

### **AHS Board and Executive Expense Report**

Name Robert Hawes

**Title** Chief Program Officer Finance

**Location** Calgary

Expenses submitted during the month of January 2017

							Travel (1	)							
MMM-YY	Source Document	Purpose	Airfa	re	Mea	als	Accommoda	tion	Other Travel	Fotal ravel	Profession Developn (2)		Working Sessions Hosting and Hospitality (3)		Other (4)
Jan-17 Jan-17	Expense Claim Direct Billing	Meetings Meetings				37		391	45	82 391					
Total			\$	-	\$	37	\$	391	\$ 45	\$ 473	\$	-	\$ -	- \$	

Total for

the Month \$ 473

Maximum daily single meal expense claimed in the month \$ 24 Maximum daily base hotel rate claimed in the month \$ 174 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, ROBERT	Chief Program Officer, Finance	Calgary	\$ 82.00							
Expense Date	Business reason		Expense Location	Expense Type	Amount	To Location	Justification	# of days	# of Attendees	Trip Distance
1/17/2017	EDM - Finance Con Meeting/ Budget P Session		AB - Other Zones	Meals Per Diem	\$ 37.00		Lunch \$13.00 Dinner \$24.00	3		
1/17/2017	EDM - Finance Con Meeting/ Budget P Session		AB - Other Zones	Fuel	\$ 45.00		Drove own vehicle to Edmonton	1		
Approver(s)	for the claim	Approval S	Status	Approval Date	•			•		
RHODES, DE	BORAH	Approve		27-Jan-17						

Safeway 8720 156 STREET EDMONTON,AB T5R5W9

STORE NO: 8855 GST/HST: 831536503

MasterCard
AID:
Seq#:
Termi
Auth
ACI/ISO: 001/00
Date: 19/01/2017
TVR
TVR
TSI
APPROVED

Pump # : 1-Resular Vol : 48.435 L Price/L: \$0.929 Total: \$45.00

Fuel Includes: GST/HST(5%): \$2.14

You Saved 6 Cents/L Total Savings: \$2.91



## **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 great in this section 6.

Thalcate Wheth	er you have expenses to report in t	his section for this reporting period:	YES	
Name :	Robert Hawes	Reporting Period for the Mo	nth of: Jan-17	

DD-MMM-YYYY	Payment Method	Category	Description/Purpose of the Expense	Name of Vendor	Amount Paid
17-Jan-2017	Direct Billing	Hotel	Accomodation for two nights at Matrix. To attend inperson Finance Committee Meeting and Anne-Marie's farewell.	Marlin Travel	390.70
					<i>11</i>
					-
Total Paid in the	Month				\$ 390.70

RFeb1/17



AB Health 7th Street Plaza, 10th Floor, North Tower 10030-107 Street Canada

Room Number: Arrival Date:

Departure Date:

01-17-17 01-19-17

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Guest Name: Hawes, Robert

### INFORMATION INVOICE

Folio No:

01-27-17

Date	Description	Charges	Credits
01-17-17	Room Revenue	174.00	
01-17-17	Destination Marketing Fee - 3%	5.22	
01-17-17	Tourism Levy - 4%	7.17	
01-17-17	Room GST - 5%	8.96	
01-18-17	Room Revenue	174.00	
01-18-17	Destination Marketing Fee - 3%	5.22	
01-18-17	Tourism Levy - 4%	7.17	
01-18-17	Room GST - 5%	5.22 7.17 8.96 174.00 5.22	
	Total	390.70	0.00

Balance 390.70

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. #105631154 RT 0008