

AHS Board and Executive Expense Report

Name Dr. Jack Regehr
Title Zone Medical Director South Zone
Location Chinook

Expenses submitted during the month of June 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)
Jun-17	P-Card	Meetings				222	222			
Jun-17	Expense Claim	Meetings		26			26			
Jun-17	Direct Billing	Meetings	1,359				1,359			
Total			\$ 1,359	\$ 26	\$ -	\$ 222	\$ 1,607	\$ -	\$ -	\$ -

Total for the Month \$ 1,607

Maximum daily single meal expense claimed in the month \$ 13
 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								
REGEHR, JACK	ZMD, South Zone	Chinook	\$ 127.56								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
2/1/2017	Fuel - Attend PPEC - Calgary	AB - Other Zones	Fuel	\$ 64.31	Lethbridge	Calgary		1			
2/2/2017	Cab Fare -CMO Meeting Edmonton	AB - Other Zones	Taxi	\$ 63.25	Edmonton Airport	U of A Hospital		1			
Approver(s) for the claim		Approval Status	Approval Date								
BELANGER, FRANCOIS		Approve	7-Jul-17								

PETRO-CANADA
4701 1ST. W
CLARESHOLM
Alber-ta TOL 070

GST: 0119335453 (403) 625-4221
2017-02-01 PGO: 98851:3898001 17:04
TERMINAL: [REDACTED] OPER: A
PAYPOINT: [REDACTED]

ITEM	(L)	(\$/L)	(\$)
ump 2			
Regular	61.892	1.039	64.31*
Total Owed			64.31

TOTAL PAID
EDIT CARD \$ 64.31

*TAXES INCL. #1-
GST TOTAL \$ 3.06

MASTERCARD [REDACTED]
INV. 039371 AUTH. [REDACTED]
Purchase
0010751010 00 027

VERIFIED BY PIN

-- IMPORTANT --
Retain this Copy For Your Records

CUSTOMER COPY

Survey! Earn Points
& chance to win gas
petro-canada.ca/hero

Handwritten notes:
APPS
help
call
PREP

4608 101 ST.
(7808907070)
EDMONTON AB

CARD [REDACTED]
CARD TYPE MASTERCARD
DATE 2017/02/02
TIME 0067 08:30:30
INVOICE # [REDACTED]
RECEIPT NUMBER [REDACTED]

PURCHASE
AMOUNT \$55.00
TIP \$8.25
TOTAL

\$63.25

MasterCard

APPROVED

AUTH# [REDACTED]
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS
COPY FOR YOUR RECORDS

Handwritten notes:
APPS
OMG
meeting

AHS Public Disclosure P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
REGEHR, JACK	ZMD, South Zone	Chinook	94.91									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
5/23/2017	Meetings - ZMD Site Visit and PCN Meetings	AB - Local	Fuel	\$ 36.59	Lethbridge	Medicine Hat		1				
6/6/2017	Mtgs - Brooks, Medicine Hat	AB - Local	Fuel	\$ 58.32	Lethbridge to Brooks	Medicine Hat		1				
Approver(s) for the claim		Approval Status	Approval Date									
BELANGER, FRANCOIS		Approve	7-Jul-17									

BLUE GOOSE
 Magrath AB
 403-758-3322
 G.S.T# 106091820
 Transaction #: [REDACTED]

Pump: 3 REGULAR
 Hose 1

Credit

Volume V 36.992

@ Price 0.989

Total \$ 36.59

Time: 22:51
 Date: 05/23/2017

***** Thank You *****

1202 Magrath Dr
 Lethbridge AB T1K 2R2
 (403) 329-1555

Merch ID: 576664
 Ref ID: 112

Sale
 [REDACTED] AHS
 [REDACTED] Method: Chip
 05/23/17 21:59:46

Inv #: [REDACTED] Appr Code: [REDACTED]
 Approved Batch#: [REDACTED]
 Total: 36.59

By using a verified cardholder agrees to pay total in accordance with issuer's agreement with cardholder. Merchant agreement is credit cardholder's responsibility.
 Return this card for statement.

1202 Magrath Dr
 Lethbridge AB T1K 2R2
 (403) 329-1555

Merchant ID

Soft
Brook Mod Hut Soft
 Major Magrath Mohawk
 1202 Major Magrath Dr
 Lethbridge AB T1K 2R2
 (403) 329-1555
 GST# 123820839 Merchant ID: 4970786
 CQPY
 Receipt [REDACTED]
 Type: SALE
Mod Hut Soft
Mod Hut Soft
 06/06/2017

Qty Name	Price	Total
1 87 GAS	\$ 1.024	\$ 58.32

Pump: 4
 Litres: 56.956
 Price / Litre: \$ 1.024

Subtotal \$ 58.32
 GST / HST Fuel \$ 2.78
 Total \$ 58.32
 Pre Auth Completion \$ 58.32

MasterCard
 06/06/2017 22:46:11
 425571EK 71 RESP:000 ISO:00

Approved

AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
REGEHR, JACK	ZMD, South Zone	Chinook	\$ 26.00									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
6/6/2017	ZMD Weekly Site Visit	AB - Local	Meals Per Diem	\$ 13.00			Lunch \$13.00	1				
6/26/2017	ZMD Weekly Site Visit	AB - Local	Meals Per Diem	\$ 13.00			Lunch \$13.00	1				
Approver(s) for the claim		Approval Status	Approval Date									
BELANGER, FRANCOIS		Approve	7-Jul-17									

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 : Dr. Jack Regehr	Reporting Period for the Month of : Jun-17
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
27-Apr-2017	Direct Billing	Airline Ticket	Integra Air - Flight to Edmonton for Sr. Leaders Meeting	Marlin Travel	679.60
1-May-2017	Direct Billing	Airline Ticket	Integra Air - Flight to Edmonton for PPEC	Marlin Travel	679.60
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
	Direct Billing	Choose from Drop-down List		Marlin Travel	-
Total Paid in the Month					\$ 1,359.20

PPEC

From: res@integraair.com
Sent: Monday, May 01, 2017 2:45 PM
To: [REDACTED]
Subject: Your Ticketless Itinerary - Integra Air REGEHR, JACK
Importance: High

Passenger Itinerary for REGEHR, JACK

Please print/retain this page for your records. Thank you for choosing Integra Air.

Itinerary
www.integraair.com



Customer Care
Toll Free 1-877-213-8359
Local 403-381-UFLY (8359)

Booking Information - Booking Reference/Locator#: [REDACTED]
- Booked On: 05/01/2017 14:45

Passenger

Name: REGEHR, JACK

Phone #: [REDACTED]

Contact

Name: MARLIN TRAVEL_ GOVERNMENT CENTRE GSTEX

Form of Payment: MASTERCARD

Rationale for flight exceeding the \$600.00 policy limit is that Integra Air has limited flights on specific days of the week. There is no other cheaper options

Flight Information

FLIGHT	FROM	TO	DEPART	ARRIVE	STATUS
918	Lethbridge (YQL)	Edmonton (YEG)	06/07/2017 06:45	08:00	CONFIRMED
829	Edmonton (YEG)	Lethbridge (YQL)	06/07/2017 18:05	19:20	CONFIRMED

Notes

Fare Summary

Fare	\$546.36
Taxes, Fees and Charges	
Nav Canada Surcharge	\$24.00
Security Fee	\$14.24
Other Charges	\$95.00
Subtotal	\$679.60
GST(100411966RG0001)	\$0.00
Total - CAD	\$679.60
Balance Due	\$0.00

Terms and Condition

General

From: res@integraair.com
Sent: Thursday, April 27, 2017 5:10 PM
To: [REDACTED]
Subject: Your Ticketless Itinerary - Integra Air REGEHR, JACK
Importance: High

Passenger Itinerary for REGEHR, JACK

Please print/retain this page for your records. Thank you for choosing Integra Air.

Itinerary
www.integraair.com



Customer Care
Toll Free 1-877-213-8359
Local 403-381-UFLY (8359)

Booking Information - Booking Reference/Locator# [REDACTED]
- Booked On: 04/27/2017 17:10

Passenger

Name: REGEHR, JACK

Phone #: [REDACTED]

Contact

Name: MARLIN TRAVEL_ GOVERNMENT CENTRE GSTEX

Form of Payment: MASTERCARD

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