

AHS Board and Executive Expense Report

Name Colleen Turner
Title VP Community Engagement & Communications (Acting)
Location Edmonton

Expenses submitted during the month of April 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)
Apr-16	P-Card	Meetings			644	475	1,119		465	
Apr-16	Expense Claim	Meetings		199		587	786			
Apr-16	Direct Billing	Meetings	2,077				2,077			
Total			\$ 2,077	\$ 199	\$ 644	\$ 1,062	\$ 3,982	\$ -	\$ 465	\$ -

Total for the Month \$ 4,447

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base hotel rate claimed in the month \$ 145
 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.

Instruction:

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

TURNER, COLLEEN Cardholder's Name	ACTING VP Cardholder's Position/Title	Billing Reporting Period: 20/04/2016
COMMUNITY ENGAGEMENT & Cardholder's Dept	SPPT Cardholder's Site/Location	Total Statement Amount: \$1,842.53 \$1,583.83
COLLEEN.TURNER@ALBERTAHEALTHSERVICES.CA Cardholder's e-mail address	Last 6 digits of the P-Card #: [REDACTED]	

Statement of Transactions

1
2
3
4
5
6
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8
9
10
11

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
22/03/2016	423408227	MATRIX HOTEL, LODGING HOTELS, MOTELS, RESORTS	162.78	CAD	162.78	7.75		Mar. 21 Accommodation - Attend ELT Mtg
22/03/2016	423622206	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	58.70	CAD	58.70	2.80	.00	YYC Pkg Mar. 21-22 - ELT Mtg - payment already received in error on March iExpense. Reimbursement attached.
30/03/2016	424253988	MATRIX HOTEL, LODGING HOTELS, MOTELS, RESORTS	155.32	CAD	155.32	7.40		Mar. 29 Accommodation - Mar. 29 AHS Board Meeting, Public Board Mtg Mar. 30.
30/03/2016	424253989	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	58.70	CAD	58.70	2.80	.00	YYC Parking Mar 29 - Board Mtg
05/04/2016	425073873	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	29.35	CAD	29.35	1.40	.00	YYC Parking Apr. 5 - ELT Mtg
07/04/2016	425073872	POMEROY HOTEL GRANDE P, EATING PLACES, RESTAURANTS	465.25	CAD	465.25	22.15		CEO Tour in GP - Dinner on Apr 7 with Community Representatives
08/04/2016	425253639	Enterprise, ENTERPRISE RENT-A-CAR	243.18	CAD	243.18	11.58		Apr. 7 and 8 - GP CEO Tour
08/04/2016	425253640	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	58.70	CAD	58.70	2.80	.00	YYC Parking April 7 and 8 - GP CEO Tour
12/04/2016	425650348	MATRIX HOTEL, LODGING HOTELS, MOTELS, RESORTS	325.58	CAD	325.58	15.50		Accommodation Apr. 10 and 11 - AH Mtg and ELT Mtg
12/04/2016	425883348	THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	58.70	CAD	58.70	2.80	.00	YYC Parking Apr 12 ELT Mtg
14/04/2016	425883345	INSTITUTE OF HEALTH EC, ORGANIZATIONS, CHARITABLE AND	26.25	CAD	26.25	1.25	.00	Health Policy Speaker Series - Sir Paul Nurse on May 5

Signatures
Cardholder Designate (if Applicable)

By signing this statement

- I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre.

Name of Cardholder Designate _____

Cardholder Designate Position/Title _____

Signature of Cardholder Designate _____

Date of Signature _____

Cardholder

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

 TURNER, COLLEEN
Name of Cardholder

ACTING VP

Cardholder Position/Title

Signature of Cardholder _____

Date of Signature _____

22 Apr 2016

Approver Designate (if Applicable)

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

Name of Approver Designate _____

Approver Designate Position/Title _____

Signature of Approver Designate _____

Date of Signature _____

Approver

By signing this statement

- I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.
- I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.
- I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.

 Verna Yiu
Name of Approver

 Interim VP
Approver Position/Title

Signature of Approver _____

Date of Signature _____

May 9/16

Submit approved statement with attachments to Accounts Payable:
Attach:

- Original (or scanned) itemized receipts with documented business reasons including names of participants where required
- Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable:
 - Copies of pre-approvals for travel
 - Personal cheque payable to "Alberta Health Services"
- Return, refund and/or credit receipts
- Disputes letter
- Business reasons for travel require detailed descriptions – include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason.

Address:

 Alberta Health Services
Accounts Payable
7th Street Plaza
10th Floor, North Tower, 10030-107 Street
Edmonton, AB T5J 3E4

Accounts Payable only:

Reference #: _____

Reviewed by: _____

Date: _____

RUN [

 Linda Hughes
Board Chair

Date May 5/16

Mental Solutions

PAGE NO: 2



ELI Hg Mar 22
1

Ms Colleen Turner



Room Number: [Redacted]
Arrival Date: 03-21-16
Departure Date: 03-22-16
Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

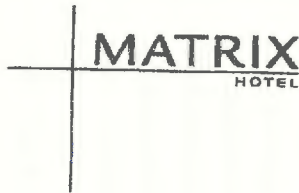
Folio No:

03-22-16

Date	Description	Charges	Credits
03-21-16	Room Revenue	145.00	
03-21-16	Destination Marketing Fec - 3%	4.35	
03-21-16	Tourism Levy - 4%	5.97	
03-21-16	Room GST - 5%	7.47	
03-22-16	Mastercard [Redacted]		162.79
Total		162.79	162.79
Balance		0.00	

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. #866344302 RT 0001



AHS Board Mtg
Mar 29-30

(3)

Ms Colleen Turner
[Redacted]

Room Number: [Redacted]
Arrival Date: 03-29-16
Departure Date: 03-30-16
Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

Folio No:

03-29-16

Date	Description	Charges	Credits
03-29-16	Room Revenue	145.00	
03-29-16	Destination Marketing Fee - 3%	4.35	
03-29-16	Tourism Levy - 4%	5.97	
Total		155.32	0.00
Balance		155.32	

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. #866344302 RT 0001

RECEIPT *Booth*
GST NO. R122556194

EXIT No. A2
IN: 03/29/16 08:49
OUT: 03/29/16 15:01
DURATION: 1 00: 12
PAID: \$ 58.70
(GST INCLUDED)
MASTERCARD

\$58.70



THANK YOU FOR
YOUR VISIT

4



RECEIPT *ELT Hg*
GST NO. R122556194

EXIT No. A2
IN: 04/05/16 06:29
OUT: 04/05/16 18:09
DURATION: 0 11: 40
PAID: \$ 29.35
(GST INCLUDED)
MASTERCARD



THANK YOU FOR
YOUR VISIT

5

Apr 5



P Cond

GP Community Representatives Dinner
April 7/16

6a

THU APRIL 7, 2016

CHECK

TA

1 Coffee	\$3.25
1 TEA	
5 SOFT DRINK	\$15.00
1 ARTICHOKE DIP	\$15.00
1 HONEY CALAMARI	\$13.00
1 BRIE QUESADILLA	\$14.00
1 SIMPLE GREENS	\$8.00
2 ARCTIC CHAR	\$54.00
1 SMOKED CHOP	\$26.00
1 SIDE ASPARAGUS	\$5.00
1 *Add SALMON	\$6.00
1 SAN PEL SMALL	\$4.00
1 STEAK SALAD	\$18.00
1 THAI SALAD	\$14.00
2 MOLASSES SALMON	\$48.00
1 BRUSCHETTA	\$12.00
3 2 for 1 PRIME RIB	\$117.00

	\$375.50
TAX	\$18.78
SUB TOTAL	\$394.28
GRAT	\$70.97
TOTAL	\$465.25

ROOM NUMBER _____

GUEST NAME _____

TIP _____

TOTAL _____

SIGN _____

[Redacted Signature]

2 FOR 1 PRIME RIB
FRIDAY THURSDAY
FROM 5 TO 9PM

[Redacted Signature]

OMEROY HOTEL GRANDE
PRAIRIE
11533 CLYBURN JUNT RD
GRANDE PRAIRIE AB

CARD [Redacted]
 CARD TYPE MASTERCARD
 DATE 2016/04/07
 TIME 0142 19:51:28
 SERV ID 017
 CHECK # 270016
 TABLE # 56
 RECEIPT NUMBER [Redacted]

PURCHASE
TOTAL

\$465.25

MasterCard
A0000000041010
63A9C7792FD35364
000008000-E800
7C4A06C3820D8F23

APPROVED

AUTH# [Redacted]
THANK [Redacted]

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

- Lucille Partington, Chair - Peace HAC
- Tracy Vavrek, CEO, Community Foundation of Northwestern Alberta
- Brock Smith, Chair – South Peace Physician Attraction and Retention Committee (SPPARC)/Councilor – County of Grande Prairie
- Cindy Park, CEO - Grande Prairie Regional Hospital Foundation
- Dawn Miller, Senior Development Officer, Grande Prairie Regional Hospital Foundation
- Joan Libsekai, AHS Senior Operating Officer, Grande Prairie/QEII
- Dr. Richard Beekman, Community Medical Director
- Dr. Albert deVilliers, AHS Medical Officer of Health, North Zone Lead
- Susan Given, AHS Public Health Director (Northwest)
- Debra Morrison, AHS Addictions and Mental Health Director (Northwest)
- Dr. Verna Yiu, AHS President and CEO
- Dr. Kevin Worry, AHS Zone Medical Director (North Zone)
- Colleen Turner, AHS VP – Communications and Community Engagement
- Kathryn Ward, ED, Community Engagement

6 b

7

Kathy Board

From: Enterprise Rent-A-Car Reservation [onlinereservations@enterprise.com]
Sent: April 20, 2016 11:02 AM
To: Kathy Board
Subject: Car Rental Receipt (duplicate)



ALBERTA HEALTH SERVICES

Contract Number: [REDACTED]

COLLEEN TURNER

Receipt Date: Apr 8, 2016

Enterprise Location: GRANDE PRAIRIE AP IN TER
GRANDE PRAIRIE, AB T8V7Z5
CA
Tel.: (780) 830-1930

Driver: COLLEEN TURNER

Start Date	End Date	Make/Model	Start Miles	End Miles	Miles Driven
Apr 7, 2016 @ 8:35 am	Apr 8, 2016 @ 1:40 pm	CHEV EQUI	2,576	2,683	107

Total Miles 107

Charge Description	Quantity	Per	Rate	Total
Rate	2	Day	71.00	142.00
CDW	2	Day	27.99	55.98
VLF				1.20

Subtotal: CAD 199.18

Taxes and Surcharges

CFC				32.43
GST				11.58

Subtotal: CAD 243.19

Total Charges: CAD 243.19

Payment Information

CREDIT CARD	MC			243.19
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Subtotal: CAD 243.19

Total Payment Amount CAD 243.19

RECEIPT
GST NO. R122556194

*Hq with AH
EKT*

EXIT No. 42
IN: 04/10/16 18:44
OUT: 04/17/16 16:30
DURATION: 1 21: 46
PAID: \$ 58.70
(GST INCLUDED)
MASTERCARD



THANK YOU FOR
YOUR VISIT

10



RECEIPT
GST NO. R122556194

*GP CEO Tour
YYC Parking*

EXIT No. 42
IN: 04/27/16 26:05
OUT: 04/28/16 15:57
DURATION: 1 09: 52
PAID: \$ 53.70
(GST INCLUDED)
MASTERCARD



THANK YOU FOR
YOUR VISIT

8



AA Mtg
ELT Mtg (9)

Ms Colleen Turner

Room Number: [REDACTED]
 Arrival Date: 04-10-16
 Departure Date: 04-12-16
 Page No: 1 of 1

Guest Name:

INFORMATION INVOICE

Folio No: [REDACTED]

04-19-16

Date	Description	Charges	Credits
04-10-16	Room Revenue	145.00	
04-10-16	Destination Marketing Fee - 3%	4.35	
04-10-16	Tourism Levy - 4%	5.97	
04-10-16	Room GST - 5%	7.47	
04-11-16	Room Revenue	145.00	
04-11-16	Destination Marketing Fee - 3%	4.35	
04-11-16	Tourism Levy - 4%	5.97	
04-11-16	Room GST - 5%	7.47	
04-12-16	Mastercard [REDACTED]		325.58
Total		325.58	325.58
Balance		0.00	

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. #R66344302 RT 0001



PRESENTED BY...

Health Policy Speaker Series





Receipt

Reference Number [REDACTED]
Date Registered April 14, 2016
Statement Date April 14, 2016

Event Health Policy Speaker Series (HPSS) - May 5th, Sir Paul Nurse
Event Details The Matrix Hotel (Quartz Ballroom)
 10135 100 Street NW
 Edmonton AB T5J 3N8
Event Date May 5, 2016

The following individuals are registered

Name	Category	Total
Colleen Turner	General Registration	\$CAD25.00
	Sales Tax	\$CAD1.25
	Total	\$CAD26.25

Billed To

Billing Company Alberta Health Services
Name Colleen Turner
Address Line 1 [REDACTED]
City [REDACTED]
State/Province [REDACTED]
Billing Zip/Postal Code [REDACTED]
Country [REDACTED]
Email Address kathy.board@ahs.ca

Date	Transaction Type	
April 14, 2016	Transaction Amount	\$CAD26.25
April 14, 2016	[REDACTED]	\$CAD-26.25
	Balance	\$CAD0.00

Cancellation Policy

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
TURNER, COLLEEN	VP Community Engagement & Communications (Acting)	Calgary	785.40

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
3/29/2016	AHS Board meeting in Edmonton All day	AB - Other Zones	Taxi	60.00				1			
3/29/2016	AHS Board meetings in Edmonton all day		Mileage	16.67	Home - Calgary	Calgary International Airport		1			33
3/29/2016	AHS Board meetings in Edmonton all day		Meals Per Diem	32.35			Lunch and dinner.	2			
3/30/2016	AHS Board meetings in Edmonton all day		Mileage	16.67	Calgary International Airport	Home - Calgary		1			33
3/30/2016	AHS Board meetings in Edmonton all day		Meals Per Diem	20.80			Claiming breakfast and lunch only.	2			
4/5/2016	ELT Meeting in Edmonton		Meals Per Diem	20.80			Breakfast and lunch only.	2			
4/5/2016	Airport to SSP at 8:30 a.m. -receipt reflects incorrect time as a receipt couldn't be generated until the afternoon.	AB - Other Zones	Taxi	60.00			ELT Meeting in Edmonton.	1			
4/5/2016	ELT Meetings in Edmonton		Mileage	16.67	Calgary International Airport	Home - Calgary		1			33
4/5/2016	SSP to Airport at 3:42 p.m.	AB - Other Zones	Taxi	60.00			ELT Meeting. SSP to the Airport at 3:42 p.m. Return to Calgary.	1			
4/5/2016	ELT Meetings in Edmonton		Mileage	16.67	Home - Calgary	Calgary International Airport		1			33
4/7/2016	CEO Tour in Grande Prairie		Mileage	16.67	Home - Calgary	Calgary International Airport		1			33

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
4/7/2016	CEO Tour in Grande Prairie		Meals Per Diem	20.80			Breakfast and Lunch. Dinner expensed on PCard, we hosted the GP Community Representatives for dinner. Working session has been completed and approved.	2			
4/8/2016	CEO Tour in Grande Prairie		Meals Per Diem	20.80			Breakfast and lunch.	2			
4/8/2016	CEO Tour in Grande Prairie		Mileage	16.67	Calgary International Airport	Home - Calgary		1			33
4/10/2016	AH and ELT Meetings in Edmonton all day	AB - Other Zones	Taxi	60.00				1			
4/10/2016	AH and ELT Meetings in Edmonton		Mileage	16.67	Home - Calgary	Calgary International Airport		1			33
4/11/2016	AH and ELT Meetings in Edmonton		Meals Per Diem	41.55			B/Fast/Lunch & Dinner	2			
4/12/2016	AH and ELT Meetings in Edmonton		Meals Per Diem	20.80			B/Fast & Dinner	2			
4/12/2016	AH and ELT Meetings in Edmonton all day	AB - Other Zones	Taxi	60.00				1			
4/12/2016	AH and ELT Meetings in Edmonton		Mileage	16.67	Calgary International Airport	Home - Calgary		1			33
4/18/2016	ELT Meetings in Edmonton All day		Mileage	16.67	Home - Calgary	Calgary International Airport		1			33
4/18/2016	ELT meetings in Edmonton All day	AB - Other	Taxi	60.00				1			
4/19/2016	ELT Meeting in Edmonton		Meals Per Diem	20.80				2			
4/19/2016	ELT Meetings in Edmonton All day		Mileage	16.67	Calgary International Airport	Home - Calgary		1			33
4/19/2016	ELT meetings in Edmonton All day	AB - Other	Taxi	60.00				1			
Approver(s) for the claim		Approval Status		Approval Date							
YIU, VERNA		Approve		2-May-16							

①

Diamond Limo and Taxi
2628 43 ST
EDMONTON, AB T6L 5G1

Merchant ID: 000000004838663
Term ID: 08128889
82380190017

Purchase

VISA

AID: A0000000031010
Entry Method: Waved

Batch#: [REDACTED]
03/29/16 11:44:10

Ref# [REDACTED]
Inv # [REDACTED] Appr Code: [REDACTED]

Amount: \$ 55.00
Tip: \$ 5.00

Total: \$ 60.00

Customer Copy

②

Diamond Limo and Taxi
2628 43 ST
EDMONTON, AB T6L 5G1

Merchant ID: 000000004838663
Term ID: 08128889
82380190017

Purchase

VISA

Entry Method: Chip

Batch#: [REDACTED]
04/05/16 15:42:32

Ref# [REDACTED]
Inv # [REDACTED] Appr Code: [REDACTED]

Amount: \$ 55.00
Tip: \$ 5.00

Total: \$ 60.00

Customer Copy

③

Diamond Limo and Taxi
2628 43 ST
EDMONTON, AB T6L 5G1

Merchant ID: 000000004838663
Term ID: 08128889
82380190017

Purchase

VISA

AID: A0000000031010
Entry Method: Chip

Batch#: [REDACTED]
04/05/16 15:42:16

Ref# [REDACTED]
Inv # [REDACTED] Appr Code: [REDACTED]

Amount: \$ 55.00
Tip: \$ 5.00

Total: \$ 60.00

④

Diamond Limo and Taxi
2628 43 ST
EDMONTON, AB T6L 5G1

Merchant ID: 000000004838663
Term ID: 08128889
82380190017

Purchase

VISA

Entry Method: Waved

Batch#: [REDACTED]
04/10/16 22:07:34

Ref# [REDACTED]
Inv # [REDACTED] Appr Code: [REDACTED]

Amount: \$ 55.00
Tip: \$ 5.00

Total: \$ 60.00

Customer Copy

⑤

Diamond Limo and Taxi
2628 43 ST
EDMONTON, AB T6L 5G1

Merchant ID: 000000004838663
Term ID: 08128889
82380190017

Purchase

VISA

AID: A0000000031010
Entry Method: Chip

Batch#: [REDACTED]
04/12/16 14:38:55

Ref# [REDACTED]
Inv # [REDACTED] Appr Code: [REDACTED]

Amount: \$ 55.00
Tip: \$ 5.00

Total: \$ 60.00

Customer Copy

⑥

Diamond Limo and Taxi
2628 43 ST
EDMONTON, AB T6L 5G1

Merchant ID: 000000004838663
Term ID: 08128891
82380190017

Purchase

VISA

AID: A0000000031010
Entry Method: Chip

Batch#: [REDACTED]
04/18/16 22:01:10

Ref# [REDACTED]
Inv # [REDACTED] Appr Code: [REDACTED]

Amount: \$ 55.00
Tip: \$ 5.00

Total: \$ 60.00

Customer Copy



Diamond Limo and Taxi
2628 43 ST
EDMONTON, AB T6L 5G1

Merchant ID: 000000004838663
Term ID: 00128893
02380190017

Purchase

VISA



AID: A0000000031010

Entry Method: Chip

Batch#: 000016

04/19/16

15:45:10



Appr Code:



Amount:	\$	55.00
Tip:	\$	5.00
		=====
Total:	\$	60.00

Customer Copy

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 : Colleen Turner	Reporting Period for the Month of : Apr-16
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
29-Mar-16	Direct Billing	Airline Ticket	Attend AHS Board meeting	Marlin Travel	176.89
30-Mar-16	Direct Billing	Airline Ticket	Attend AHS Board meeting	Marlin Travel	176.89
05-Apr-16	Direct Billing	Airline Ticket	Attend ELT meeting	Marlin Travel	382.96
07-Apr-16	Direct Billing	Airline Ticket	CEO Tour	Marlin Travel	511.18
10-Apr-16	Direct Billing	Airline Ticket	Attend ELT and AH meetings	Marlin Travel	363.08
18-Apr-16	Direct Billing	Airline Ticket	Attend ELT meeting	Marlin Travel	372.38
10-May-2016	Direct Billing	Airline Ticket	Booked in advance, required to be home at a specific time. However, ELT has since been cancelled. Cancelled credit will be used later	Marlin Travel	93.13
Total Paid in the Month					\$ 2,076.51

Attend Board Mtg

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8

GST Reg#: 885101915

Branch:

Agent:

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

Invoice Number:

Date:

Page:

Our Reference:

[Redacted]

March 23, 2016

1/2

[Redacted]

INVOICE

For

COLLEEN TURNER

AC

[Redacted]

Tuesday, March 29, 2016

Air

AIR CANADA

From: CALGARY AB

To: EDMONTON INTL AB

Stops: 0 Arrival: 29Mar16

AIR CANADA E

SEAT 7D - TURNER/COLLEEN MS

Flight: 8585 W CLASS

10:10 AM Equipment: DH4

11:00 AM

Mile(s) Flown: 163

Cost:

AIR CANADA

[Redacted]

[Redacted]

139.41

37.48

Ticket Total: 176.89

Total:

Grand Total: 176.89

Less Credit Card Payments: 176.89

Credit / Balance Due To This Invoice: 0.00

Total Balance Due: 0.00

FOR YOUR RECORDS.

I HAVE BEEN OFFERED TRAVEL INSURANCE AND HAVE
ACCEPTED:.....DECLINED:.....

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: March 22, 2016
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For
MS COLLEEN TURNER
AC [REDACTED]

Wednesday, March 30, 2016

 Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 **Arrival:** 30Mar16
Flight: 8147 W CLASS
01:50 PM **Equipment:** DH4
02:40 PM **Mile(s) Flown:** 163
AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]
SEAT 8D

Cost:
AIR CANADA WE [REDACTED] [REDACTED] 139.41
Tax: 37.48
Ticket Total: 176.89

Total:
Grand Total: 176.89
Less Credit Card Payments: 176.89
Credit / Balance Due To This Invoice: 0.00
Total Balance Due: 0.00

EKI Htg

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

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

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

INVOICE

For
MS COLLEEN TURNER

Tuesday, April 5, 2016

 **Air**

AIR CANADA
From: CALGARY AB
To: EDMONTON INTL AB
Stops: 0 **Arrival:** 05Apr16
AIR CANADA E

Flight: 8130 V CLASS
07:30 AM **Equipment:** DH4
08:20 AM

Mile(s) Flown: 163

 **Air**

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 **Arrival:** 05Apr16
AIR CANADA E

Flight: 8169 V CLASS
05:00 PM **Equipment:** DH4
05:50 PM

Mile(s) Flown: 163

Cost:

TKT- [REDACTED] E-TKT [REDACTED] 308.00
Tax: [REDACTED] 74.96
Ticket Total: 382.96

Total:

Grand Total: 382.96
Less Credit Card Payments: 382.96
Credit / Balance Due To This Invoice: 0.00
Total Balance Due: 0.00

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: April 6, 2016
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For

COLLEEN TURNER
AC [REDACTED]

Thursday, April 7, 2016

 Air

AIR CANADA
From: CALGARY AB
To: GRANDE PRAIRIE
Stops: 0 Arrival: 07Apr16
AIR CANADA E
SEAT 8C - TURNER/COLLEEN MS

Flight: 8475 V CLASS
07:00 AM Equipment: D8 (300 SERIES)
08:35 AM

Mile(s) Flown: 347

Friday, April 8, 2016

 Air

AIR CANADA
From: GRANDE PRAIRIE
To: CALGARY AB
Stops: 0 Arrival: 08Apr16
AIR CANADA E
SEAT 8D - TURNER/COLLEEN MS

Flight: 8478 V CLASS
02:35 PM Equipment: DH4
03:53 PM

Mile(s) Flown: 347

Cost:

AIR CANADA W [REDACTED] 84	[REDACTED]	446.22
	Tax:	64.96
	Ticket Total:	511.18

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

Invoice Number: [REDACTED]
Date: April 6, 2016
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Total:

Grand Total:	511.18
Less Credit Card Payments:	511.18
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.

EKI and Mtg with COV

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8

GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: April 7, 2016
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For

MRS COLLEEN TURNER
AC [REDACTED]

Sunday, April 10, 2016

Air

AIR CANADA
From: CALGARY AB
To: EDMONTON INTL AB
Stops: 0 Arrival: 10Apr16

Flight: 8160 V CLASS
08:30 PM Equipment: D8 (300 SERIES)
09:23 PM

Mile(s) Flown: 163

AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]
SEAT 6C

Tuesday, April 12, 2016

Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 Arrival: 12Apr16

Flight: 8149 W CLASS
03:35 PM Equipment: DH4
04:25 PM

Mile(s) Flown: 163

AIR CANADA E
AIR CANADA CONFIRMATION [REDACTED]
TICKET NUMBER [REDACTED]
SEAT 10C

Cost:

AIR CANADA WEB	[REDACTED]	288.12
		Tax: 74.96
		Ticket Total: 363.08

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

Invoice Number: [REDACTED]
Date: April 7, 2016
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Total:

Grand Total:	363.08
Less Credit Card Payments:	363.08
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.

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: April 15, 2016
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For
COLLEEN TURNER
AC [REDACTED]

Monday, April 18, 2016

 Air

AIR CANADA
From: CALGARY AB
To: EDMONTON INTL AB
Stops: 0 Arrival: 18Apr16
AIR CANADA E

Flight: 8160 V CLASS
08:40 PM Equipment: D8 (300 SERIES)
09:33 PM

Mile(s) Flown: 163

Tuesday, April 19, 2016

 Air

AIR CANADA
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 Arrival: 19Apr16
AIR CANADA E

Flight: 8169 V CLASS
05:00 PM Equipment: DH4
05:50 PM

Mile(s) Flown: 163

Cost:
AIR CANADA WEI [REDACTED] [REDACTED] 297.42
Tax: 74.96
Ticket Total: 372.38

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

Invoice Number: [REDACTED]
Date: April 15, 2016
Page: 2/2
Our Reference: [REDACTED]

INVOICE

Total:

Grand Total:	372.38
Less Credit Card Payments:	372.38
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.

MARLIN TRAVEL
O-O PERCY HUNT TRAVELGROUP INC
MAIN FLOOR, 9929 108TH ST.
EDMONTON, AB T5K 1G8
GST Reg#: 885101915

Branch: [REDACTED]
Agent: [REDACTED]

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

Invoice Number: [REDACTED]
Date: April 11, 2016
Page: 1/2
Our Reference: [REDACTED]

INVOICE

For
COLLEEN TURNER
AC [REDACTED]

Tuesday, May 10, 2016

 Air

WESTJET AIRLINES
From: EDMONTON INTL AB
To: CALGARY AB
Stops: 0 Arrival: 10May16
WESTJET ENCO

Flight: 3397 D CLASS
02:25 PM Equipment: DH4
03:21 PM

Mile(s) Flown: 163

Cost:
TK [REDACTED] E-TKT [REDACTED] 43.65
Tax: 49.48
Ticket Total: 93.13

Total:
Grand Total: 93.13
Less Credit Card Payments: 93.13
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.....