

## AHS Board and Executive Expense Report

**Name** Penny Rae  
**Title** Chief Information Officer  
**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			155	180	335			
Dec-16	Expense Claim	Meetings		85			85			
Dec-16	Direct Billing	Meetings	357				357			
<b>Total</b>			\$ 357	\$ 85	\$ 155	\$ 180	\$ 777	\$ -	\$ -	\$ -

**Total for the Month** \$ 777

Maximum daily single meal expense claimed in the month \$ 24  
 Maximum daily base hotel rate claimed in the month \$ 145  
 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

<u>RAE, PENELOPE</u> Cardholder's Name	<u>CHIEF INFORMATION OFFICER</u> Cardholder's Position/Title	Billing Reporting Period: <u>20/12/2016</u>
<u>INFORMATION TECHNOLOGY</u> Cardholder's Dept	<u>QUARRY PARK</u> Cardholder's Site/Location	Total Statement Amount: <u>\$ 334.92</u>
<u>PENNY.RAE@ALBERTAHEALTHSERVICES.CA</u> 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
29/11/2016		GREATER EDMONTON TAXI, LIMOUSINES AND TAXICABS	60.50	CAD	✓ 60.50	2.88		Taxi on Nov 29 from EIA to CN Tower
30/11/2016		CO OP TAXI LINE LTD, LIMOUSINES AND TAXICABS	60.40	CAD	✓ 60.40	2.88		Taxi on Nov 30 from SSP to EIA
30/11/2016		MATRIX HOTEL, LODGING HOTELS, MOTELS, RESORTS	155.32	CAD	✓ 155.32	7.40		Edmonton Hotel the night of Nov 29th
30/11/2016		THE CALGARY AIRPORT AU AUTOMOBILE PARKING LOTS AND	58.70	CAD	✓ 58.70	2.80		00 Parking at CIA Nov 29 to 30 while attending mtgs in Edm

1  
2  
3  
4

✓  
P.R.

Signatures		
<b>Cardholder Designate (if Applicable)</b> By signing this statement <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>		
<u>Down A Rand</u> <small>Name of Cardholder Designate</small>	<u>Executive Assistant</u> <small>Cardholder Designate Position/Title</small>	
<u>Down A Rand</u> <small>Signature of Cardholder Designate</small>	<u>Dec 16/16</u> <small>Date of Signature</small>	
<b>Cardholder</b> By signing this statement <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>		
<u>RAE, PENELOPE</u> <small>Name of Cardholder</small>	<u>CHIEF INFORMATION OFFICER</u> <small>Cardholder Position/Title</small>	
<u>[Signature]</u> <small>Signature of Cardholder</small>	<u>Dec 16/16</u> <small>Date of Signature</small>	
<b>Approver Designate (if Applicable)</b> By signing this statement <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>		
<u>Susan Best</u> <small>Name of Approver Designate</small>	<u>Exec Admin Coord.</u> <small>Approver Designate Position/Title</small>	
<u>[Signature]</u> <small>Signature of Approver Designate</small>	<u>Jan. 5/17</u> <small>Date of Signature</small>	
<b>Approver</b> By signing this statement <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>		
<u>Deborah Rhodes</u> <small>Name of Approver</small>	<u>JP Corp Services + CFO</u> <small>Approver Position/Title</small>	
<u>Deborah Rhodes</u> <small>Signature of Approver</small>	<u>Jan. 9/17</u> <small>Date of Signature</small>	
<b>Submit approved statement with attachments to Accounts Payable:</b>		
<b>Attach:</b> <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:               <ul style="list-style-type: none"> <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> </li> </ul>	<b>Address:</b>  Alberta Health Services Accounts Payable 7th Street Plaza 10th Floor, North Tower, 10030-107 Street Edmonton, AB T5J 3E4	
<b>Accounts Payable only:</b>		
Reference #: _____	Reviewed by: _____	Date: _____



GREATER EDMONTON TAXI  
SERVICE

10135 31 AVE NW  
EDMONTON AB

Taxi on November 29th from the Edm. International Airport to  
CN Tower to attend the following meetings: (1) IT Executive (2)  
(2) 1 on 1 with David vanHeerden (3) Rob Hayward and Diane  
Diane Beattie (4) CIS Framework documents (5) CFO  
Portfolio Team Teleconference (6) Telus and CEO

CARD [REDACTED]  
CARD TYPE MASTERCARD  
DATE 2016/11/29  
TIME 2103 08:30:45  
INVOICE # [REDACTED]  
RECEIPT NUMBER [REDACTED]

(1)

-----  
PURCHASE  
AMOUNT \$55.00  
TIP \$5.50  
TOTAL

\$60.50

✓

MasterCard

[REDACTED]

APPROVED

AUTH# [REDACTED]  
THANK YOU

CARDHOLDER COPY

IMPORTANT - RETAIN THIS  
COPY FOR YOUR RECORDS

YELLOW CAB 780.462.3456  
BARREL TAXI 780.489.7777  
EDMTAXI.COM  
GST 100409070

(2)

Taxi on November 30th from Seventh Street Plaza  
to Edm. International Airport after attending the  
following meetings: (1) Benchmarking discussion  
(2) Interview for Technical Services Newsletter (3)  
SPO CIS Interviews (4) CIS Stage 2 Proponent  
Conference

Co-op Taxi Line  
(780)425-2525  
www.co-optaxi.com

-----  
Terminal 123/66233612  
Driver 3469  
16/11/30 15:53:39

MASTERCARD  
Card : [REDACTED]  
MasterCard  
CHIP CARD

Ref # [REDACTED]  
Auth # [REDACTED]

-----  
PURCHASE  
FARE : \$ 54.40  
TIP : \$ 6.00  
-----  
TOTAL : \$ 60.40

✓

APPROVED - THANK YOU

[REDACTED]

IMPORTANT: Retain this  
copy for your records

Customer Copy

Thank you for choosing  
Co-op taxi

3

MRS Penelope Rae

Room Number: [REDACTED]  
 Arrival Date: 11-29-16  
 Departure Date: 11-30-16  
 Page No: 1 of 1

Guest Name:

**INFORMATION INVOICE**

Folio No:

11-30-16

Date	Description	Charges	Credits
11-29-16	Room Revenue	145.00	
11-29-16	Destination Marketing Fee - 3%	4.35	
11-29-16	Tourism Levy - 4%	5.97	
11-30-16	Mastercard [REDACTED]		155.32
<b>Total</b>		<b>155.32</b>	<b>155.32</b>
<b>Balance</b>		<b>0.00</b>	<b>0.00</b>

**Edmonton Hotel the night of November 29th after attending the following meetings: (1) IT Executive (2) 1 on 1 with David vanHeerden (3) Rob Hayward & Diane Beattie (4) CIS Framework documents (5) CFO Portfolio Team Teleconference (6) Telus & CEO and before attending the following meetings**

**on November 30th, namely: (1) Benchmarking discussion (2) Interview for Technical Services Newsletter (3) SPO CIS Interviews (4) CIS Stage 2 Proponent Conference**

I agree that my liability for all charges 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. G.S.T. #105631154 RT 0008

4

**RECEIPT**  
**GST NO. R122556194**

EXIT No. A5  
IN: 11/29/16 05:51  
OUT: 11/30/16 19:47  
DURATION: 1 13: 56  
PAID: \$ 58.70  
(GST INCLUDED)  
MASTERCARD



REF.  
THANK YOU FOR  
YOUR VISIT

**Parking at the Calgary International  
Airport November 29th to November 30th  
after attending two days of meetings in  
Edmonton**

- (1) IT Executive (2) 1 on 1 with David vanHeerden
- (3) Rob Hayward & Diane Beattie (4) CIS Framework documents (5) CFO Portfolio Team Teleconference
- (6) Telus and CEO (7) Benchmarking discussion
- (8) Interview for Technical Services (9) SPO CIS Interviews (10) CIS Stage 2 Proponent Conference



## AHS Public Disclosure Expense Claims

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total
RAE, PENELOPE JANE	Chief Information Officer	Calgary	\$ 84.50

  

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
11/29/2016	Meeting in Edm. with Telus and CEO	AB - Other Zones	Meals Per Diem	\$ 47.50			Meeting in Edmonton with Telus and CEO and then overnighiting for all day SPO CIS Interviews Bfast \$10.50 Lunch \$13.00 Dinner \$24.00	1			
11/30/2016	SPO CIS Interviews in Edm.	AB - Other Zones	Meals Per Diem	\$ 37.00			SPO CIS Interviews in Edmonton Lunch \$13.00 Dinner \$24.00	1			

  

Approver(s) for the claim	Approval Status	Approval Date
RHODES, DEBORAH	Approve	10-Jan-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

<b>Name :</b> Penny Rae	<b>Reporting Period for the Month of :</b> November 21st to December 20th, 2016
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DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
27-Oct-2016	Direct Billing	Airline Ticket	Airfare Calgary to Edmonton return November 29th to 30th to attend the following: (1) IT Executive Meeting; (2) 1 on 1 with David vanHeerden (2) 3 on 1 with Diane Beattie, Dr. Rob Hayward and David vanHeerden (3) CIS Framework documents (4) CFO Portfolio Teleconference (5) Telus and AHS CEO (6) Benchmarking discussion (7) SPO CIS Interviews (8) CIS Stage 2 Proponent Conference	Marlin Travel	357.18
	Direct Billing	Choose from Drop-down List			
	Direct Billing	Choose from Drop-down List			
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	-
<b>Total Paid in the Month</b>					<b>\$ 357.18</b>





**Invoice**

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

**Air Fare Calgary/Edm. return Nov. 29-30 to attend the following:**  
 (1) IT Executive (2) 1 on 1 with David vanHeerden  
 (3) Rob Hayward & Diane Beattie (4) CIS Framework  
 documents (5) CFO Portfolio Team Teleconference  
 (6) Telus and CEO (7) Benchmarking discussion  
 (8) Interview for Technical Services (9) SPO CIS  
 Interviews (10) CIS Stage 2 Proponent Conference

Trip #: [REDACTED]  
 Booking Date: 22 Nov 16  
 Client: [REDACTED]  
 Client Phone #: [REDACTED]  
 Client Email: [REDACTED]  
 Agent: MEA MOORE

File Locator: [REDACTED]

**INSURANCE**

**PASSENGERS:** MRS PENELOPE RAE

REFERENCE/ DESCRIPTION	FARE	HST/GST	PST	OTHER TAXES	PENALTY	TOTAL
AIR CANADA Ticket # [REDACTED]	148.00	0.00	\$0.00	37.48	0.00	185.48 CAD
WESTJET Ticket # [REDACTED]	122.22	0.00	\$0.00	49.48	0.00	171.70 CAD
<b>Total:</b>	<b>270.22</b>	<b>0.00</b>	<b>0.00</b>	<b>86.96</b>	<b>0.00</b>	<b>357.18 CAD</b>

PAYMENTS	Invoice #	Payment Date	Card Holder	Form of Payment	Amount
	[REDACTED]	11/22/2016	[REDACTED]	[REDACTED]	185.48 CAD
	[REDACTED]	11/22/2016	[REDACTED]	[REDACTED]	171.70 CAD
<b>Total Payment:</b>					<b>357.18 CAD</b>

**Balance Due CAD Currency 0.00 CAD**

TRAVEL APPROVED BY DEBORAH.RHODES  
 CORPORATE UNIT 101  
 REASON FOR TRAVEL CIS STAGE 2 PROPONENT CONFERENCE & TELUS MTG.

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 -----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

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

Trip #: [REDACTED]  
Booking Date: 22 Nov 16  
Client: [REDACTED]  
Client Phone #: [REDACTED]  
Client Email: [REDACTED]  
Agent: MEA MOORE

File Locator: [REDACTED]

FARE INCREASE WILL APPLY 24HOURS IN ADVANCE GO TO [WWW.AIRCANADA.COM](http://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: 22 Nov 16  
Client: [REDACTED]  
Client Phone #: [REDACTED]  
Client Email: [REDACTED]  
Agent: MEA MOORE

File Locator: [REDACTED]

### MY ITINERARY

Passengers	Citizenship	Required Travel Documents
PENELOPE RAE	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:		PENELOPE RAE		Booking Date:	22 Nov 16	
				File Locator/Ticket #:	[REDACTED]	
Airline	Flight	From	Terminal	To	Class/Seat	Stops
AIR CANADA	08130	CALGARY INTL		EDMONTON INTL	W/	
		29 Nov 16 6:45AM		29 Nov 16 7:39AM		

Passengers:		PENELOPE RAE		Booking Date:	22 Nov 16	
				File Locator/Ticket #:	[REDACTED]	
Airline	Flight	From	Terminal	To	Class/Seat	Stops
WESTJET	00348	EDMONTON INTL		CALGARY INTL	M/	
		30 Nov 16 6:25PM		30 Nov 16 7:16PM		