

AHS Board and Executive Expense Report

Name Catherine MacNeill
Title Corporate Secretary (Acting)
Location Calgary

Expenses submitted during the month of February 2017

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)
Feb-17	Expense Claim	Meetings		130	327	124	581			
Feb-17	Direct Billing	Meetings				268	268			
Total			\$ -	\$ 130	\$ 327	\$ 392	\$ 849	\$ -	\$ -	\$ -

Total for the Month \$ 849

Maximum daily single meal expense claimed in the month \$ 24
 Maximum daily base hotel rate claimed in the month \$ 149
 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									
MACNEILL, CATHERINE	Corporate Secretary	Calgary	\$ 580.52									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
2/6/2017	Attend Foundation Support Steering Committee	AB - Other Zones	Parking - Lot or Parkade	\$ 14.25				1				
2/14/2017	Attend Board Committee meetings in Edmonton	AB - Other Zones	Meals Per Diem	\$ 24.00			Dinner \$24.00	1				
2/14/2017	Attend Board Committee meetings in Edmonton	AB - Other Zones	Taxi	\$ 27.84				1				
2/14/2017	Attend Board Committee meetings in Edmonton	AB - Other Zones	Accommodations	\$ 159.61				1				
2/15/2017	Attend Board Committee meetings in Edmonton	AB - Other Zones	Meals Per Diem	\$ 34.50			Bfast \$10.50 Dinner \$24.00	1				
2/15/2017	Attend Board Committee meetings in Edmonton	AB - Other Zones	Taxi	\$ 27.43				1				
2/28/2017	Attend HR Committee and Board Meetings	AB - Other Zones	Taxi	\$ 26.68				1				
2/28/2017	Attend HR Committee and Board Meetings	AB - Other Zones	Accommodations	\$ 167.28				1				
2/28/2017	Attend HR Committee and Board Meetings	AB - Other Zones	Meals Per Diem	\$ 37.00			Lunch \$13.00 Dinner \$24.00	1				
3/1/2017	Attend HR Committee and Board Meetings	AB - Other Zones	Meals Per Diem	\$ 34.50			Bfast \$10.50 Dinner \$24.00	1				
3/1/2017	Attend HR Committee and Board Meetings	AB - Other Zones	Taxi	\$ 27.43				1				
Approver(s) for the claim		Approval Status		Approval Date								
GIESBRECHT, TINA		Approve		22-Mar-17								

Foundation Support
Commnt -> Parking

Alberta Health
Services
South Campus

RECEIPT

ENTRY DATE/TIME:

06/02/17 08:35

PAY DATE/TIME:

06/02/17 15:11

PARK-DUR.: HRS:MIN

0:06:36

ALLOWED EXIT TO:

07.02.17 08:50

PAID: \$ 14.25

MASTER CARD

[REDACTED]

REF.

* Parking Rates *

* Are GST Exempt *

* Please Exit *

* Site Within *

* 15 Minutes *

* After Payment *

* Is Made *

* No In/Out *

* Privileges *

* Managed by *

* Alberta *

* HealthServices *

* Have Questions *

* Or Concerns? *

* Call Us *

* 403-956-1090 *

Red Arrow -> Home

CALGARY UNITED CABS
5660 10TH ST NE
SUITE 8
CALGARY AB T2E 8W7
(403) 777-1111

SALE

MID: [REDACTED] ST: 794386326RT0001
TID: [REDACTED] REF#: [REDACTED]
Batch #: [REDACTED] SEQ: [REDACTED]
02/15/17 20:18:58
APPR CODE: [REDACTED]
MASTERCARD

AMOUNT \$23.85
TIP \$3.58
TOTAL \$27.43

00 - APPROVED - 001

MasterCard

[REDACTED]

CUSTOMER COPY

Red Arrow -> Home

CALGARY UNITED CABS
5660 10TH ST NE
SUITE 8
CALGARY AB T2E 8W7
(403) 777-1111

SALE

MID: [REDACTED] ST: 794386326RT0001
TID: [REDACTED] REF#: [REDACTED]
Batch #: [REDACTED] SEQ: [REDACTED]
03/01/17 22:24:08
APPR CODE: [REDACTED]
MASTERCARD

AMOUNT \$23.85
TIP \$3.58
TOTAL \$27.43

00 - APPROVED - 001

MasterCard

[REDACTED]

CUSTOMER COPY

Home -> Red Arrow

ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111

SALE

MID: [REDACTED]
TID: [REDACTED] REF#: [REDACTED]
Batch #: [REDACTED] SEQ: [REDACTED]
02/14/17 16:10:46
APPR CODE: [REDACTED]
MASTERCARD

AMOUNT \$23.20
TIP \$4.64
TOTAL \$27.84

00 - APPROVED - 001

MasterCard

[REDACTED]

THANK YOU

CUSTOMER COPY

Home -> Red Arrow

ASSOCIATED CAB
ALLIED LIMOUSIN
307-41 AVENUE NE
CALGARY AB T2E 2N4
(403) 299-1111

SALE

MID: [REDACTED]
TID: [REDACTED] REF#: [REDACTED]
Batch #: [REDACTED] SEQ: [REDACTED]
02/28/17 07:15:21
APPR CODE: [REDACTED]
MASTERCARD

AMOUNT \$23.20
TIP \$3.48
TOTAL \$26.68

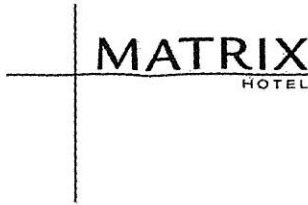
00 - APPROVED - 001

MasterCard

[REDACTED]

THANK YOU

CUSTOMER COPY



Catherine Macneill

Room Number: [REDACTED]
Arrival Date: 02-14-17
Departure Date: 02-15-17
Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

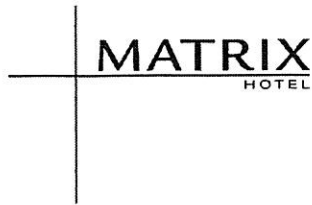
Folio No:

02-15-17

Date	Description	Charges	Credits
02-14-17	Room Service [REDACTED]	34.66	
02-14-17	Room Revenue	149.00	
02-14-17	Destination Marketing Fee - 3%	4.47	
02-14-17	Tourism Levy - 4%	6.14	
Total		194.27	0.00
Balance		194.27	
		(34.66)	
		<u>159.61</u>	

Signature: _____

I agree that my liability for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #105631154 RT 0008



MS Catherine Macneill

Room Number: [REDACTED]
Arrival Date: 02-28-17
Departure Date: 03-01-17
Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

Folio No: [REDACTED]

03-08-17

Date	Description	Charges	Credits
02-28-17	Room Service [REDACTED]	27.29	
02-28-17	Room Revenue	149.00	
02-28-17	Destination Marketing Fee - 3%	4.47	
02-28-17	Tourism Levy - 4%	6.14	
02-28-17	Room GST - 5%	7.67	
03-01-17	Refreshment Centre - Diet Coke 02	3.68	
03-01-17	Mastercard [REDACTED]		198.25
Total		198.25	198.25

Balance 0.00
 (3.68)
 (27.29)

 167.28

Signature: _____
 I agree that my liability for all charges is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part or the full amount of these charges. G.S.T. #105631154 RT 0008

Executive Expenses Report Direct Billing Summary

Purpose of This Form:

The purpose of this form is to report expenses incurred on behalf of a designated Executive 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 : Catherine MacNeill	Reporting Period for the Month of : Feb-17
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DD-MMM-YY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
14-Feb-17	Direct Billing	Other Transportation	Red Arrow from Calgary to Edmonton and Return (February 15) to attend Finance and Audit & Risk Committee Meetings	Marlin Travel	133.92
28-Feb-17	Direct Billing	Other Transportation	Red Arrow from Calgary to Edmonton and Return (March 1) to attend the Human Resources Committee and Board Meetings	Marlin Travel	133.92
	Direct Billing	Other Transportation		Marlin Travel	
	Direct Billing	Choose from Drop-down List		Marlin Travel	
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Total Paid in the Month					\$ 267.84

From: Red Arrow Reservations <itinerary@redarrow.ca>
Sent: January 17, 2017 5:10 PM
To: [REDACTED]
Subject: Invoice



INVOICE

Date: 2017-01-17

You can reach us at:

ALBERTA HEALTH SERVICES - MARLIN TRAVEL
 10030 107 STREET
 EDMONTON, AB T5J 3E4

Corporate Sales

ORDER#	ORDERED	CUSTOMER#	P.O.	GROUP NAME	DEPARTING	RETURNING	SALES REP	SALES AGENT
[REDACTED]	2017-01-17	[REDACTED]			2017-02-14	2017-02-15	-	Website User

Travellers:

macneill/catherine

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
CEEXP 16:30 Assigned to: 12A Departs Calgary (CALTO / Calgary Ticket Office) at 16:30 on 2017-02-14. Arrives Edmonton (EDMTO / Edmonton Ticket Office) at 19:50 on 2017-02-14. (3 hrs 20 mins)	3 hrs 20 mins	Adult	1	\$ 70.48	\$ 66.96
ECEXP 16:30 Assigned to: 12A Departs Edmonton (EDMTO / Edmonton Ticket Office) at 16:30 on 2017-02-15. Arrives Calgary (CALTO / Calgary Ticket Office) at 19:50 on 2017-02-15. (3 hrs 20 mins)	3 hrs 20 mins	Adult	1	\$ 70.48	\$ 66.96

Payments Received

DATE	GUEST	REFERENCE	AMOUNT
2017-01-17	ALBERTA HEALTH SERVICES MARLIN TRAVEL	MasterCard [REDACTED]	\$ 133.92

Base Price:	\$ 140.96
Discounts:	\$ 7.04
Service Charges:	\$ 0.00
Invoice Total:	\$ 133.92
Payments Received:	\$ 133.92
Balance Due:	\$ 0.00

TERMS: DUE UPON RECEIPT GST# BN139981476 Please note that the maximum luggage allowance per person is 4 pieces including carry on bags, and stowed luggage underneath the coach. Carry on bags include purses, backpacks and laptop bags. Additional luggage will incur additional fees. If you wish to time change, date change, or cancel for a full refund – 30 minutes notice prior to A.M departures; 3 hours notice prior to P.M. departures must be given. December 15 - January 5 to cancel or make any changes to a reservation we require 24 hours notice. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change. Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. If you wish to change or cancel your booking, please contact our Central Reservation line at 1-800-232-1958. **Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit www.redarrow.ca or view the policy posted on our information boards at our Ticket Offices** **Red Arrow reserves the right to check I.D. or perform carry-on baggage checks at any time** CORPORATE BILLING ACCOUNTS - PLEASE PAY OFF OF YOUR MONTHLY STATEMENT & NOT OFF OF INDIVIDUAL INVOICES. Thank you for choosing Red Arrow. Our Core Values: Safety | Customer Service | Resourcefulness | Integrity | Positive Attitude | Team Work | Loyalty | Accountability | Respect | Dedication

From: Red Arrow Reservations <itinerary@redarrow.ca>
Sent: February 27, 2017 9:41 AM
To: [REDACTED]
Subject: invoice

INVOICE



2017-02-27

You can reach us at:

ALBERTA HEALTH SERVICES - MARLIN TRAVEL
 10030 107 STREET
 EDMONTON, AB T5J 3E4

Corporate Sales

ORDER#	ORDERED	CUSTOMER#	P.O.	GROUP NAME	DEPARTING	RETURNING	SALES REP	SALES AGENT
[REDACTED]	2017-01-17	[REDACTED]			2017-02-28	2017-03-01	-	Website User

Travellers:

macneill/catherine

PRODUCT DESCRIPTION	DURATION	OCCUPANCY	QTY	PRICE/UNIT	BILLED
CALEDM 08:00 Assigned to: 12A Departs Calgary (CALTO / CTO 205 9 Ave SE) at 08:00 on 2017-02-28. Arrives Edmonton (EDMTO / ETO 10014 104 St) at 11:50 on 2017-02-28. (3 hrs 50 mins)	3 hrs 50 mins	Adult	1	\$ 70.48	\$ 66.96
EDMCAL 18:30 Assigned to: 12A Departs Edmonton (EDMTO / ETO 10014 104 St) at 18:30 on 2017-03-01. Arrives Calgary (CALTO / CTO 205 9 Ave SE) at 22:00 on 2017-03-01. (3 hrs 30 mins)	3 hrs 30 mins	Adult	1	\$ 70.48	\$ 66.96

Base Price: \$ 140.96

Discounts: \$ 7.04

Service Charges: \$ 0.00

Invoice Total: \$ 133.92

Payments Received: \$ 133.92

Balance Due: \$ 0.00

Payments Received

DATE	GUEST	REFERENCE	AMOUNT
2017-01-17	ALBERTA HEALTH SERVICES MARLIN TRAVEL	MasterCard [REDACTED]	\$ 133.92

PLEASE NOTE THAT A PAPER TICKET IS NOT REQUIRED FOR CHECK-IN.

TERMS: DUE UPON RECEIPT GST# BN139981476 Please note that the maximum luggage allowance per person is 4 pieces including carry on bags, and stowed luggage underneath the coach. Carry on bags include purses, backpacks and laptop bags. Additional luggage will incur additional fees. If you wish to time change, date change, or cancel for a full refund – 30 minutes notice prior to A.M departures; 3 hours notice prior to P.M. departures must be given. December 15 - January 5 to cancel or make any changes to a reservation we require 24 hours notice. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change. Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. **Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit www.redarrow.ca or view the policy posted on our information boards at our Ticket Offices** **Red Arrow reserves the right to check I.D. or perform carry-on baggage checks at any time** Corporate Billing Accounts - Please pay off your monthly statement & not individual invoices.

If you wish to change or cancel your booking, please contact a Passenger Experience Representative at 1-800-232-1958.

Thank you for booking with Red Arrow Motorcoach. We appreciate your business!

Our Core Values: Safety | Customer Service | Resourcefulness | Integrity | Positive Attitude | Team Work | Loyalty | Accountability | Respect | Dedication