

AHS Board and Executive Expense Report

Name Robert Hawes

Title Chief Program Officer Finance

Location Calgary

Expenses submitted during the month of March 2016

					Travel (1)					
ммм-үү	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)	Working Sessions Hosting and Hospitality (3)	Other (4)
Mar-16 Mar-16	Expense Claim Direct Billing	Meetings Meetings		109	311	302 70	411 381			
Total			\$ -	\$ 109	\$ 311	\$ 372	\$ 792	\$ -	\$ -	\$ -

Total for

the Month \$ 792

Maximum daily single meal expense claimed in the month \$ 145 Maximum daily base hotel rate claimed in the month \$ 21 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
HAWES,	Chief Program Officer,	Calgary	410.53
ROBERT	Finance		

RHODES, DEBORAH

Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
2/12/2016	EDM - Lead Staff update sessions		Car Rental	171.32	Location	Location		uay 3		Hame(3)	
3/12/2010	three in tota	,	Cai Neiltai	1/1.32				1			
	tinee in tota	201163									
3/14/2016	EDM - Lead Staff update Sessions	, AB - Other	Parking - Lot or Parkade-	15.00				1			
	three in tota	I Zones	Service Rcpt								
3/14/2016	EDM - Lead Staff update Sessions	,	Meals Per Diem	64.70			14 & 15 Mar 2016 - Lunch	2			
	three in tota						& Dinner				
3/15/2016	EDM -Lead Staff update sessions	AB - Other	Fuel	48.36				1			
	Calgary to EDN	1 Zones									
3/17/2016	Red Deer - Corporate Services	AB - Other	Fuel	28.70			Drove AHS Fleet vehicle, did	1			
	Leadership Retrea	ž Zones					not have PIN # for gas card.				
3/17/2016	Red Deer - Corporate Services	AB - Other	Parking - Lot or Parkade-	8.50			Drove AHS fleet vehicle.	1			
	Leadership Retrea	ž Zones	Service Rcpt								
3/21/2016	Stayed in Edmonton to attend	d .	Meals Per Diem	43.95			Per diem for lunch and dinner	2			
	Lead Staff update sessions						to attend Finance Staff				
							Engagement Session.				
							21-Mar-16- Lunch & Dinner				
							22-Mar-16- Lunch				
3/21/2016	EDM - Lead staff update Sessions	AB - Other	Parking - Lot or Parkade-	30.00			Parking of company fleet	1			
		Zones	Service Rcpt				vehicle at SSP				
Approver(s) for	the claim Approval	Status	Approval Date								•

28-Mar-16

Approve

WELCOME

Shell Canada 9420 MACLEOD TRAIL S 72J 0P5 Calgary (403) 252-AB 1025

VISA PURCHASE

INV NO. 2016/03/15 21:15 VISA CREDIT AID A0000000031010 TVR 0080008000 TSI F800

C

Bronze PUMP No. LITRES PRICE/L TOTAL FUEL 01 APPROVED -1 9.917 \$0.939 \$9.31 THANK APPROVAL TERMINAL APPROVAL VERIFIED BY

IMPORTANT retain this copy your records for

FUEL INCLUDES \$0.44 No. 137400032RT

TOTAL SALE \$9.31

STORE: TRAN: 2016/03/15 21:16:38

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www.shell.ca/opinion
and you could win a
\$100 Shell Gift Card
*Receipt Required 1-800-661-1600

\$9.31+\$39.05=\$48.36

WELCOME

Shell Canada 37430 HWY 2 SOUTH DEÉR (403) RED AB 346-9230

C

VISA PURCHASE

INV NO. 2016/03/13 18:34 VISA CREDIT AID A0000000031010 TVR 0080008000

Appr: 20022090600121 6031510053514 Reference:



Bronze
PUMP No.
LITRES 42.7
PRICE/L \$0.7
TOTAL FUEL \$3.9
01 APPROVED - THAN
APPROVAL NO. 03479
TERMINAL NO.
89003670
VERIFIED BY PIN 42.265 \$0.924 \$39.05 THANK 034793

IMPORTANT retain this copy for your records

INCLUDES - Fuel \$1.86 137400032RT FUEL GST No.

SALE \$39.05 TOTAL

STORE: TRAN: 2016/0 18:56:58

YOUR OPINION COUNTS
Tell us about your
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and you could win a
\$100 Shell Gift Card
*Receipt Required

THANK YOU Questions? 1-800-661-1600

0 DETACH RECEIPT FROM TICKET RECEIPT GST#R108102831 UNIVERSITY \$ CREDIT CARD NUMBER

DISPLAY THIS SIDE UP ON DASHBOARD

ALBERTA ALBERTA NON TRANSFERABLE NON REFUNDABLE 99:99 84930000 日 AMOUNT PAID
\$ 15.00

DERIL

From:

Enterprise Rent-A-Car Reservation <onlinereservations@enterprise.com>

Sent:

March 16, 2016 9:17 AM

To:

Lori Paulino

Subject:

Car Rental Receipt (duplicate)



Contract

Number:

Receipt Date:

Mar 15, 2016

Driver: ROBERT HAWES

ROBERT HAWES

Start Date

Enterprise Location: 7820 MACLEOD TRAIL SOUTH

CALGARY, AB T2H0L9

CA

End Date

Tel.: (403) 252-0222

Miles Make/Model Start Miles **End Miles** Driven

Mar 12, 2016 @ 11:12 Mar 15, 2016 @ 7:15 **HYUN ELAN** 27,400 28,190 790

Total Miles 790 Charge Description Quantity Per Rate Total Rate Day 40.00 160.00

VLF 3.16

Taxes and Surcharges

GST 8.16

Subtotal: CAD 171.32

Subtotal: CAD 163.16

Total Charges: CAD 171.32

Payment Information

CREDIT CARD VISA 171.32

Subtotal: CAD 171.32

Total Payment Amount CAD 171.32 9835 Macleod Trail, SM Calgary AB T2J0P6

ESSO EXPRESS PAY

SOUTH TRAIL ESSO 99392699 9835 MACLEOD TR. SW CALGARY, AB T2J 0P6 URN:R121461107 03/17/2016 341884320 09:37:22 PM

PUMP# 2 31.925L REGLR \$0.899 PRICE/L 28.70 FUEL TOTAL

GST in fuel 1.37 CREDIT \$ 28.70

TYPE: PURCHASE ACCOU \$28.78 INVOICE: TTC57498 AUTH: CARD NUMBER UERIFIED BY PIN A- UISA CREDIT B- A00000000031019

81 Approved - Thank You 827 LOYALTY: NO IMPORTANT - retain this copy for your

records

RECEIPT Red Deer Regional Hospital

License Plate Number



08:53 AM MAR 18, 2016

Purchase Date/Time: 08:53am Mar 17, 2016

Total Due: \$8.50 Total Paid: \$8.50 Rate: \$8.50 - 24 Hours Payment Type: Card

Ticket # S/N #: 520015331427 Setting: Red Deer Mach Name: CE-RDRH-023

Auth #

www.ahs.ca DO NOT PLACE ON DASH IMPARK LOT 256 NO IN AND OUT PRIVILEGES

License Plate Number

Expiration Date/Time

Purchase Date/Time: 09:05am Mar 21, 2016

Total Parking: \$28.57

PARKING RECEIPT

PARKING RECEIPT

PARKING RE

Total gst: \$1.43 Total Due: \$30.00 Total Paid: \$30.00

Rate: \$30 - All Day Payment Type: Card

Ticket 4 S/N #: Setting: Lot 256 Mach Name: Meter 1

Auth #: GST #887315638RT0001



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	n for thi	s repo	orting	per	riod:					YES	
		7973.5	2525	141216	78 10	90.20	0000a	26000	0.477	23200	-	

	Name :	Robert Hawes	Reporting Period for the Month of :	Mar-16	
,					

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
3-Mar-2016	Direct Billing	Other Transportation	PH&N information session & LPIP Insurance Meeting travelled on Red Arrow one-way.	Other	70.48
14-Mar-2016	Direct Billing	Hotel	Staff engagement session in Edmonton	Marlin Travel	155.32
21-Mar-2016	Direct Billing	Hotel	Staff engagement session in Edmonton	Marlin Travel	155.32
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	886
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	o z s:
Total Paid in the	Month				\$ 381.12

RH023/16

no cost claimed. controlled with being in

Lori Paulino

(141 information session (conflict for (uly my)

(LPIP my with Launia Balfour + Roby Received.

From:

Red Arrow Reservations <itinerary@redarrow.ca>

Sent:

February 29, 2016 11:15 AM

To: Subject:

Lori Paulino Invoice

Invoice

Date: 2016-02-29

LORI PAULINO

5116 Gateway Boulevard Edmonton, AB

Order# Ord	lered Customer	# P.O.	Group Name	Departing	Returning	Sales Rep	Sales Agent
2016	-02-29	-	-	2016-03-03	2016-03-03	-	

Travellers:

HAWES/ROBERT

Product	Details	Duration	Price Basis	Qty	Each	Billed
CEEXP 18:30 YYC Assigned to: 06A	Departs Calgary (CGYNORTH / CALGARY NORTH) 2016-03-03 at 18:45 Arrives Edmonton (EDMTO / Edmonton Ticket Office) 2016-03-03 at 22:05	3 hrs 20 mins	Adult	1	70.48	0.00

Base Price: 70.48 CAD Discounts: 70.48 CAD Service Charges: 0.00 CAD GST 0.00 CAD Invoice Total: 0.00 CAD Commission: 0.00 CAD Received: 0.00 CAD Balance: 0.00 CAD

TERMS: DUE UPON RECEIPT

GST# BN139981476

If you wish to time change, date change, or cancel for a full refund - 30 minutes notice prior to A.M departures; 3 hours notice prior to P.M. departures must be given. Failure to provide proper notice makes the trip non refundable & will result in an additional change fee for a date / time change.

Failure to arrive on time or no showing for your departure will result in forfeit of full fare unless rebooked within 30 days for a change fee. If you wish to change or cancel your booking, please contact our Central Reservation line at 1-800-232-1958.

Red Arrow will not be responsible for the loss of or damage to checked luggage in excess of stated maximum liability. In addition, Red Arrow does not accept liability to loss of or damage to unchecked baggage carried on board. For the full policy, please visit www.redarrow.ca or view the policy posted on our information boards at our Ticket Offices



AB Health

Guest Name: Hawes, Robert

Room Number:

Arrival Date: Departure Date:

Page No:

P/O Number:

03-15-16

1 of 1

INFORMATION INVOICE

Folio No:

03-15-16

Date	Description	Charges	Credits
03-14-16	Room Revenue	145.00	
03-14-16	Destination Marketing Fee - 3%	4.35	
03-14-16	Tourism Levy - 4%	5.97	
	Total	155.32	0.00

155.32 Balance

Signature:

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. #866344302 RT 0001



AB Health

Room Number:

Arrival Date:

03-21-16 03-22-16

Departure Date: Page No:

1 of 1

Guest Name: Hawes, Robert

INFORMATION INVOICE

Folio No:

03-23-16

Date	Description		Charges	Credits
03-21-16	Room Revenue		145.00	
03-21-16	Destination Marketing Fee - 3%		4.35	
03-21-16	Tourism Levy - 4%		5.97	
		Total	155.32	0.00
		Balance	155.32	

Signature:

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. #866344302 RT 0001