

## AHS Board and Executive Expense Report

**Name** Nancy Guebert  
**Title** Chief Program Officer Cancer Control Alberta (Interim)  
**Location** Calgary  
 Expenses submitted during the month of December 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)
Dec-16	P-Card	Meetings			555	694	1,249			
Dec-16	Direct Billing	Meetings	369				369			
<b>Total</b>			\$ 369	\$ -	\$ 555	\$ 694	\$ 1,618	\$ -	\$ -	\$ -

**Total for the Month**      \$      1,618

Maximum daily single meal expense claimed in the month      \$      -  
 Maximum daily base hotel rate claimed in the month              \$      166  
 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.

**Instruction:**

- Attached ALL original detailed receipts and supporting documents in the same order as it appears on this statement
- Cardholder AND Approver's signatures required where indicated below

GUEBERT, NANCY Cardholder's Name	CHIEF PROGRAM OFFICER Cardholder's Position/Title	Billing Reporting Period:	20/12/2016
CANCER CONTROL ALBERTA Cardholder's Dept	TOM BAKER CANCER CENTRE Cardholder's Site/Location	Total Statement Amount:	\$1,248.53
NANCY.GUEBERT@ALBERTAHEALTHSERVICES.CA Cardholder's e-mail address		Last 6 digits of the P-Card #: <span style="background-color: black; color: black;">XXXXXXXXXX</span>	

**Statement of Transactions**

Transaction Date	Trans ID	Merchant Name & Description	Trans Original Amount	Currency	Trans Amount	GST	Freight	Description
17/11/2016		THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	58.70	CAD	① 58.70	2.80	00	Parking at YYC Airport Nov 16-17 to attend Edm mtgs: CBCP Process Maps, Cell imaging facility, CCA ED and CCOC mtgs
23/11/2016		PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	75.90	CAD	② 75.90	3.61		Transportation from YEG Airport to SunLife Plaza for Nov 16-17 mtgs
23/11/2016		WESTIN (WESTIN HOTELS), WESTIN HOTELS	186.37	CAD	③ 186.37	8.87	00	Accommodations Nov 16th to attend Edmonton mtgs: CBCP Process Maps, Cell imaging Facility, CCA Ed and CCOC Mtgs
24/11/2016		PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	74.75	CAD	④ 74.75	3.56		Transportation from Cross Cancer Institute to YEG Airport post Nov 16-17 mtgs
24/11/2016		THE CALGARY AIRPORT AU, AUTOMOBILE PARKING LOTS AND	58.70	CAD	⑤ 58.70	2.80	00	Parking at YYC Airport during Nov 24th mtgs in YEG: Action Plan 2020 Quality Launch, CCA/ACF monthly mtg, 1:1CCA Dyad Leads
29/11/2016		HPARK, AUTOMOBILE PARKING LOTS AND GARAGES	6.00	CAD	⑥ 6.00	.29		Parking at Holy Cross to speak at New Calgary Cancer Centre Project staff information session
02/12/2016		PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	75.90	CAD	⑦ 75.90	3.61		Transportation from YEG Airport to Alberta Health offices to attend meeting with Alberta Health
02/12/2016		PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	75.90	CAD	⑧ 75.90	3.61		Transportation from SunLife Plaza to YEG Airport post meetings with Alberta Health and other CCA Lead mtg (Provincial Practices)
02/12/2016		CALGARY AIRPORT PAY O, AUTOMOBILE PARKING LOTS AND GARAGES	29.35	CAD	⑨ 29.35	1.40	00	Parking at YYC Airport Dec 2nd to attend YEG Mtgs: Alberta Health and other CCA Lead mtg (Provincial Practices)
12/12/2016		PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	74.75	CAD	⑩ 74.75	3.56		Transport from YEG Airport to CCI Dec 12 mtgs: ERC Transition; 2:1 T.Bensiton/Nancy/Matt; Interviews for PAC C
12/12/2016		WESTIN (WESTIN HOTELS), WESTIN HOTELS	368.26	CAD	⑪ 368.26	17.54	00	Accommodations to attend Dec 12-14th Edm mtgs and SunLife Long Service Awards
14/12/2016		PRESTIGE TRANSPORTATIO, LIMOUSINES AND TAXICABS	75.90	CAD	⑫ 75.90	3.61		Transport from SSP to YEG Airport post Dec 12-14th mtgs
14/12/2016		CALGARY AIRPORT PAY O, AUTOMOBILE PARKING LOTS AND GARAGES	88.05	CAD	⑬ 88.05	4.19	00	Parking at YYC Airport Dec 12-14th to attend Edm mtgs and SunLife Long Service Awards

Signatures	
<p><b>Cardholder Designate (if Applicable)</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I hereby certify that I have reviewed and reconciled this statement in BMO Online to the best of my ability in accordance to AHS Corporate Policies, Program User Guide and Training. I have allocated the transaction(s) to the proper cost centre.</li> </ul> <p><u>SELENE SNELL</u> Name of Cardholder Designate</p> <p><u>[Signature]</u> Signature of Cardholder Designate</p>	<p><u>Exec Admin Coord.</u> Cardholder Designate Position/Title</p> <p><u>Dec. 22/2016</u> Date of Signature</p>
<p><b>Cardholder</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by me or on my behalf from Alberta Health Services or any other Organization. A personal cheque for any personal expenses inadvertently charged is attached.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul> <p><u>GUEBERT, NANCY</u> Name of Cardholder</p> <p><u>[Signature]</u> Signature of Cardholder</p>	<p><u>CHIEF PROGRAM OFFICER</u> Cardholder Position/Title</p> <p><u>Dec 23, 2016</u> Date of Signature</p>
<p><b>Approver Designate (if Applicable)</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul> <p><u>RUTH HOLLAND-RICHARDSON</u> Name of Approver Designate</p> <p><u>[Signature]</u> Signature of Approver Designate</p>	<p><u>EXECUTIVE ASSISTANT</u> Approver Designate Position/Title</p> <p><u>Dec 23, 2016</u> Date of Signature</p>
<p><b>Approver</b> By signing this statement</p> <ul style="list-style-type: none"> <li>• I attest that I have read and understand the "Travel, Hospitality and Working Session Expense Policy (1122)" of Alberta Health Services and confirm expenses being claimed are in compliance with such policy.</li> <li>• I attest the expenses enclosed in this claim are for valid business purposes for Alberta Health Services and that this claim has not been previously claimed by the claimant or on their behalf from Alberta Health Services or any other Organization. A personal cheque for personal expenses inadvertently charged has been obtained.</li> <li>• I attest that expenses submitted in this claim have been incurred by using a cost effective method, otherwise rationale and supporting analysis is provided.</li> </ul> <p><u>DR. F. BELANGER</u> Name of Approver</p> <p><u>[Signature]</u> Signature of Approver</p>	<p><u>VP QUALITY &amp; CMO</u> Approver Position/Title</p> <p>_____ Date of Signature</p>
<b>Submit approved statement with attachments to Accounts Payable:</b>	
<p><b>Attach:</b></p> <ul style="list-style-type: none"> <li>• Original (or scanned) itemized receipts with documented business reasons including names of participants where required</li> <li>• Signed Cardholder Statement Report (or copies of electronic signatures if signatures are not on report) And where applicable:</li> <li>• Copies of pre-approvals for travel</li> <li>• Personal cheque payable to "Alberta Health Services"</li> <li>• Return, refund and/or credit receipts</li> <li>• Disputes letter</li> <li>• Business reasons for travel require detailed descriptions – include where travelled to, who attended (if meal), why travel was necessary and detailed explanation of reason</li> </ul>	<p><b>Address:</b></p> <p>Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton, AB T5J 3E4</p>
<b>Accounts Payable only:</b>	
Reference # _____	Reviewed by: _____
Date: _____	



Parking@YYC Airport  
Nov. 16/17 to attend Edmonton  
Mtg: CBCP Process Maps, Cell Imaging,  
CCA Ed & CCOG

Transport to SunLife Plaza  
from YYC Airport to attend  
Nov. 16th mtgs.

Transport from CC 1  
to YYC Airport Nov 17th mtgs:  
CCA Ed & CCOG Mtgs.

**RECEIPT**  
GST NO. R122556194

①

TKT NO: [REDACTED]  
POF: [REDACTED]  
IN: 11/16/16 07:26  
OUT: 11/17/16 19:25  
PAID: \$ 58.70  
DURATION: 1 11: 59  
(GST INCLUDED)

MASTERCARD  
[REDACTED]

YOU HAVE 10 MIN.  
TO EXIT

*Pcard*



*Pcard*  
PRESTIGE TRANSPORTATION

②

10135 31 AVE NW  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2016/11/23  
TIME 0588 19:42:35  
INVOICE # [REDACTED]

PURCHASE  
AMOUNT \$66.00  
TIP \$9.90  
TOTAL  
**\$75.90**

MasterCard



**APPROVED**

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

PRESTIGE 780.463.5000  
GOPRESTIGE.CA  
GST 862184769

*Pcard*  
PRESTIGE TRANSPORTATION

④

10135 31 AVE NW  
EDMONTON AB

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2016/11/24  
TIME 0920 16:39:26  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

PURCHASE  
AMOUNT \$65.00  
TIP \$9.75  
TOTAL  
**\$74.75**

MasterCard



**APPROVED**

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

PRESTIGE 780.463.5000  
GOPRESTIGE.CA  
GST 862184769

**RECEIPT**  
GST NO. R122556194

⑤

TKT NO: [REDACTED]  
POF: [REDACTED]  
IN: 11/23/16 16:21  
OUT: 11/24/16 19:21  
PAID: \$ 58.70  
DURATION: 1 03: 00  
(GST INCLUDED)

MASTERCARD  
[REDACTED]

YOU HAVE 10 MIN.  
TO EXIT



Parking@YYC Airport Nov 23-24 to attend Edm mtgs:  
Action Plan 2020 Quality Launch, CCA/ACF Lead mtg,  
1:1 CCA Lead Dyad Mtg (Matt/Alancy)

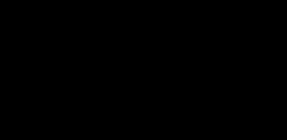


#3) Accommodations Nov. 16<sup>th</sup> to attend Nov 16 & 17<sup>th</sup> mtgs:  
CBCP Process Maps, Cell Imaging Facility, CCA ED & CCOC Mtgs.

The Westin Edmonton  
10135 100 St  
Edmonton, AB T5J 0N7  
Canada  
Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert



Page Number : 1 Invoice Nbr : [Redacted]  
Guest Number : [Redacted]  
Folio ID : A  
Arrive Date : 23-NOV-16 19:47  
Depart Date : 24-NOV-16 07:37  
No. Of Guest : 1  
Room Number : [Redacted]  
Club Account : [Redacted]

Tax Invoice

Tax ID : 815461330RT0001

The Westin Edmonton 24-NOV-16 07:40 [Redacted]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
23-NOV-16	[Redacted]	Room Charge	166.00	
23-NOV-16	[Redacted]	GST	8.55	
23-NOV-16	[Redacted]	Destination Marketing Fee	4.98	
23-NOV-16	[Redacted]	Tourism Levy	6.84	
24-NOV-16	[Redacted]	Mastercard-[Redacted]		-186.37
		** Total	186.37	-186.37
		*** Balance	0.00	

FIND CLARITY, BOOST HAPPINESS - Like a gym membership for your mind, Headspace gives you simple tools to feel happier, work smarter and sleep better. Get some Headspace at [westin.com/headspace](http://westin.com/headspace)

As a Starwood Preferred Guest you have earned at least [Redacted] Starpoints for this visit [Redacted]

Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

Continued on the next page

The Westin Edmonton  
 10135 100 St  
 Edmonton, AB T5J 0N7  
 Canada  
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert  
 [Redacted]

Page Number : 2 Invoice Nbr : [Redacted]  
 Guest Number : [Redacted]  
 Folio ID : A  
 Arrive Date : 23-NOV-16 19:47  
 Depart Date : 24-NOV-16 07:37  
 No. Of Guest : 1  
 Room Number : [Redacted]  
 Club Account : [Redacted]

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
11-23-2016	166.00	8.55	6.84	0.00	0.00	4.98	186.37	0.00
11-24-2016	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-186.37
	-----	-----	-----	-----	-----	-----	-----	-----
Total	166.00	8.55	6.84	0.00	0.00	4.98	186.37	-186.37

Parking at Holy Cross to speak  
at New Calgary Cancer Project  
Staff Information Session

Rec'd  
NCCP  
RECEIPT - Holy Cross

(6)



Expiration Date/Time

02:52 PM  
NOV 29, 2016

Purchase Date/Time: 01:22pm Nov 29, 2016  
Total Due: \$6.00 Rate: 1 HR 30 MIN  
Total Paid: \$6.00 Payment Type: Card  
Ticket # [Redacted]  
S/N #: [Redacted]  
Setting: Holy Cross  
Mach Name: Holy Cross West

MasterCard  
H\*ARK: 403-828-7337

RECEIPT  
GST NO. R122556194

(9)

TKT NO: [Redacted]  
POF: [Redacted]  
IN: 12/02/16 05:13  
OUT: 12/02/16 16:23  
PAID: \$ 29.35  
DURATION: 0 11: 10  
(GST INCLUDED)

MASTERCARD

YOU HAVE 10 MIN.  
TO EXIT

Rec'd



Transport from YYC Airport to  
Alberta Health office to meet  
w/ Alberta Health

Rec'd

(7)

PRESTIGE TRANSPORTATION  
10135 31 AVE NW  
EDMONTON AB

CARD [Redacted]  
CARD TYPE MASTERCARD  
DATE 2016/12/02  
TIME 0957 08:24:27  
INVOICE # [Redacted]  
RECEIPT NUMBER [Redacted]

PURCHASE AMOUNT \$66.00  
TIP \$9.90  
TOTAL

\$75.90

MasterCard



APPROVED

AUTH# [Redacted]  
THANK YOU

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PRESTIGE 780.463.5000  
GOPRESTIGE.CA  
GST 862184769

Parking @ YYC Airport Dec 2nd  
to attend mtgs w/ Alberta Health  
& CCA Provincial Practices Dyad Mtgs.

Transport from Sunbte  
to YYC Airport post Alberta  
Health & CCA Provincial  
Practices Dyad Mtgs.

Rec'd

(8)

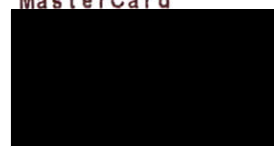
PRESTIGE TRANSPORTATION  
10135 31 AVE NW  
EDMONTON AB

CARD [Redacted]  
CARD TYPE MASTERCARD  
DATE 2016/12/02  
TIME 0156 14:00:17  
INVOICE # [Redacted]  
RECEIPT NUMBER [Redacted]

PURCHASE AMOUNT \$66.00  
TIP \$9.90  
TOTAL

\$75.90

MasterCard



APPROVED

AUTH# [Redacted]  
THANK YOU

CARDHOLDER COPY

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PRESTIGE 780.463.5000  
GOPRESTIGE.CA  
GST 862184769



Transport from YYG Airport to CCI  
Dec 12 mtg: ERC Transition;  
2:1 T. Beniston/Matt/Nancy; Interviews for  
PAEC Reps

Transport from CCI Dec 12<sup>th</sup> - Dec 14<sup>th</sup>  
mtg to YYG Airport.

*Card*  
PRESTIGE TRANSPORTATION  
10135 31 AVE NW  
EDMONTON AB  
CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2016/12/12  
TIME 5512 08:18:01  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

*Card*  
PRESTIGE TRANSPORTATION  
10135 31 AVE NW  
EDMONTON AB  
CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2016/12/14  
TIME 0520 16:11:35  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

RECEIPT  
GST NO. R122556194  
*Card*  
⑬ TKT NO: [REDACTED]  
POF: [REDACTED]  
IN: 12/12/16 05:05  
OUT: 12/14/16 19:27  
PAID: \$ 88.05  
DURATION: 2 14: 22  
(GST INCLUDED)

PURCHASE  
AMOUNT \$65.00  
TIP \$9.75  
TOTAL  
**\$74.75**

PURCHASE  
AMOUNT \$66.00  
TIP \$9.90  
TOTAL  
**\$75.90**

MASTERCARD  
[REDACTED]  
YOU HAVE 10 MIN.  
TO EXIT

MasterCard  
[REDACTED]

MasterCard  
[REDACTED]

APPROVED  
AUTH# [REDACTED]  
THANK YOU

APPROVED  
AUTH# [REDACTED]  
THANK YOU

*Parking @ yyc Airport  
Dec 12-14<sup>th</sup> mtg:  
ERC Transition; 2:1 T. Beniston  
Matt/Nancy; Interviews for  
PAEC Reps; COEC; Sunlife  
Long Service Awards.*

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IMPORTANT - RETAIN THIS  
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IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

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GOPRESTIGE.CA  
GST 862184769

PRESTIGE 780.463.5000  
GOPRESTIGE.CA  
GST 862184769



#11 Accommodations Dec 12-14th mtgs:  
 ERC Transitions; 2:1 T. Beniston/Matt/Nancy; Interviews  
 for PAC-C Reqs; 1:1 Donna/Matt/Nancy; ACF Report Discussion;  
 Community Oncology Dyad Mtg; Sunlife Long Service Awards,  
 COEE.

The Westin Edmonton  
 10135 100 St  
 Edmonton, AB T5J 0N7  
 Canada  
 Tel: 780-426-3636 Fax: 780-428-1454

**WESTIN**<sup>®</sup>  
 HOTELS & RESORTS

Nancy Guebert  
 Alberta Health Services li

Page Number : 1 Invoice Nbr : [REDACTED]  
 Guest Number : [REDACTED]  
 Folio ID : A  
 Arrive Date : 12-DEC-16 18:33  
 Depart Date : 14-DEC-16 11:29  
 No. Of Guest : 1  
 Room Number : [REDACTED]  
 Club Account : [REDACTED]

Copy Tax Invoice

Tax ID : 815461330RT0001  
 The Westin Edmonton DEC-14-2016 11:40 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
12-DEC-16	[REDACTED]	Room Charge	164.00	
12-DEC-16	[REDACTED]	GST	8.45	
12-DEC-16	[REDACTED]	Destination Marketing Fee	4.92	
12-DEC-16	[REDACTED]	Tourism Levy	6.76	
13-DEC-16	[REDACTED]	Room Charge	164.00	
13-DEC-16	[REDACTED]	GST	8.45	
13-DEC-16	[REDACTED]	Destination Marketing Fee	4.92	
13-DEC-16	[REDACTED]	Tourism Levy	6.76	
14-DEC-16	[REDACTED]	Mastercard [REDACTED]		-368.26
		** Total	368.26	-368.26
		** Balance	0.00	

PACK LIGHT, STAY FIT - With the Westin Gear Lending program, New Balance(TM) workout gear is conveniently delivered to your room so you can keep moving. Experience it during your next stay. Learn more at [westin.com/newbalance](http://westin.com/newbalance)

Continued on the next page

The Westin Edmonton  
 10135 100 St  
 Edmonton, AB T5J 0N7  
 Canada  
 Tel: 780-426-3636 Fax: 780-428-1454



Nancy Guebert  
 Alberta Health Services li  
 [Redacted]

Page Number : 2 Invoice Nbr : [Redacted]  
 Guest Number : [Redacted]  
 Folio ID : A  
 Arrive Date : 12-DEC-16 18:33  
 Depart Date : 14-DEC-16 11:29  
 No. Of Guest : 1  
 Room Number : [Redacted]  
 Club Account : [Redacted]

As a Starwood Preferred Guest you have earned at least [Redacted] Starpoints for this visit [Redacted]

Tell us about your stay. [www.westin.com/reviews](http://www.westin.com/reviews)

EXPENSE SUMMARY REPORT

Currency: CAD

Date	Room	GST	Tour Levy	Food/Bev	Phone	Other	Total	Payment
12-12-2016	164.00	8.45	6.76	0.00	0.00	4.92	184.13	0.00
12-13-2016	164.00	8.45	6.76	0.00	0.00	4.92	184.13	0.00
12-14-2016	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-368.26
	-----	-----	-----	-----	-----	-----	-----	-----
Total	328.00	16.90	13.52	0.00	0.00	9.84	368.26	-368.26



## 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: NO

<b>Name :</b> Nancy Guebert	<b>Reporting Period for the Month of :</b> Nov 21 - Dec 20 2016
-----------------------------	-----------------------------------------------------------------

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
01-Dec-16	Direct Billing	Airline Ticket	Attend Edmonton Meetings: Jan 5-6 2017 CCI Town Hall; 2:1 Donna Rose; 1:1 Matt/Nancy; ACF & CCA Monthly; CCA/SCN DYAD meeting	Marlin Travel	368.75
					-
<b>Total Paid in the Month</b>					<b>\$ 368.75</b>



**Invoice**

ALBERTA HEALTH SERVICES ALBERTA HEALTH SERVICES 10030 - 107 STREET EDMONTON AB T5J 3E4	<b>Trip #:</b> [REDACTED] <b>Booking Date:</b> 01 Dec 16 <b>Client:</b> [REDACTED] <b>Client Phone #</b> <b>Client Email:</b> [REDACTED] <b>Agent:</b> MEA MOORE  <b>File Locator:</b> [REDACTED]
----------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**PASSENGERS:** MS NANCY GUEBERT

**INSURANCE**

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	293.80	0.00	\$0.00	74.96	0.00	368.76 CAD
<b>Total:</b>	<b>293.80</b>	<b>0.00</b>	<b>0.00</b>	<b>74.96</b>	<b>0.00</b>	<b>368.76 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	12/01/2016		[REDACTED]	368.76 CAD
<b>Total Payment:</b>					<b>368.76 CAD</b>

**Balance Due CAD Currency 0.00 CAD**

CORPORATE UNIT 101  
REASON FOR TRAVEL CCI AND SCN DYAD 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  
 \*\*\*\*\* FOR AIR TRAVEL TO A FOREIGN COUNTRY PASSENGERS MUST ENSURE THAT THEY HAVE ALL NECESSARY TRAVEL DOCUMENTS SUCH AS A PASSPORT OR VISA AS DIRECTED BY EMBASSIES AND CONSULATES. ALL PASSENGERS ARE ADVISED TO VIEW  
[HTTP://WWW.AIRCANADA.COM/EN/TRAVELINFO/BEFORE/TRAVELDOC.HTML](http://www.aircanada.com/en/travelinfo/before/travel.doc.html) FOR IMPORTANT INFORMATION ON IDENTIFICATION REQUIRED FOR TRAVEL. \*\*\*\*\*  
 \*\*\*\*\*PLEASE NOTE CHECKIN TIMES\*\*\*\*\*  
 \*\*DOMESTIC FLIGHTS--CHECKIN 90 MINUTES PRIOR \*\*DOMESTIC COUNTER WILL CLOSE 45 MINUTES PRIOR -----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.

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

Trip #: [REDACTED]  
Booking Date: 01 Dec 16  
Client: [REDACTED]  
Client Phone #: [REDACTED]  
Client Email: [REDACTED]  
Agent: MEA MOORE

File Locator: [REDACTED]

### MY ITINERARY

Passengers	Citizenship	Required Travel Documents
NANCY GUEBERT	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: NANCY GUEBERT

Booking Date: 01 Dec 16  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08130	CALGARY INTL 05 Jan 17 6:45AM		EDMONTON INTL 05 Jan 17 7:41AM	G/	



AIR

Passengers: NANCY GUEBERT

Booking Date: 01 Dec 16  
File Locator/Ticket #: [REDACTED]

Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08169	EDMONTON INTL 06 Jan 17 4:55PM		CALGARY INTL 06 Jan 17 5:49PM	G/	