

AHS Board and Executive Expense Report

Name Gregory Cummings
Title Chief Zone Officer, North Zone
Location Westlock

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	P-Card	Meetings			838	410	1,248			
Feb-17	Direct Billing	Meetings	846				846			
Total			\$ 846	\$ -	\$ 838	\$ 410	\$ 2,094	\$ -	\$ -	\$ -

Total for the Month \$ 2,094

Maximum daily single meal expense claimed in the month \$ -
 Maximum daily base hotel rate claimed in the month \$ 140
 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
CUMMINGS, GREGORY	Chief Zone Officer, North Zone	Westlock	\$ 1,247.74

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
1/24/2017	Early Morning Flight to High Level for Meetings	AB - North Zone	Accommodations	\$ 124.79				1			
1/25/2017	Meetings in La Crete and Fort Vermilion	AB - Other Zones	Parking - Lot or Parkade	\$ 50.00				1			
1/25/2017	Meetings in La Crete and Fort Vermilion	AB - North Zone	Accommodations	\$ 155.68				1			
1/26/2017	Meetings in La Crete and Fort Vermilion	AB - North Zone	Car Rental	\$ (56.80)				1			
1/26/2017	Meetings in La Crete and Fort Vermilion	AB - North Zone	Car Rental	\$ 359.10				1			
1/27/2017	PCN Workshop in Edmonton	AB - North Zone	Accommodations	\$ 144.82				1			
2/7/2017	Meeting with Staff and HR in Grande Prairie	AB - North Zone	Accommodations	\$ 148.25				1			
2/7/2017	Meeting with Staff and HR in Grande Prairie	AB - Other Zones	Parking - Lot or Parkade	\$ 50.00				1			
2/7/2017	Meeting with Staff and HR in Grande Prairie	AB - North Zone	Parking - Lot or Parkade	\$ 7.50				1			
2/9/2017	Meeting with Mayor and Site Tour	AB - North Zone	Accommodations	\$ 145.59				1			
2/10/2017	Bighorn PCN Meeting in Hinton	AB - North Zone	Accommodations	\$ 118.81				1			

Approver(s) for the claim	Approval Status	Approval Date
GORDON, DEBORAH A	Approve	3-Mar-17

①



01-24-17

Greg Cummings	Folio No. :	Room No. :
	A/R Number :	Arrival : 01-23-17
	Group Code :	Departure : 01-24-17
	Company : Alberta Health Services	Conf. No. :
	Membership No. :	Rate Code : IGCOR
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
01-23-17	*Accommodation	114.49	
01-23-17	G.S.T.	5.72	
01-23-17	Tourism Levy	4.58	
01-24-17	Manual - MasterCard		124.79
Total		124.79	124.79
Balance		0.00	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

8

GST# R128599776 GP
Edmonton Airports

Can-T5J 2T2 Edmonton
Tax Code CA5%

Exit Lane 07/02/17 20:06
Receipt [REDACTED]

Short-Term Parking
Mastercard
Daily Lot
06/02/17 15:15
07/02/17 20:06
Period 2d0h0'
(Tax) \$50.00

Total \$50.00

Payment Received
MC [REDACTED] \$50.00

Merch: [REDACTED]
Auth: [REDACTED]
Type: Swiped

Sub Total \$47.62
Tax 5% \$2.38

00413127 - 1/1

2

GST# R128599776
Edmonton Airports

Can-T5J 2T2 Edmonton
Tax Code CA5%

Exit Lane 25/01/17 16:48
Receipt [REDACTED]

Short-Term Parking
Mastercard
Daily Lot
24/01/17 09:00
25/01/17 16:48
Period 2d0h0'
(Tax) \$50.00

Total \$50.00

Payment Received
MC [REDACTED] \$50.00

Merch: [REDACTED]
Auth: [REDACTED]
Type: Swiped

Sub Total \$47.62
Tax 5% \$2.38

07AC499E - 1/1

9

RECEIPT

QE II Parking
Grande Prairie, Alberta

License Plate Number
[REDACTED]

Expiration Date/Time

07:52 AM
FEB 08, 2017

Purchase Date/Time: 07:52am Feb 07, 2017
Total Due: \$7.50 Rate: \$7.50-Daily-24 hrs
Total Paid: \$7.50 Payment Type: Card
Ticket #: [REDACTED]
S/N #: [REDACTED]
Setting: QE II Hospital
Mach Name: [REDACTED]

[REDACTED] MasterCard

Auth # [REDACTED]

Parking Rates are
GST Exempt

PARKING RECEIPT
PARKING RECEIPT
PARKING RECEIPT
PARKING RECEIPT



(780) 821-1000
INFO@BESTWESTERNHIGHLEVEL.COM
WWW.BESTWESTERNHIGHLEVEL.COM

TERM ID: [REDACTED] BATCH: [REDACTED]
EMPLOYEE: [REDACTED] STAFF ID: [REDACTED]

Completion

INVT: 000001520
REAR: [REDACTED]

Application Label: MasterCard

Total: CAD\$ 155.68

APPROVED: [REDACTED]
000-00
25-Jan-17 02:38:25

CUSTOMER COPY

Diamond

Room # [REDACTED]

Conf # [REDACTED]
Arrival 01/24/17
Departure 01/25/17

Room Type [REDACTED]
Guests 1 / 0

Payment Acct Visa/Master

Posting Date	Oper	AcctCode	Description	From	Reference	Amount
01/24/17	LR	[REDACTED]	ROOM CHRG REVENUE			\$139.00
01/24/17	LR	[REDACTED]	TOURISM LEVY			\$5.56
01/24/17	LR	[REDACTED]	GST			\$6.95
01/24/17	LR	[REDACTED]	Tourism Improvement Fee			\$4.17
01/25/17	LR	[REDACTED]	PAYMENT MC			\$155.68-
Balance Due						\$0.00

THE UNDERSIGNED GUEST AGREES TO PAY THE AMOUNT INDICATED ON THE BALANCE DUE PORTION OF THIS INVOICE. IF THE CHARGES ARE TO BE BILLED TO A THIRD PARTY, THE UNDERSIGNED AGREES TO BE PERSONALLY LIABLE FOR PAYMENT THE CHARGES IN THE EVENT THAT THE INDICATED THIRD PARTY, PERSON, COMPANY OR ASSOCIATION FAILS TO PAY FOR ANY PART OR THE FULL AMOUNT OF SUCH CHARGES.

EACH UNREGISTERED PERSON OR PET IN THE ROOM HAS A PENALTY OF \$250.00

SMOKING IN NON-SMOKING ROOMS IS STRICTLY PROHIBITED, VIOLATORS WILL BE CHARGED \$250.00

G.S.T.# RT881518518

EACH BEST WESTERN™ BRANDED HOTEL IS INDEPENDENTLY OWNED AND OPERATED

Signature

344



unit 37
Suburban

RENTAL AGREEMENT NUMBER



RECEIPT

YOUR INFORMATION

Customer Name : CUMMINGS, GREGORY, MR
Methods Of Payment : MASTER
Travel Partner Num :

YOUR VEHICLE INFORMATION

Budget Car Num :
Plate Number :
Veh Grp Charged : Full-Size
Veh Grp Rented : Full-Size SUV-8 Pass
Veh Description : GLD CHEVROLET SUBURBAN
Total Driven : 350 KMS Odometer In: 82180 KMS
Fuel Gauge Reading:

YOUR RENTAL

Pickup Date/Time : JAN 24, 2017@12:00 PM
Pickup Location : AIRPORT ROAD
HIGH LEVEL, AB, T0H 1Z0, CA

Return Date/Time : JAN 26, 2017@12:23 PM
Return Location : AIRPORT ROAD
HIGH LEVEL, AB, T0H 1Z0, CA

YOUR VEHICLE CHARGES:

MIN	1 DAY	MAX	30 DAY	
	RATE CHART		TIME AND MILEAGE	
KMs :	.35		350 KM@	.35= 122.50
HRLY :	17.51			
DAILY :	53.05		2DY@	53.05= 106.10
WKLY. :	318.30			
MNTLY :				
Time & Mileage:				228.60
TAXABLE FEES				
VEH LIC FEE		+		3.70
Subtotal Charges:				232.30
NON TAXABLE ITEMS				
Fuel service charge		+		70.00
Your Total Charges Paid:				302.30
Prepayment :				.00
NET CHARGES:			CAD	302.30
Your Total Due:				0.00
Fuel service:	.3623/KM		2.500/Lit	

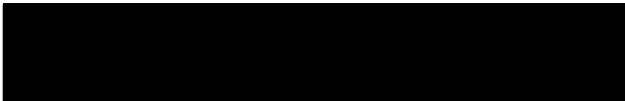
YOUR OPTIONAL PRODUCTS/SERVICES

Jan 27, 2017
 ← 126.80 - 58.80 → Refund amount.
 Paid 359.10 yesterday
 So Refunded - overcharge
 of fuel service charge.
 70.00
 Fuel service
 chg

-----NOTICES-----BUDGET-----NOTICES-----BUDGET-----NOTICES-----BUDGET-----NOTICES

I agree to the rental charges above. I acknowledge additional charges could be added based on tolls, tickets, fines administrative charges and other fees which may be applicable. X _____
Thank you for renting with Budget.

If you have questions regarding this rental, call us at 780-926-3114
This vehicle was rented to you by 73824 This vehicle was checked in for you by 77777



Email: MARCH 1, 2017

J2015



unit 37
Suburban

RENTAL AGREEMENT NUMBER [REDACTED]

RECEIPT

YOUR INFORMATION

Customer Name : CUMMINGS, GREGORY, MR
Methods Of Payment : MASTER [REDACTED]
Travel Partner Num : [REDACTED]

YOUR VEHICLE INFORMATION

Budget Car Num : [REDACTED]
Plate Number : [REDACTED]
Veh Grp Charged : Full-Size
Veh Grp Rented : Full-Size SUV-8 Pass
Veh Description : GLD CHEVROLET SUBURBAN
Total Driven : 350 KMS Odometer In: 82180 KMS
Fuel Gauge Reading:

YOUR RENTAL

Pickup Date/Time : JAN 24, 2017@12:00 PM
Pickup Location : AIRPORT ROAD
HIGH LEVEL, AB, T0H 1Z0, CA

Return Date/Time : JAN 26, 2017@12:23 PM
Return Location : AIRPORT ROAD
HIGH LEVEL, AB, T0H 1Z0, CA

YOUR VEHICLE CHARGES:

YOUR OPTIONAL PRODUCTS/SERVICES

MIN	1 DAY	MAX	30 DAY		
RATE CHART			TIME AND MILEAGE		
Kms :	.35		350 KME	.35=	122.50
HRLY :	17.51				
DAILY:	53.05		2DY@	53.05=	106.10
WKLY.:	318.30				
MNTLY:					
Time & Mileage:					229.60
TAXABLE FEES					
VEH LIC FEE				+	3.70
Subtotal Charges:					232.30
NON TAXABLE ITEMS					
Fuel service charge				+	126.80
Your Total Charges Paid:					359.10
Prepayment :					.00
NET CHARGES:				CAD	359.10
Your Total Due:					0.00
Fuel service:	.3623/KM		2.500/Lit		

-----NOTICES-----BUDGET-----NOTICES-----BUDGET-----NOTICES-----BUDGET-----NOTICES

I agree to the rental charges above. I acknowledge additional charges could be added based on tolls, tickets, fines administrative charges and other fees which may be applicable. X _____
Thank you for renting with Budget.

If you have questions regarding this rental, call us at 780-926-3114
This vehicle was rented to you by 73824 This vehicle was checked in for you by 77777

J2016

6



*Holiday Inn
& Suites*

Greg Cummings
[Redacted]

Group Code
Folio/Invoice No. /
Reference #

Room No. [Redacted]
Arrival 01-25-17
Departure 01-26-17

Page No. 1 of 1
Cashier No. [Redacted]
User ID [Redacted]

Date	Description	Charges	Credits
01-25-17	*Accommodation	129.00	
01-25-17	GST	6.45	
01-25-17	Tourism Levy 4%	5.16	
01-25-17	Destination Marketing 3%	3.87	
01-25-17	GST on DMF	0.19	
01-25-17	Tourism Levy on DMF	0.15	
01-26-17	MasterCard		144.82

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Total	144.82	144.82
Balance	0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill 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. If a credit card charge. I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Hotel & Suites® West Edmonton
11330-170th Street
Edmonton Alberta T5S 2X1
Telephone: (780) 444-3110 Fax: (780) 444-3188
G.S.T.# 806941001RT0001



Holiday Inn
& Suites

02-07-17

Greg Cummings [Redacted]	Folio No. :	Room No. :
	A/R Number :	Arrival : 02-06-17
	Group Code :	Departure : 02-07-17
	Company : Government Canada	Conf. No. : [Redacted]
	Membership No. : [Redacted]	Rate Code : IMCGV
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
02-06-17	*Accommodation	134.00	
02-06-17	Sustainability Levy	2.01	
02-06-17	GST Tax - Room	6.80	
02-06-17	Tourism Tax - Room	5.44	
02-07-17	MasterCard		148.25
Total		148.25	148.25
Balance		0.00	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Guest Signature: _____

I have received the goods and / or services in the amount shown herein. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



02-09-17

Greg Cummings	Folio No. :	Room No. :	[REDACTED]
[REDACTED]	A/R Number :	Arrival :	02-08-17
	Group Code :	Departure :	02-09-17
	Company :	Conf. No. :	[REDACTED]
	Membership No. :	Rate Code :	IPHQS
	Invoice No. :	Page No. :	1 of 1

Date	Description	Charges	Credits
02-08-17	*Accommodation	139.99	
02-08-17	AHT Tax - Room	5.60	
Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews . We look forward to welcoming you back soon.		Total	145.59
		Balance	145.59

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express Hotel & Suites-Edson
4520 2nd Ave.
Edson, AB T7E 1C3
Telephone: (780) 723-4011 Fax: (780) 723-4447
GST 878160969



Holiday Inn

129

02-10-17

Greg Cummings [Redacted]	Folio No.	[Redacted]	Room No. :	[Redacted]
	A/R Number	:	Arrival	: 02-09-17
	Group Code	:	Departure	: 02-10-17
	Company	: Alberta Health Services	Conf. No.	: [Redacted]
	Membership No.	: [Redacted]	Rate Code	: ILLYG
	Invoice No.	:	Page No.	: 1 of 1

Date	Description	Charges	Credits
02-09-17	*Accommodation	109.00	
02-09-17	Tourism Levy	4.36	
02-09-17	GST	5.45	
02-10-17	MasterCard [Redacted]		118.81
Total		118.81	118.81
Balance		0.00	

Thank you for staying with us! Qualifying points for this stay will automatically be credited to your account. Please tell us about your stay by writing a review here - www.ihg.com/reviews. We look forward to welcoming you back soon.

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

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 : Gregory Cummings	Reporting Period for the Month of : Feb-17
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
24-Jan-2017	Direct Billing	Airline Ticket	March 1st flight to Grande Prairie for SOD Interviews (Air Canada Ticket # [REDACTED])	Marlin Travel	290.96
3-Feb-2017	Direct Billing	Airline Ticket	February 6 flight to Grande Prairie for HR meeting (Air Canada Ticket # [REDACTED])	Marlin Travel	485.11
7-Feb-2017	Direct Billing	Car Rental	February 6 Travel within Grande Prairie for HR meeting.	Other	70.33
Total Paid in the Month					\$ 846.40

From: [Air Canada](#)
To: [REDACTED]
Subject: Air Canada - MR GREGORY CUMMINGS - 28-Feb/YEG-YQU (booking ref [REDACTED] - Itinerary-Receipt
Date: Tuesday, January 24, 2017 11:22:17 AM

***** PLEASE DO NOT REPLY TO THIS E-MAIL *****



Itinerary-Receipt

Your booking is confirmed. Please print/retain this page for your financial records (for taxation, expense claim or credit card reconciliation purposes). We thank you for choosing Air Canada and look forward to welcoming you on board.

[Scan this barcode to check in at any Air Canada check in kiosk.](#)



Booking Date: **Jan 24, 2017** Passengers **MR GREGORY CUMMINGS**
 Agent Name: **CARL**
 Agency ID: [REDACTED]



[Purchase a travel option](#) Purchase On My Way travel assistance.

Booking Information

Booking Reference [REDACTED]	Customer Care
Electronic Ticketing confirmed. This is your official itinerary/receipt.	Air Canada 1-888-335-4189*
Main Contact Marlin Travel [REDACTED] 01 780 4258611	Flight Arrivals and Departures 1-888-422-7533
Online Services <ul style="list-style-type: none"> Select Seats Manage My Booking (change, cancel, upgrade). Alert me of flight status changes directly to my mobile phone or email. Flight Arrivals & Departures check online if my flight is on time. Check-in online and print my boarding pass. <p style="text-align: right;">* Can my booking be changed online?</p>	*For use from phones in Canada, the continental USA, Hawaii and Alaska.

Flight Itinerary

Flight	From	To	Stops	Duration	Aircraft	Fare Type
1 AC8367	Edmonton Intl (YEG) Tue 28-Feb 2017 17:05	Grande Prairie (YQU) Tue 28-Feb 2017 18:22	0	1hr17	DH3	<u>Tango</u> A
Flight AC8367 is operated by Air Canada Express - Jazz . Please check in directly at the Air Canada Express - Jazz . Certain smaller carriers conduct airport operations through the ticketing counters of larger airlines.						
1 AC8368	Grande Prairie (YQU) Wed 01-Mar 2017 19:00	Edmonton Intl (YEG) Wed 01-Mar 2017 20:08	0	1hr08	DH3	<u>Tango</u> L
Flight AC8368 is operated by Air Canada Express - Jazz . Please check in directly at the Air Canada Express - Jazz . Certain smaller carriers conduct airport operations through the ticketing counters of larger airlines.						

Passenger Information

1: MR GREGORY CUMMINGS : Adult (16+), Ticket Number: [REDACTED]			
Frequent Flyer Pgm :	None	Meal Preference :	None
Payment Card :	[REDACTED]	Special Needs :	None
Seat Selection :	None		

Purchase Summary

Corporate Rewards Account

Fare Summary

Passenger Type	Adult
Departing Flight - Tango	93.00
Returning Flight - Tango	109.00
Surcharges	24.00
Sub Total	226.00

Taxes, Fees and Charges

Canada Airport Improvement Fee	50.00
Air Travellers Security Charge (ATSC)	14.96
Canada Goods and Services Tax (GST/HST #10009-2287 RT0001)	0.00
Total airfare and taxes (per passenger)	290.96
Number Of Passengers	1
Total	290.96

Grand Total - Canadian Dollar (CAD) **\$290.96**

Payment Information

The following charges (tax inclusive) will appear on your MasterCard card [REDACTED] statement:

- Air Canada: **\$290.96** (Airfare per Adult ticket)

Ticket number [REDACTED]

Fare Rules

Departing Flight Edmonton (YEG) To Grande Prairie (YQU) - Tango

- **Changes:**
 - Prior to day of departure - **Change fee** per direction, per passenger, is \$100 CAD plus applicable taxes and any additional fare difference. **Changes** can be made up to 2 hours prior to departure.
 - **Airport same-day changes** are subject to availability and are permitted only for same-day flights at a fee of \$150 CAD per direction, per passenger.
 - **Same-day standby** is available **only** to passengers travelling between Toronto Pearson (YYZ) and LaGuardia (LGA), John F. Kennedy (JFK) and Newark (EWR) airports.
 - Flights can only be used in sequence from the place of departure specified on the itinerary.
- **Cancellations:**
 - Tickets are **non-refundable** and **non-transferable**.
 - **Cancellations** can be made up to 45 minutes prior to departure.
 - Provided the original booking is cancelled prior to the original flight departure, the value of the unused ticket can be applied within a one year period from date of issue of the original tickets to the value of a new ticket subject to the change fee per direction, per passenger, plus applicable taxes and any additional fare difference, subject to availability and advance purchase requirements. The new outbound travel date must commence within a one year period from the original date of ticket issuance. If the fare for the new journey is lower, any residual amount will be forfeited.



Invoice

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	Trip #: [REDACTED] Booking Date: 06 Feb 17 Client: [REDACTED] Agent: [REDACTED] File Locator: [REDACTED]
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PASSENGERS: MR GREGORY CUMMINGS

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	420.15	0.00	\$0.00	64.96	0.00	485.11 CAD
Total:	420.15	0.00	0.00	64.96	0.00	485.11 CAD

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	02/03/2017			0.00 CAD
	[REDACTED]	02/03/2017		[REDACTED]	485.11 CAD
				Total Payment:	485.11 CAD

Balance Due CAD Currency 0.00 CAD

Total GST 0.00 Total HST \$0.00

CORPORATE UNIT 101
REASON FOR TRAVEL GRANDE PRAIRIE SITE VISITS

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 -----
 -----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

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

Trip #: [REDACTED]
Booking Date: 06 Feb 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]

MY ITINERARY

Passengers	Citizenship	Required Travel Documents
GREGORY CUMMINGS	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

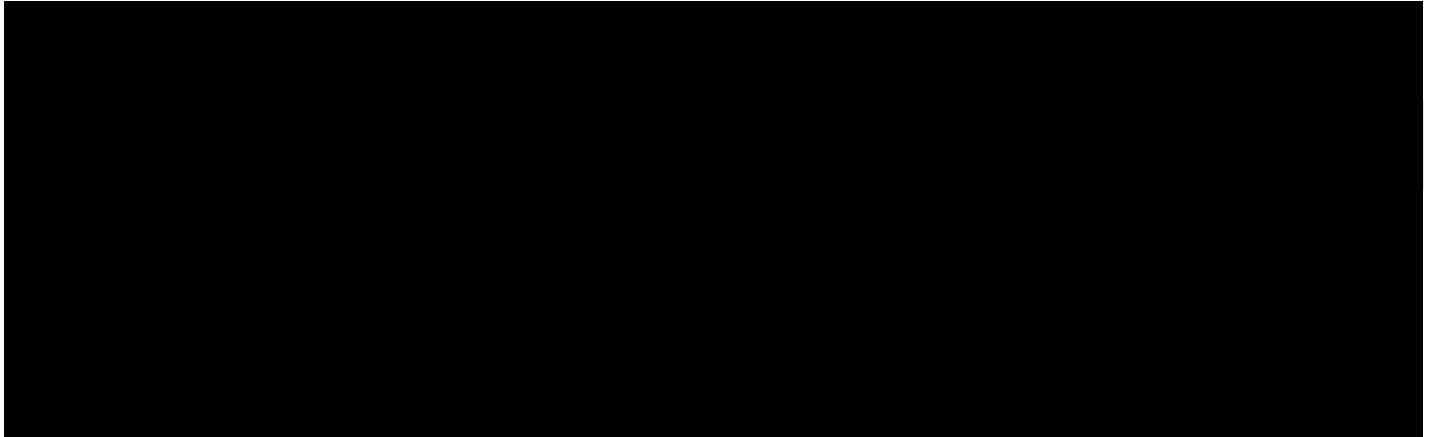
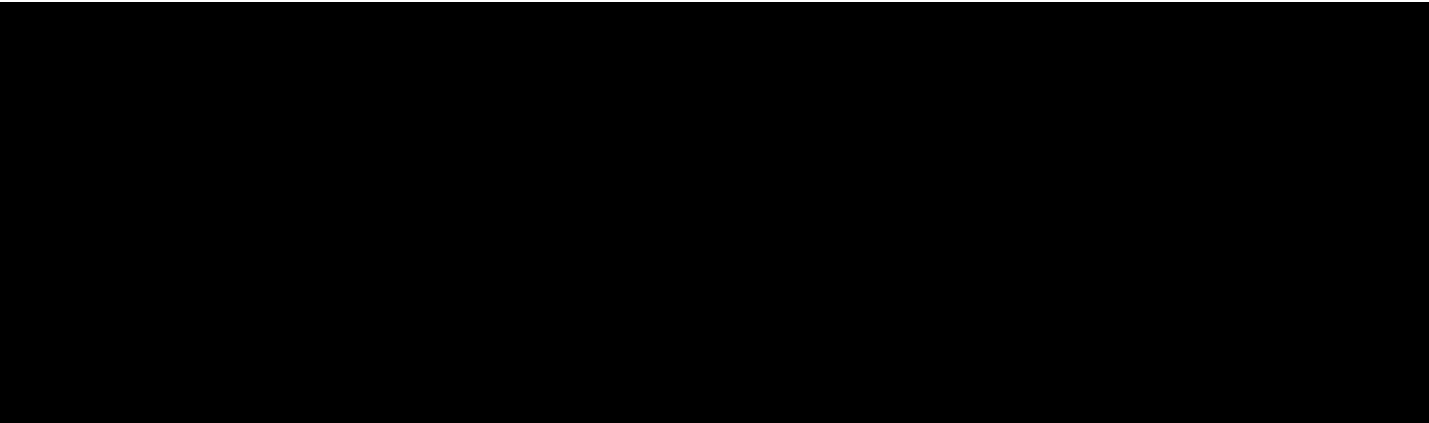


AIR

Passengers: GREGORY CUMMINGS

Booking Date: 03 Feb 17
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08367	EDMONTON INTL 06 Feb 17 5:05PM		GRANDE PRAIRIE 06 Feb 17 6:22PM	V/	



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

Trip #: [REDACTED]
Booking Date: 06 Feb 17
Client: [REDACTED]
Agent: [REDACTED]

File Locator: [REDACTED]



AIR

Passengers: GREGORY CUMMINGS

Booking Date: 03 Feb 17
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08368	GRANDE PRAIRIE 07 Feb 17 7:00PM		EDMONTON INTL 07 Feb 17 8:08PM	V/	

ENTERPRISE RENT A CAR, 10610 AIRPORT DRIVE, GRANDE PRAIRIE, AB T8V7Z5 (780) 830-1930

RENTAL AGREEMENT REF#

RENTER
CUMMINGS, GREGORY PAUL

DATE & TIME OUT
06/02/2017 06:55 PM
DATE & TIME IN
07/02/2017 06:08 PM

BILLING CYCLE
24-HOUR

CAR CLASS CHARGED
ICAR

VEH #1 2016
VIN#
LIC#
KM DRIVEN 35
CAR CLASS: ICAR

BILL TO ACCOUNT
ALBERTA HEALTH SERVICES
ATTN: UNKNOWN
PO BOX 1600
EDMONTON, AB T5T2N9

CLAIM INFO

INSURED:

SUMMARY OF CHARGES

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	06/02 - 07/02	1	DAY	\$57.00	\$57.00
REFUELING CHARGE	06/02 - 07/02				\$0.00
Subtotal:					\$57.00

Taxes & Surcharges					
CONCESSION FEE RECOVERY	06/02 - 07/02			16.28%	\$9.38
GOODS AND SERVICES TAX	06/02 - 07/02			5%	\$3.35
VEHICLE LICENSE FEE RECOVERY	06/02 - 07/02	1	DAY	\$0.60	\$0.60
Total Charges:					\$70.33

Bill-To / Deposits					
ALBERTA HEALTH SERVICES					
TIME & DISTANCE	06/02 - 07/02	1	DAY		
REFUELING CHARGE	06/02 - 07/02				
CONCESSION FEE RECOVERY	06/02 - 07/02	1	PERCENT	16.28%	
GOODS AND SERVICES TAX	06/02 - 07/02	1	PERCENT	5%	
VEHICLE LICENSE FEE RECOVERY	06/02 - 07/02	1	DAY		
Subtotal:					-\$70.33

Total Estimated Amount Due \$0.00

PAYMENT INFORMATION
AMOUNT PAID TYPE

CREDIT CARD NUMBER

*Rental vehicle
GP hospital
and M H interviews
with HR*