

AHS Board and Executive Expense Report

Name Dr. David Mador
Title VP & Medical Director Northern Alberta
Location Edmonton
 Expenses submitted during the month of March 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) |
|--------------|-----------------|----------|---------|-------|---------------|--------------|--------------|------------------------------|--|-----------|
| Mar-17 | P-Card | Meetings | | | | 10 | 10 | | 219 | 50 |
| Mar-17 | Direct Billing | Meetings | 942 | | | | 942 | | | |
| Total | | | \$ 942 | \$ - | \$ - | \$ 10 | \$ 952 | \$ - | \$ 219 | \$ 50 |

Total for the Month \$ 1,221

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.

AHS Public Disclosure P-Card

| Claimant Name | Claimant Title | Claimant Location | Expense Claim Total |
|---------------|---|-------------------|---------------------|
| MADOR, DAVID | VP & Medical Director Northern Alberta | Edmonton | \$ 279.20 |

| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance |
|--------------|---|------------------|--------------------------|-----------|---------------|-------------|--|-----------|----------------|---------------------------------|---------------|
| 2/27/2017 | Fee for Edmonton Zone Medical Staff Association Awards Dinner | AB - Local | Conference Fees | \$ 50.00 | | | Registration fee for EZMSA awards dinner | 1 | | | |
| 3/13/2017 | Catering for Full-day Triple Aim Presentations | AB - Local | Working Session | \$ 219.20 | | | | 1 | 15 | List of attendees kept on file. | |
| 3/14/2017 | Parking for Dinner meeting with Francois Belanger | AB - Local | Parking - Lot or Parkade | \$ 10.00 | | | | 1 | | | |

| Approver(s) for the claim | Approval Status | Approval Date |
|---------------------------|-----------------|---------------|
| YIU, VERNA | Approve | 28-Mar-17 |



Edmonton Zone Medical Staff Association

RECEIPT

EDMONTON ZONE MEDICAL STAFF ASSOCIATION - 2017

Dr. David Mador

RECEIPT for EZMSA Awards Dinner

\$50.00

EZMSA Executive office, 1N-100 16940 – 87 Avenue, Edmonton AB T5T 4H5 Ph : [REDACTED]
[REDACTED]

Thank you for your support

Olly Fresco`s 7th ST Plaza
1966935 Alberta Inc

#101 - 10030 - 107 ST NW South Tower

Edmonton, Alberta T5J-3E4

780-428-9696

BILL TO

[REDACTED]
[REDACTED]
[REDACTED]@ahs.ca

FOR

Alberta Health Services
on March 13, 2017
Monday , 12:00pm
SSP, North tower, 14th floor,
executive boardroom A
15 people

| Details | Price |
|----------------------------|-----------------|
| Assorted Sandwiches/ wraps | \$89.85 |
| Dessert platter | \$44.85 |
| Pop and Juice (8 +8) | \$32.00 |
| Veggie platter | \$52.50 |
| SUBTOTAL | \$219.20 |
| TAX RATE | |
| OTHER | \$0.00 |
| TOTAL | \$219.20 |

Payment can be made by credit or debit anytime before delivery.

If you have any questions concerning this invoice, use the following contact information:

[REDACTED] 7THSTPLAZA@ollyfrescos.ca

OUR RECEIPT THIS IS YOUR RECEIPT THIS IS YOUR RECEIPT THIS IS YOUR RECEIPT THIS IS YO

CITY OF EDMONTON

Terminal: 7010bb

Zone: 7010

Plate: [REDACTED]

LP - Spare

Valid through:

WEDNESDAY 15 MAR 17

1:00 AM

Amount Paid: \$10.00 (GST incl.)

Start Time: 3/14/2017 6:21 PM

Trn: [REDACTED]

Auth No: [REDACTED]

Receipt No: [REDACTED]

OUR RECEIPT THIS IS YOUR RECEIPT THIS IS YOUR RECEIPT THIS IS YOUR RECEIPT THIS IS YO

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 : David Mador | Reporting Period for the Month of : Feb-17 |
|---------------------------|---|

| DD-MMM-YYYY | Payment Method | Category | Description/Purpose of the Expense | Name of Vendor | Amount Paid |
|--------------------------------|----------------|----------------|---|----------------|------------------|
| 2-Feb-2017 | Direct Billing | Airline Ticket | one way flight from Edmonton to Calgary Feb. 9 for next day's PLC Tour and Calgary meetings | Marlin Travel | 139.15 |
| 24-Feb-2017 | Direct Billing | Airline Ticket | flight from Edmonton to Grande Prairie on WestJet March 9 for Long Service Awards banquet | Marlin Travel | 205.65 |
| 24-Feb-2017 | Direct Billing | Airline Ticket | flight home from Grande Prairie to Edmonton on Air Canada March 9 after Long Service Awards banquet | Marlin Travel | 195.28 |
| | | | | | |
| | | | | | |
| Total Paid in the Month | | | | | \$ 540.08 |

Expense Report Direct Bill Summary

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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.

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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 : David Mador | Reporting Period for the Month of : Mar-17 |
|---------------------------|---|

| DD-MMM-YYYY | Payment Method | Category | Description/Purpose of the Expense | Name of Vendor | Amount Paid |
|--------------------------------|----------------|----------------------------|---|----------------|------------------|
| 1-Mar-2017 | Direct Billing | Airline Ticket | Travel to Calgary March 21 for AHS Senior Leaders meeting | Marlin Travel | 302.31 |
| 1-Mar-2017 | Direct Billing | Airline Ticket | Fee for pre-choosing seats on Air Canada for March 21 trip | Marlin Travel | 10.50 |
| 16-Mar-2017 | Direct Billing | Airline Ticket | Travel to Calgary March 21 for AHS Senior Leaders meeting, change fee | Marlin Travel | 75.00 |
| 16-Mar-2017 | Direct Billing | Airline Ticket | Travel to Calgary March 21 for AHS Senior Leaders meeting, cost after using up credit on the account from previous ticket | Marlin Travel | 14.20 |
| | Direct Billing | Choose from Drop-down List | | Marlin Travel | - |
| Total Paid in the Month | | | | | \$ 402.01 |



Invoice

| | |
|--|---|
| ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 | Trip #: [REDACTED] Booking Date: 02 Feb 17 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED] |
|--|---|

PASSENGERS: DR DAVID MADOR

| REFERENCE/ DESCRIPTION | FARE | HST/GST | PST | OTHER TAXES | PENALTY | TOTAL |
|-----------------------------|--------------|-------------|-------------|-------------|---------------|-------------------|
| WESTJET Ticket # [REDACTED] | 39.15 | 0.00 | \$0.00 | 0.00 | 100.00 | 139.15 CAD |
| Total: | 39.15 | 0.00 | 0.00 | 0.00 | 100.00 | 139.15 CAD |

| PAYMENTS | Invoice # | Payment Date | Card Holder | Form of Payment | Amount |
|----------------|------------|--------------|-------------|-----------------|------------|
| | [REDACTED] | 02/02/2017 | | [REDACTED] | 139.15 CAD |
| Total Payment: | | | | | 139.15 CAD |

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101

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 -----
 -----WESTJET AIRLINE RULES----- TICKET IS NON REFUNDABLE CHANGES PERMITTED UP TO 2 HOURS PRIOR TO FLIGHT TIME CHANGE FEES PLUS ANY FARE INCREASE WILL APPLY TICKET MUST BE CANCELLED AT LEAST 2 HOURS PRIOR OR NO CREDIT WILL APPLY 24 HOURS IN ADVANCE GO TO WWW.WESTJET.COM TO CHECK IN AND PRINT YOUR BOARDING PASS. -----
 -----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. -----
 ----- ***** PLEASE NOTE CHECKIN TIMES ***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR TRANSBORDER FLIGHTS-CHECKIN 120 MINUTES PRIOR TRANSBORDER COUNTER WILL CLOSE 60 MINUTES PRIOR INTERNATIONAL FLIGHTS-120 MINUTES PRIOR

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

Trip #: [REDACTED]
Booking Date: 02 Feb 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

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: 02/02/2017
File Locator/Ticket #: [REDACTED]

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|---------|--------|------------------------------------|----------|-----------------------------------|-------|------|-------|
| WESTJET | 03148 | EDMONTON INTL 02/09/2017 7:25PM | | CALGARY INTL 02/09/2017 8:25PM | L | | |



Invoice

| | |
|--|---|
| ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 | Trip #: [REDACTED] Booking Date: 24 Feb 17 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED] |
|--|---|

PASSENGERS: DR DAVID MADOR

| REFERENCE/ DESCRIPTION | FARE | HST/GST | PST | OTHER TAXES | PENALTY | TOTAL |
|--------------------------------|---------------|-------------|-------------|--------------|-------------|-------------------|
| AIR CANADA Ticket # [REDACTED] | 167.80 | 0.00 | \$0.00 | 27.48 | 0.00 | 195.28 CAD |
| WESTJET Ticket # [REDACTED] | 156.17 | 0.00 | \$0.00 | 49.48 | 0.00 | 205.65 CAD |
| Total: | 323.97 | 0.00 | 0.00 | 76.96 | 0.00 | 400.93 CAD |

| PAYMENTS | Invoice # | Payment Date | Card Holder | Form of Payment | Amount |
|-----------------------|------------|--------------|-------------|-----------------|-------------------|
| | [REDACTED] | 02/24/2017 | [REDACTED] | [REDACTED] | 195.28 CAD |
| | [REDACTED] | 02/24/2017 | [REDACTED] | [REDACTED] | 205.65 CAD |
| | [REDACTED] | 02/24/2017 | [REDACTED] | [REDACTED] | 0.00 CAD |
| Total Payment: | | | | | 400.93 CAD |

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT PCARD

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 -----
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GOVERNMENT CENTRE
 MAIN FLOOR, 9929- 108TH ST, EDMONTON, AB T5K1G8
 Tél.: 780 425 8611
 GST REG# 88510191

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

Trip #: [REDACTED]
Booking Date: 24 Feb 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

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: 02/24/2017

File Locator/Ticket #: [REDACTED]

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|---------|--------|------------------------------------|----------|-------------------------------------|-------|------|-------|
| WESTJET | 03143 | EDMONTON INTL 03/09/2017 1:44PM | | GRANDE PRAIRIE 03/09/2017 2:51PM | M | | |



AIR

Passengers: DAVID MADOR

Booking Date: 02/24/2017

File Locator/Ticket #: [REDACTED]

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|------------|--------|-------------------------------------|----------|-------------------------------------|-------|------|-------|
| AIR CANADA | 08364 | GRANDE PRAIRIE 03/10/2017 9:25AM | | EDMONTON INTL 03/10/2017 10:33AM | G | | |



Invoice

| | |
|--|---|
| ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 | Trip #: [REDACTED] Booking Date: 01 Mar 17 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED] |
|--|---|

PASSENGERS: DR DAVID MADOR

| REFERENCE/ DESCRIPTION | FARE | HST/GST | PST | OTHER TAXES | PENALTY | TOTAL |
|--|---------------|-------------|-------------|--------------|-------------|-------------------|
| AIR CANADA Ticket # [REDACTED] | 227.35 | 0.00 | \$0.00 | 74.96 | 0.00 | 302.31 CAD |
| PRE PAID SEATS CAD Confirmation # [REDACTED] | 10.50 | 0.00 | \$0.00 | 0.00 | 0.00 | 10.50 CAD |
| Total: | 237.85 | 0.00 | 0.00 | 74.96 | 0.00 | 312.81 CAD |

| PAYMENTS | Invoice # | Payment Date | Card Holder | Form of Payment | Amount |
|----------|------------|--------------|-------------------------|-----------------|------------|
| | [REDACTED] | 03/01/2017 | | [REDACTED] | 302.31 CAD |
| | [REDACTED] | 03/01/2017 | ALBERTA HEALTH SERVICES | [REDACTED] | 10.50 CAD |
| | | | | Total Payment: | 312.81 CAD |

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL SNIOR LEADERS MEETING

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 -----
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 ***** PLEASE NOTE CHECKIN TIMES ***** **DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR **DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR

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

Trip #: [REDACTED]
Booking Date: 01 Mar 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

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: 03/01/2017

File Locator/Ticket #: [REDACTED]

From: EDMONTON INTL
To: CALGARY INTL

Departing on: 03/21/2017
Returning on: 03/21/2017



AIR

Passengers: DAVID MADOR

Booking Date: 03/01/2017

File Locator/Ticket #: [REDACTED]

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|------------|--------|-------------------|----------|-------------------|-------|------|-------|
| AIR CANADA | 08133 | EDMONTON INTL | | CALGARY INTL | A | | |
| | | 03/21/2017 7:20AM | | 03/21/2017 8:19AM | | | |
| AIR CANADA | 08225 | CALGARY INTL | | EDMONTON INTL | V | | |
| | | 03/21/2017 6:00PM | | 03/21/2017 6:52PM | | | |



Invoice

| | |
|--|---|
| ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4 | Trip #: [REDACTED] Booking Date: 16 Mar 17 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED] |
|--|---|

PASSENGERS: DR DAVID MADOR

| REFERENCE/ DESCRIPTION | FARE | HST/GST | PST | OTHER TAXES | PENALTY | TOTAL |
|--|--------------|-------------|-------------|-------------|-------------|------------------|
| AIR CANADA ONLINE Confirmation # [REDACTED] | 75.00 | 0.00 | \$0.00 | 0.00 | 0.00 | 75.00 CAD |
| AIR CANADA ONLINE Confirmation # [REDACTED] | 14.20 | 0.00 | \$0.00 | 0.00 | 0.00 | 14.20 CAD |
| Total: | 89.20 | 0.00 | 0.00 | 0.00 | 0.00 | 89.20 CAD |

| PAYMENTS | Invoice # | Payment Date | Card Holder | Form of Payment | Amount |
|----------------|------------|--------------|-------------|-----------------|-----------|
| | [REDACTED] | 03/16/2017 | | [REDACTED] | 75.00 CAD |
| | [REDACTED] | 03/16/2017 | | [REDACTED] | 14.20 CAD |
| Total Payment: | | | | | 89.20 CAD |

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL SNIOR LEADERS MEETING

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

Trip #: [REDACTED]
Booking Date: 16 Mar 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

MY ITINERARY

| | | |
|----------------------------------|-------------------------------------|---|
| Passengers DAVID MADOR | Citizenship Not Specified | Required Travel Documents 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: 03/01/2017 |
| | File Locator/Ticket #: [REDACTED] |

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|------------|--------|-------------------|----------|-------------------|-------|------|-------|
| AIR CANADA | 08133 | EDMONTON INTL | | CALGARY INTL | A | | |
| | | 03/21/2017 7:20AM | | 03/21/2017 8:19AM | | | |

| | |
|--------------------------------|--|
| Passengers: DAVID MADOR | Booking Date: 03/01/2017 |
| | File Locator/Ticket #: [REDACTED] |

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|------------|--------|-------------------|----------|-------------------|-------|------|-------|
| AIR CANADA | 08133 | EDMONTON INTL | | CALGARY INTL | A | | |
| | | 03/21/2017 7:20AM | | 03/21/2017 8:19AM | | | |

| | |
|--------------------------------|--|
| Passengers: DAVID MADOR | Booking Date: 03/01/2017 |
| | File Locator/Ticket #: [REDACTED] |

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|------------|--------|-------------------|----------|-------------------|-------|------|-------|
| AIR CANADA | 08154 | CALGARY INTL | | EDMONTON INTL | Q | | |
| | | 03/21/2017 5:00PM | | 03/21/2017 5:52PM | | | |

| | |
|--------------------------------|--|
| Passengers: DAVID MADOR | Booking Date: 03/01/2017 |
| | File Locator/Ticket #: [REDACTED] |

| Airline | Flight | From | Terminal | To | Class | Seat | Stops |
|------------|--------|-------------------|----------|-------------------|-------|------|-------|
| AIR CANADA | 08154 | CALGARY INTL | | EDMONTON INTL | Q | | |
| | | 03/21/2017 5:00PM | | 03/21/2017 5:52PM | | | |