

## AHS Board and Executive Expense Report

**Name** Dr. David Mador  
**Title** VP & Medical Director Northern Alberta  
**Location** Edmonton

Expenses submitted during the month of September 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)
Sep-16	Expense Claim	Meetings		34		55	89			
Sep-16	Direct Billing	Meetings	624				624			
<b>Total</b>			\$ 624	\$ 34	\$ -	\$ 55	\$ 713	\$ -	\$ -	\$ -

**Total for the Month** \$ 713

Maximum daily single meal expense claimed in the month \$ 24  
 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
MADOR, DAVID	VP & Medical Director Northern Alberta	Edmonton	89.30

  

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	Travel from SSP to YEG airport, return - for flight to YYC for PPEC		Mileage-Local-Home Zone	29.80			Driving to/from YEG airport, flight to YYC for PPEC	1			59
9/7/2016	All-day PPEC meeting, lunch provided	AB - Other Zones	Meals Per Diem	34.50			Flight left at 07:00, return landed at 18:00. Lunch provided Bfast = 10.50 Dinner = 24.00	1			
9/7/2016	Airport parking for flight to YYC for PPEC	AB - Local	Parking - Lot or Parkade	25.00			Airport parking for flight to YYC for PPEC	1			

  

Approver(s) for the claim	Approval Status	Approval Date
YIU, VERNA	Approve	19-Sep-16

GST# R128599776

Edmonton Airports

Can-T5J 2T2 Edmonton  
Tax Code CA5%

P2 North C 07/09/16 17:49  
Receipt [REDACTED]

Short-term parking tkt

HL - No. [REDACTED]

07/09/16 06:30

07/09/16 17:49

Period 1d0h0'

(Tax) \$25.00

Total \$25.00

Payment Received

MC [REDACTED] \$25.00

Merch: 82005340013

Auth: [REDACTED]  
Type: Swiped

Sub Total \$23.81  
Tax 5% \$1.19

8M19201A - 1/1

## 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**

<b>Name :</b> David Mador	<b>Reporting Period for the Month of :</b> Sep-16
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
26-Aug-2016	Direct Billing	Airline Ticket	outbound and return flights YEG - YYC for PPEC meeting	Marlin Travel	357.56
1-Sep-2016	Direct Billing	Airline Ticket	return part of ticket above cancelled (credit received), and rebooked	Marlin Travel	181.48
6-Sep-2016	Direct Billing	Airline Ticket	change fee and seat fee for rebooking as above	Marlin Travel	85.00
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	-
<b>Total Paid in the Month</b>					<b>\$ 624.04</b>

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

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

### For

DR DAVID MADOR  
AC [REDACTED]

Wednesday, September 7, 2016

### Air

WESTJET AIRLINES  
From: EDMONTON INTL AB  
To: CALGARY AB  
Stops: 0 Arrival: 07Sep16  
WESTJET CONFIRMATION [REDACTED]

Flight: 238 M CLASS  
06:45 AM Equipment: 73H  
07:35 AM

Mile(s) Flown: 163

### Air

AIR CANADA  
From: CALGARY AB  
To: EDMONTON INTL AB  
Stops: 0 Arrival: 07Sep16  
AIR CANADA E  
SEAT 8A - MADOR/DAVID DR  
AIR CANADA CON [REDACTED]  
TICKET NUMBER [REDACTED]

Flight: 8152 Q CLASS  
04:45 PM Equipment: D8 (300 SERIES)  
05:39 PM

Mile(s) Flown: 163

### Cost:

TKT- [REDACTED] E-TKT [REDACTED]	101.85
	Tax: 49.48
	Ticket Total: 151.33
AIR CANADA WEB [REDACTED]	168.75
	Tax: 37.48
	Ticket Total: 206.23

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:**

<b>Grand Total:</b>	357.56
<b>Less Credit Card Payments:</b>	357.56
<b>Credit / Balance Due To This Invoice:</b>	0.00
<b>Total Balance Due:</b>	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.



**Invoice**

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

Trip #: [REDACTED]  
Booking Date: 25 Nov 16  
Client: [REDACTED]  
Client Phone #: 0  
Client Email: [REDACTED]  
Agent: TIFFANY ASKE

File Locator:

**INSURANCE**

**PASSENGERS:** MR. DAVID MADOR

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	181.48	0.00	\$0.00	0.00	0.00	181.48 CAD
<b>Total:</b>	<b>181.48</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>181.48 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	11/25/2016		[REDACTED]	181.48 CAD
				Total Payment:	181.48 CAD

**Balance Due CAD Currency 0.00 CAD**

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

Trip #: [REDACTED]  
Booking Date: 25 Nov 16  
Client: [REDACTED]  
Client Phone #: 0  
Client Email: [REDACTED]  
Agent: TIFFANY ASKE

File Locator:

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
DAVID MADOR	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: DAVID MADOR

Booking Date: 07 Sep 16  
File Locator/Ticket #: [REDACTED]

From: EDMONTON INTL  
To: CALGARY INTL

Departing on: 07 Sep 16  
Returning on: 07 Sep 16





**Trip Statement**

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

Trip #: [REDACTED]  
 Booking Date: 04 Nov 16  
 Client: [REDACTED]  
 Client Phone #: 0  
 Client Email:  
 Agent: CASANDRA WAGNER

File Locator:

**INSURANCE**

**PASSENGERS:**

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES  
 ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES  
 DAVID MADOR

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	75.00	0.00	\$0.00	0.00	0.00	75.00 CAD
AIR CANADA Ticket # 2 [REDACTED]	10.00	0.00	\$0.00	0.00	0.00	10.00 CAD
<b>Total:</b>	<b>85.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>85.00 CAD</b>

**PAYMENTS**

Invoice #	Payment Date	Card Holder	Form of Payment	Amount
[REDACTED]	11/04/2016	AHS	[REDACTED]	75.00 CAD
[REDACTED]	11/04/2016	AHS	[REDACTED]	10.00 CAD
Total Payment:				85.00 CAD

**Balance Due CAD Currency 0.00 CAD**

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

Trip #: [REDACTED]  
Booking Date: 04 Nov 16  
Client: [REDACTED]  
Client Phone #: 0  
Client Email:  
Agent: CASANDRA WAGNER

File Locator:

## MY ITINERARY

Passengers	Citizenship	Required Travel Documents
	Not Specified	Not Specified
	Not Specified	Not Specified
	Not Specified	Not Specified
ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES	Not Specified	Not Specified
ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES	Not Specified	Not Specified
ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES	Not Specified	Not Specified
DAVID MADOR		

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

<b>Passengers:</b> ; ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES; DAVID MADOR	<b>Booking Date:</b> 04 Nov 16
<b>From:</b> EDMONTON INTL	<b>File Locator/Ticket #:</b> [REDACTED]
<b>To:</b> CALGARY INTL	
<b>Departing on:</b> 07 Sep 16	
<b>Returning on:</b> 07 Sep 16	



AIR

<b>Passengers:</b> ; ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES; DAVID MADOR	<b>Booking Date:</b> 04 Nov 16
<b>From:</b> EDMONTON INTL	<b>File Locator/Ticket #:</b> [REDACTED]
<b>To:</b> CALGARY INTL	
<b>Departing on:</b> 07 Sep 16	
<b>Returning on:</b> 07 Sep 16	