

AHS Board and Executive Expense Report

Name Brian Stevenson

Title Chief Program Officer Capital Management

Location Edmonton

Expenses submitted during the month of July 2016

					•	Travel (1)					
ммм-үү	Source Document	Purpose	Airfare	e Mea	als Acc	commodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Jul-16	P-Card	Meetings					267	267			
Total			\$	- \$	- \$	-	\$ 267	\$ 267	\$ -	\$ -	\$ -

Total for

the Month \$ 267

Maximum daily single meal expense claimed in the month \$ - 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.



RUN DATE: 07/22/2016

P-Card details Online ® Cardholder Statement Report

	freceipts and supporting documents in the sa ignatures required where indicated below	ame order as it appears on this state	ement
STEVENSON, BRIAN	CHIEF PROGRAM OFFICER		
Cardholder's Name	Cardholder's Position/Title	Billing Reporting Period:	20/07/2016
CAPITAL MANAGEMENT	SEVENTH STREET PLAZA		
Cardholder's Dept	Cardholder's Site/Location	Total Statement Amount:	\$266.83
BRIAN.STEVENSON@ALBERTA	HEALTHSERVICES.CA		X
Cardholder's e-mail address		Last 6 digits of the P-Card #	

Transaction Date	Trans ID Merchant Name & Description		Trans Original Amount	Currency	Trans Amount		GST	FreighDescription
22/06/2016 (1)		ST ALBERT TAXI, LIMOUSINES AND TAXICABS	9 80 00	CAD	/	80 00	3 81	OCTaxi - Home to Edmonton airport - CCP Industry Information Mtg & ACH Foundation Dinner - June 22/16
22/06/2016		ASSOCIATED CAB/ALLIED, LIMOUSINES AND TAXICABS	38 30	CAD	V	38.30	1.82	Taxi - Calgary airport to Jack Singer Concert Hall - CCP Industry Information Mtg - June 22/16
22/06/2016		CHECKER CABS LTD , LIMOUSINES AND TAXICABS	s 12 20	CAD	V	12 20	.58	Taxi - downtown Calgary to Ranchman's Clut - ACH Foundation Dinner - June 22/16
22/06/2016		CHECKER CABS LTD , LIMOUSINES AND TAXICABS	ь 39 33	CAD	V	39 33	1 87	Taxi - Ranchman's Club to Calgary airport - ACH Foundation Dinner - June 22/16
23/06/2016		AIRPORT TAXI SERVICE, LIMOUSINES AND TAXICABS	97 00	CAD	/	97.00	4 62	Taxi - Edmonton airport to home - CCP Industry Information Mtg & ACH Foundation Dinner - June 22/16





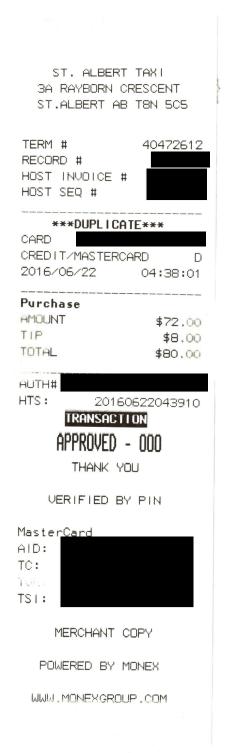
RUN DATE: 07/22/2016

P-Card details Online ® Cardholder Statement Report

Signatures									
Cardholder Designate (if Applicable) By signing this statement I hereby certify that I have reviewed and recon	ciled this statement in BMO Online to the best of my ability i	in accordance to AHS Corporate Policies							
Program User Guide and Training I have alloc	ated the transaction(s) to the proper cost centre.	in accordance to Ana Corporate Policies.							
IGGULDEN, KATHY	EXECUTIVE ASSISTANT								
Name of Cardholder Designate		Cardholder Designate Position/Title							
. ////	T 3								
// ~!	1219 72/16								
Signature of Cardholder Designate	Date of Signature	-							
Cardholder									
By signing this statement									
 I attest that I have read and understand the "Ti expenses being claimed are in compliance with 	avel, Hospitality and Working Session Expense Policy (112: a such policy.	2)" of Alberta Health Services and confirm							
 I attest the expenses enclosed in this claim are claimed by me or on my behalf from Alberta He charged is attached. 	for valid business purposes for Alberta Health Services and ealth Services or any other Organization. A personal cheque	d that this claim has not been previously for any personal expenses inadvertently							
	ave been incurred by using a cost effective method, otherwi	se rationale and supporting analysis is							
STEVENSON, BRIAN	CHIEF PROGRAM OFFICER								
Name of Cardholder		Cardholder Position/Title							
N AN	Cardnoider Position/ Title								
X L X X L L L L L L L L L L L L L L L L	July 22/16								
Signature of Cardholder	Date of Signature	-							
Olginatore of Caranolaci	Date of Signature								
Approver Designate (if Applicable)									
By signing this statement									
 I attest that I have read and understand the "Ti expenses being claimed are in compliance with 	avel, Hospitality and Working Session Expense Policy (112)	2)" of Alberta Health Services and confirm							
	N2W 82								
 I attest the expenses enclosed in this claim are 	for valid business purposes for Alberta Health Services and	d that this claim has not been previously							
claimed by the claimant or on their behalf from	Alberta Health Services or any other Organization. A person	nal cheque for personal expenses inadvertently							
charged has been obtained.		801 00 00 00							
 I attest that expenses submitted in this claim h provided. 	ave been incurred by using a cost effective method, otherwi	se rationale and supporting analysis is							
BEST, SUSAN	EXECUTIVE ASSISTANT								
Name of Approver Designate	Approver Designate Position/Title	-							
R. V									
Jusan Jes	Cing. 4116								
Signature of Approver Designate	Date of Signature	-							
Approver									
By signing this statement									
Lattest that I have read and understand the "To	avel, Hospitality and Working Session Expense Policy (112)	2)" of Alborta Hoalth Consists and confirm							
expenses being claimed are in compliance wit	a such policy	2) of Alberta Health Services and confirm							
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I attest the expenses enclosed in this claim are claimed by the claimant or on their hehalf from	for valid business purposes for Alberta Health Services and Alberta Health Services or any other Organization. A person	d that this claim has not been previously							
charged has been obtained.	Alberta Health Services of any other Organization. A person	nai cheque for personal expenses inadvertently							
 I attest that expenses submitted in this claim h 	ave been incurred by using a cost effective method, otherwi-	se rationale and supporting analysis is							
provided	, ,								
RHODES, DEBORAH	VP & CHIEF FINANCIAL OFFICER								
Name of Approver	Approver Position/Title	-							
Topman Dhades	0/11								
Ibboran Drices	Aug. 9/16								
Signature of Approver	Date of Signature	-							
C. b t									
Submit approved statement with attachments to A	ccounts Payable:								
Attach:		Address:							
 Original (or scanned) itemized receipts with docu 	mented business reasons including names of participants	Address.							
where required	and recommended the control of the	Alberta Health Services							
0. 10 0		Accounts Payable							
 Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable: 									
	* Copies of pre-approvals for travel 10th Floor, North Tower, 10030-107 Str								
Personal cheque payable to "Alberta Health Serv	ices"	Edmonton, AB T5J 3E4							
Return, refund and/or credit receipts	ATT								
Disputes letter	5 W S								
Business reasons for travel require detailed described why travel was passed.	riptions – include where travelled to, who attended (if								
meal), why travel was necessary and detailed ex	planation of reason.								
Accounts Payable only:		<u> </u>							
Reference #.	Reviewed by:	Date:							

(1) Taxi - Home to Edmonton airport - CCP Industry Information Mtg & ACH Foundation Dinner - June 22/16

(2) Taxi - Calgary airport to Jack Singer Concert Hall - CCP Industry Information Mtg - June 22/16





(3) Taxi - downtown Calgary to Ranchman's Club - ACH Foundation Dinner - June 22/16

(4) Taxi - Ranchman's Club to Calgary airport - ACH Foundation Dinner - June 22/16

(5) Taxi - Edmonton airport to home - CCP Industry Information Mtg & ACH Foundation Dinner -June 22/16





