRANCOIS	Approve	14-Nov-16

INPARL00020400A
INT'L AIRPORT SERVICE ROAD
EDMONTON AB T5J2T2
MID: [REDACTED]
GST#: 0000000000000000

EDMONTON AIRPORTS
GST # R128599776
VALET PARKING

09/07/2016 3:45PM [REDACTED]

TID: 102 PPEC Mtg.

[REDACTED]
DAY PARK T: \$40.00
MOSE ST \$40.00
VAT 1.90
CARD CH \$40.00

SALE
[REDACTED] Exp [REDACTED]
VISA CHIP

09/07/2016 16:17:32 Inv#: [REDACTED]
Record#: [REDACTED] Batch#: [REDACTED]
Retrieval#: [REDACTED]

[REDACTED] SCOTIABANK VISA [REDACTED]

Total: Parking - \$40.00
VIP Parking so subtract
Auth Code: [REDACTED]
APPROVED
only claim \$25.00
Customer copy

PPEC Mtg
07 Sep 16
only claim \$25.00

ATB PLACE
GST: 887315638RT001
RECEIPT C1

AH
Meety

IN: 14.09.16 14:47
PAY: 14.09.16 19:16
AMOUNT: \$ 30.00

----- TRANSACTION
RECORD -----

Card #: [REDACTED]
Card Entry: CHIP
Account: VISA
Trans: PURCHASE
Amount: \$30.00
Auth #: [REDACTED]
Sequence #: [REDACTED]
Term ID: [REDACTED]
Date: 16/09/14
Time: 19:15:52

APPROVED

BY ENTERING A VERIFIED
PIN, CARDHOLDER
AGREES TO PAY ISSUER
SUCH TOTAL IN
ACCORDANCE WITH ISSUERS
AGREEMENT WITH
CARDHOLDER

Application Label:
SCOTIABANK VISA
[REDACTED]

*** CUSTOMER
COPY ***

SPOR mtg

Welcome to Lot 493
BELL TOWER PARKADE
MANAGED BY

IMPARK
RECEIPT C2

ENTRY TIME:
09/13/16 12:37
EXIT TIME:
09/13/16 15:46
PARK-DUR.: HRS:MIN
0:03:09
AMOUNT:
\$ 24.00

KIND OF PAYMENT:
VISA

[REDACTED]
REF. [REDACTED]
GST No. 887315638RT [REDACTED]

THANK YOU FOR
PARKING WITH US

Thank you for
Visiting!

South Port to Airport

ALLIED/ASSOCIATED CAB
307 41 AVE NE T2E2N4
CALGARY AB

**** PURCHASE ****
10-13-2016 14:29:24
Acct # [REDACTED] C
Exp Date [REDACTED] Card Type VI
Name: DR BLAIR J ONEILL
[REDACTED] SCOTIABANK VISA

Trace # [REDACTED]
Inv. # [REDACTED]
Auth # [REDACTED] RRN [REDACTED]

Purchase \$69.75
Tip \$10.46
Total \$80.21

(001) APPROVED-THANK YOU

Retain this copy for your records
Customer copy

403-298-9555
www.calgarylimo.com

Fort Calgary to Southport

ALLIED/ASSOCIATED CAB
307 41 AVE NE T2E2N4
CALGARY AB

**** PURCHASE ****
10-13-2016 10:55:20
Acct # [REDACTED] C
Exp Date [REDACTED] Card Type VI
Name: DR BLAIR J ONEILL
[REDACTED] SCOTIABANK VISA

Trace # [REDACTED]
Inv. # [REDACTED]
Auth # [REDACTED] RRN [REDACTED]
TVR [REDACTED]
TC [REDACTED]

Purchase \$55.00
Tip \$8.25
Total \$63.25

(001) APPROVED-THANK YOU

(PIN VERIFIED)

Retain this copy for your records
Merchant copy

Parker AH Meeting

The Westin Edmonton
10135 100 St
Edmonton, AB T5J 0N7
Canada
Tel: 780-426-3636 Fax: 780-428-1454

V Valet

Page Number : 1 Invoice Nbr: [REDACTED]
Guest Number: [REDACTED] Arrive Date: 26-OCT-16
Folio ID : [REDACTED] Depart Date: 26-OCT-16
No. Of Guest: 1
Room Number :
Room Rate : 0.00
Club Account:

Tax Invoice

Tax ID: 815461330RT0001

The Westin Edmonton 26-OCT-16 11:14 [REDACTED]

Date	Reference	Description	Charges	Credits
26-OCT-16	[REDACTED]	Short Term Parking	31.00	
26-OCT-16	[REDACTED]	GST	1.55	
26-OCT-16	[REDACTED]	Visa-[REDACTED]		-32.55
		** Total	32.55	-32.55
		*** Balance	0.00	

FUEL YOUR BODY - It's easy to maintain a healthy lifestyle on the road. Our extensive SuperFoodsRx(TM) menu features nutrient-rich, delicious dishes that fuel your body and give you the focused energy you need. Discover dishes to supercharge your day at westin.com/eatwell

Continued on the next page

Expense Report Direct Bill Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive or an AHS Board Member and paid for by a third party vendor. The information will be used for public disclosure reporting.

Expenses Paid Directly to Third Party Vendors:

AHS may have established accounts with certain vendors used to book travel and other expenses that are billed directly to AHS.

Examples include but are not limited to hotels, travel agencies, car rental agencies, conferences, courses and expenses reimbursed from a petty cash fund. It is mandatory to include in monthly reports these expenses that pertain to each member. AHS is required to disclose expenses for all applicable receipts and back up must be attached.

Direct Bill Report

- Enter all items related to expenses incurred while conducting AHS business and paid for via a third party vendor (i.e. accommodations, airline tickets, car rentals, hosting events and working sessions)
- Enter all expenses pertaining to professional development such as conferences and courses, etc.
- Enter all expenses paid by AHS not mentioned above.
- Copies of invoices and other relevant back up must be attached, approvals for hosting events/working sessions that exceeds \$600 must be provided.
- Information will be used for reporting purposes only.
- A personal cheque must be attached to cover expenses deemed ineligible.
- Indicate whether you have expenses to report in this section for this reporting period: **YES**

Name : Dr. Blair O'Neill	Reporting Period for the Month of : September - October 2016
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
12-Oct-2016	Direct Billing	Airline Ticket	Travel to Calgary to present at ZMAC Meeting and F2F SCN meetings. Invoice [REDACTED]	Marlin Travel	371.61
7-Sep-2016	Direct Billing	Airline Ticket	Travel to Calgary to attend Face to Face PPEC Meeting to present Appropriateness of Care topic. Invoice [REDACTED]	Marlin Travel	349.76
22-Sep-2016	Direct Billing	Airline Ticket	Travel to Calgary to attend/present at the PERG Meeting. Invoice [REDACTED]	Marlin Travel	497.01
29-Sep-2016	Direct Billing	Airline Ticket	Cancelled Trip to Calgary due to urgent meetings that arose in the calendar. Invoice # [REDACTED]	Marlin Travel	150.00
17-May-2016	Direct Billing	Airline Ticket	Travel to Calgary to Inperson AHS Strategy for the CHRIA Steering Committee Meeting. Invoice [REDACTED]	Marlin Travel	162.94
Total Paid in the Month					\$ 1,531.32

Travel to Calgary
Per ZMAC presentation.



Trip Statement

ALBERTA HEALTH SERVICES
"SUITE 800, NORTH TOWER"
10030-107 ST
EDMONTON, AB T5J 3E4
CANADA

Trip #: [REDACTED]
Booking Date: 30 Sep 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: TIFFANY ASKE

File Locator: [REDACTED]

PASSENGERS: DR BLAIR ONEILL

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	296.65	0.00	\$0.00	74.96	0.00	371.61 CAD
Total:	296.65	0.00	0.00	74.96	0.00	371.61 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	09/29/2016	[REDACTED]	[REDACTED]	371.61 CAD
Total Payment:					371.61 CAD

Balance Due CAD Currency 0.00 CAD

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
 ***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****
 *****PLEASE REVIEW YOUR ITINERARY FOR ACCURACY*****
 PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY

ALBERTA HEALTH SERVICES
"SUITE 800, NORTH TOWER"
10030-107 ST
EDMONTON, AB T5J 3E4
CANADA

Trip #: [REDACTED]
Booking Date: 30 Sep 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: TIFFANY ASKE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
BLAIR ONEILL	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: BLAIR ONEILL

Booking Date: 28 Sep 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08169	EDMONTON INTL 12 Oct 16 4:50PM		CALGARY INTL 12 Oct 16 5:42PM	G		
AIR CANADA	08152	CALGARY INTL 13 Oct 16 4:45PM		EDMONTON INTL 13 Oct 16 5:39PM	Q		

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915
Branch: N61107
Agent: TIFFANY ASKE Tel: 780-425-8611

Air port mileage - 62km. Sept 7/16
Air port " - 62km Sept 8/16 Team
be

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: August 31, 2016
Page: 1/2
Our Reference: [REDACTED]

INVOICE

PPEC Mtg.

For
DR BLAIR ONEILL
AC [REDACTED]

Wednesday, September 7, 2016

Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 Arrival: 07Sep16
AIR CANADA E
SEAT 2C - ONEILL/BLAIR DR
AIR CANADA CONFIRAMTION KJUEZZ
TICKET NUMBER [REDACTED]

Flight: 8133 W CLASS
07:10 AM Equipment: D8 (300 SERIES)
08:05 AM

Mile(s) Flown: 163

Air

AIR CANADA
From: CALGARY AB
To: EDMONTON INTL AB
Stops: 0 Arrival: 07Sep16
AIR CANADA E
SEAT 2A - ONEILL/BLAIR DR
AIR CANADA CONFIRAMTION KJUEZZ
TICKET NUMBER [REDACTED]

Flight: 8150 W CLASS
03:25 PM Equipment: DH4
04:15 PM

Mile(s) Flown: 163

Cost:
AIR CANADA WEE [REDACTED]

[REDACTED] 274.80
Tax: 74.96
Ticket Total: 349.76

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: August 31, 2016
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Total:

Grand Total:	349.76
Less Credit Card Payments:	349.76
Credit / Balance Due To This Invoice:	0.00
Total Balance Due:	0.00

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED: VALID PASSPORT... VISA.. TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL
1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT
1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.

PERL 1 mtg.



Trip Statement

ALBERTA HEALTH SERVICES "SUITE 800, NORTH TOWER" 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	Trip #: [REDACTED] Booking Date: 15 Sep 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: TIFFANY ASKE File Locator: [REDACTED]
---	--

PASSENGERS: DR BLAIR ONEILL

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	422.05	0.00	\$0.00	74.96	0.00	497.01 CAD
Total:	422.05	0.00	0.00	74.96	0.00	497.01 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	09/14/2016	[REDACTED]	[REDACTED]	497.01 CAD
				Total Payment:	497.01 CAD

Balance Due CAD Currency **0.00 CAD**

AIR FLIGHT ACCIDENT INSURANCE IS PROVIDED AT NO COST TO OUR CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL

***** AFTER HOURS EMERGENCY HELP DESK WITHIN CANADA OR UNITED STATES CALL ...1 888 342 3292 OUTSIDE OF TOLL FREE AREA CALL COLLECT...303 801 2147 PLEASE QUOTE ACCESS CODE 2EC0 *****

PLEASE REVIEW YOUR ITINERARY FOR ACCURACY

PLEASE INFORM US WITHIN ONE BUSINESS DAY SHOULD YOU FIND ANY DISCREPANCIES. DEPENDING ON THE NATURE OF THE DISCREPANCY COSTS ASSOCIATED WITH MAKING CORRECTIONS MAY BE YOUR RESPONSIBILITY -----

---AIR CANADA RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO WWW.AIRCANADA.COM TO CHECK IN AND PRINT YOUR BOARDING PASS.

ALBERTA HEALTH SERVICES
"SUITE 800, NORTH TOWER"
10030-107 ST
EDMONTON, AB T5J 3E4
CANADA

Trip #: [REDACTED]
Booking Date: 15 Sep 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: TIFFANY ASKE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
BLAIR ONEILL	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: BLAIR ONEILL

Booking Date: 14 Sep 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08139	EDMONTON INTL		CALGARY INTL	M		
		22 Sep 16 10:15AM		22 Sep 16 11:11AM			
AIR CANADA	08433	CALGARY INTL		EDMONTON INTL	W		
		22 Sep 16 8:40PM		22 Sep 16 9:30PM			

Cancelled Trip



Trip Statement

ALBERTA HEALTH SERVICES "SUITE 800, NORTH TOWER" 10030-107 ST EDMONTON, AB T5J 3E4 CANADA	Trip #: [REDACTED] Booking Date: 23 Sep 16 Client: [REDACTED] Client Phone #: [REDACTED] Client Email: [REDACTED] Agent: TIFFANY ASKE File Locator: [REDACTED]
---	--

PASSENGERS: DR BLAIR ONEILL

INSURANCE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
BSP CANADA, I.A.T.A., Confirmation # [REDACTED]	150.00	0.00	\$0.00	0.00	0.00	150.00 CAD
Total:	150.00	0.00	0.00	0.00	0.00	150.00 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	09/22/2016	[REDACTED]	[REDACTED]	150.00 CAD
Total Payment:					150.00 CAD

Balance Due CAD Currency 0.00 CAD

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ALBERTA HEALTH SERVICES
"SUITE 800, NORTH TOWER"
10030-107 ST
EDMONTON, AB T5J 3E4
CANADA

Trip #: [REDACTED]
Booking Date: 23 Sep 16
Client: [REDACTED]
Client Phone #: [REDACTED]
Client Email: [REDACTED]
Agent: TIFFANY ASKE

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
BLAIR ONEILL	Not Specified	Not Specified

All passengers need to ensure that correct documentation requirements are met for entry to the applicable destinations as well as for their return to Canada



AIR

Passengers: BLAIR ONEILL
Booking Date: 22 Sep 16
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class	Seat	Stops
AIR CANADA	08147	EDMONTON INTL		CALGARY INTL	G		
		29 Sep 16 11:40AM		29 Sep 16 12:32PM			
AIR CANADA	08225	CALGARY INTL		EDMONTON INTL	V		
		29 Sep 16 6:20PM		29 Sep 16 7:10PM			

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915
Branch: N61107
Agent: MEA MOORE Tel: 780-425-8611

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: May 17, 2016
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For

DR BLAIR ONEILL
AC [REDACTED]

Thursday, June 9, 2016

Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 Arrival: 09Jun16
Flight: 8153 G CLASS
06:00 PM Equipment: D8 (300 SERIES)
06:55 PM Mile(s) Flown: 163
AIR CANADA E
AIR CANADA CON [REDACTED] Z
TICKET NUMBER [REDACTED]
SEAT 2F

Cost:

AIR CANADA WEB [REDACTED]	[REDACTED]	125.46
	Tax:	37.48
	Ticket Total:	162.94

Total:

	Grand Total:	162.94
	Less Credit Card Payments:	162.94
	Credit / Balance Due To This Invoice:	0.00
	Total Balance Due:	0.00

To: ALBERTA HEALTH SERVICES
SUITE 800, NORTH TOWER
10030-107 ST
EDMONTON AB
CA T5J 3E4

Invoice Number: [REDACTED]
Date: May 17, 2016
Page: 2/2
Our Reference: [REDACTED]

INVOICE

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....
DOCUMENTATION REQUIRED:VALID PASSPORT...VISA..TOURIST CARD..
...PROOF OF CANADIAN CITIZENSHIP AND PHOTO ID... OTHER.....
PLEASE RECONFIRM ALL FLIGHTS BETWEEN 48 AND 72 HOURS PRIOR
TO EACH DEPARTURE DIRECTLY WITH THE AIRLINE.
CLIENTS FOR THE PRINCIPAL SUM \$100000 UNDER GROUP POLICY
GTRMM 11506 UNDERWRITTEN BY MANULIFE FINANCIAL
24 HOUR EMERGENCY HELP DESK WITHIN CANADA OR USA CALL
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1 303 801 2147. PLEASE QUOTE ACCESS CODE 2EC0
OUR PRIVACY POLICY CAN BE FOUND AT WWW.MARLINTRAVEL.CA.