

AHS Board and Executive Expense Report

Name Dr. Gerry Predy
Title Senior Medical Officer of Health & Senior Medical Director
Location Edmonton
 Expenses submitted during the month of April 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) |
|--------------|-----------------|----------|---------|-------|---------------|--------------|--------------|------------------------------|----------------------------------------------|-----------|
| Apr-17 | Expense Claim | Meetings | | | | 55 | 55 | 1,000 | | |
| Total | | | \$ - | \$ - | \$ - | \$ 55 | \$ 55 | \$ 1,000 | \$ - | \$ - |

Total for the Month \$ 1,055

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 Expense Claims

| Claimant Name | Claimant Title | Claimant Location | Expense Claim Total |
|-----------------|------------------------------------------------------------|-------------------|---------------------|
| PREDY, GERALD N | Senior Medical Officer of Health & Senior Medical Director | Edmonton | \$ 54.75 |

| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance |
|--------------|----------------------------------------------------------------------------------------------------------|------------------|---------------------------------------|----------|------------------|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|------------------|---------------|
| 4/4/2017 | Travel to University Terrace for candidate interview for the Academic position in Public Health | | Mileage-Local-Home Zone | \$ 7.07 | Coronation Plaza | 2-51 University Terrace | Travel from Coronation Plaza to 2-51 University Terrace and return for candidate interview for the Academic position in Public Health. | 1 | | | 14 |
| 4/10/2017 | Travel to University Terrace & return for candidate interview for the Academic position in Public Health | | Mileage-Local-Home Zone | \$ 7.07 | Coronation Plaza | 2-51 University Terrace | Return travel from Coronation Plaza to University Terrace for candidate interview for the Academic position in Public Health | 1 | | | 14 |
| 4/11/2017 | Travel to Seventh Street Plaza to attend APPHC Meeting | | Mileage-Local-Home Zone | \$ 8.08 | Coronation Plaza | Seventh Street Plaza | Return trip from Coronation Plaza to Seventh Street Plaza to attend APPHC Meeting. | 1 | | | 16 |
| 4/11/2017 | Parking to attend APPHC Meeting at Seventh Street Plaza | AB - Local | Parking - Lot or Parkade-Service Rcpt | \$ 30.00 | | | Parking to attend APPHC Meeting at Seventh Street Plaza | 1 | | | |
| 4/12/2017 | Travel to DoubleTree by Hilton West Edmonton to attend Alberta Opioid Crisis Response Planning Summit | | Mileage-Local-Home Zone | \$ 2.53 | Coronation Plaza | DoubleTree by Hilton West Edmonton 16615-109 Ave | Travel from Coronation plaza to DoubleTree by Hilton West Edmonton (16615 - 109Ave) to attend Alberta Opioid Crisis Response Planning Summit. | 1 | | | 5 |

| Approver(s) for the claim | Approval Status | Approval Date |
|---------------------------|-----------------|---------------|
| BELANGER, FRANCOIS | Approve | 10-Jul-17 |

Gerry Preedy
Employee # [REDACTED]

RECEIPT
Impark Lot 256

License Plate Number

[REDACTED]

Expiration Date/Time

06:00 PM
APR 11, 2017

Purchase Date/Time: 07:48am Apr 11, 2017
Total Parking: \$28.57
Total GST: \$1.43
Total Due: \$30.00 Rate: \$30 - All Day
Total Paid: \$30.00 Payment Type: Card
Ticket [REDACTED]
S/N # [REDACTED]
Setting: Lot 256
Mach Name: Meter 1

[REDACTED] American Express Auth #: [REDACTED]
gst #887315636RT0006
NO IN AND OUT PRIVILEGES

PARKING RECEIPT
PARKING RECEIPT
PARKING RECEIPT
PARKING RECEIPT

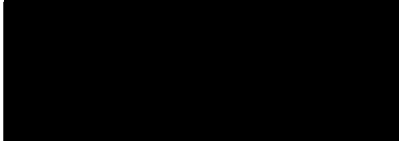
AHS Public Disclosure Expense Claims

| Claimant Name | Claimant Title | Claimant Location | Expense Claim Total | | | | | | | | |
|---------------------------|------------------------------------------------------------|-------------------|---------------------|-------------|---------------|-------------|--------------------------------------------------------------------------------------------|-----------|----------------|------------------|---------------|
| PREDY, GERALD N | Senior Medical Officer of Health & Senior Medical Director | Edmonton | \$ 1,000.00 | | | | | | | | |
| Expense Date | Business reason | Expense Location | Expense Type | Amount | From Location | To Location | Justification | # of days | # of Attendees | Attendee Name(s) | Trip Distance |
| 4/25/2017 | Professional Association fee for 2017 | AB - Local | Membership Dues | \$ 1,000.00 | | | The Canadian Medical Protective Association Membership Fee for 2017. (Jan 1 - Dec 31 2017) | 1 | | | |
| Approver(s) for the claim | | Approval Status | Approval Date | | | | | | | | |
| BELANGER, FRANCOIS | | Approve | 3-May-17 | | | | | | | | |

Membership Update

Date: 03/07/2017

Dr Gerald Predy



Member Number:



Protection Information* for the period of January 2017 through December 2017.

| From (mm/dd/yyyy) | To (mm/dd/yyyy) | Code | Province Of Work |
|----------------------|--------------------|------|---------------------|
| 01/01/2017 | 12/31/2017 | 28 | AB |

*Membership Fees are based on the above protection information

The information below reflects all codes and provinces we have on file for your membership. If the current Type of Work and Province of Work information is not accurate, please contact the CMPA so that we may update your record.

| All Type of Work Codes | | |
|------------------------|--------------------|------|
| From (mm/dd/yyyy) | To (mm/dd/yyyy) | Code |
| 01/01/2017 | ----- | 28 |

| All Provinces of Work | | |
|-----------------------|--------------------|-----|
| From (mm/dd/yyyy) | To (mm/dd/yyyy) | POW |
| 01/01/2017 | ----- | AB |

Membership Fees 2504.00
less MLR reimbursement 1000.00
from AMN

TOTAL Claimed 1504.00

IMPORTANT REMINDER: Please ensure personal information is used and protected in accordance with applicable privacy legislation.



The Canadian Medical Protective Association

P.O. Box 8225, Station T, Ottawa ON K1G 3H7 | T 613-725-2000, 1-800-267-6522 | F 613-725-1300, 1-877-763-1300 www.cmpa-acpm.ca

Gerry Predy

From: noreply@albertadoctors.org
Sent: Tuesday, April 25, 2017 1:40 PM
To: Gerry Predy
Subject: AMA - Notification of MLR Direct Deposit (EFT)

Notification of MLR Direct Deposit (EFT)

Claimant: GERALD NICHOLAS PREDY

Claim #: [REDACTED]

Payment Amount: \$1,004.00

Deposit Date: 2017-APR-26

Claim Details:

Medical Liability Reimbursement

Year: 2017

Payment for: PREDY, GERALD NICHOLAS

Total paid to CMPA to date: \$2,004.00

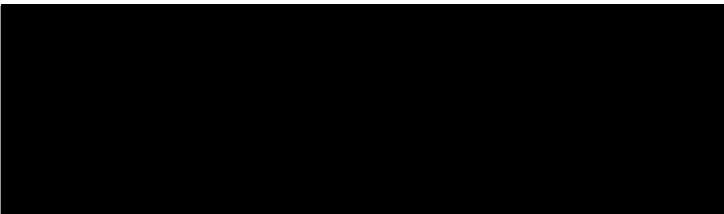
Total deductible to date (prorated): -\$1,000.00

Total ineligible amount: \$.00

Total reimbursed to date: \$.00

Total Payment: \$1,004.00

Comments Legend



Membership and Benefits Administrator

Executive Office

Alberta Medical Association

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Edmonton, AB T5N 3Z1

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