

AHS Board and Executive Expense Report

Name Ronda White
Title Chief Audit Executive, Internal Audit & Enterprise Risk Management
Location Edmonton
 Expenses submitted during the month of February 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)
Feb-17	P-Card	Professional Development					-	1,710		
Total			\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,710	\$ -	\$ -

Total for the Month \$ 1,710

Maximum daily single meal expense claimed in the month \$ -
 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									
WHITE, RONDA	Chief Audit Executive, Internal Audit & ERM	Edmonton	\$ 1,709.54									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
2/5/2017	Education / Professional Development	AB - Local	Courses and Professional Development	\$ 304.50			Education / Professional Development training: Assurance & Professional Practice Update (March 31, 2017)	1				
2/5/2017	Education / Professional Development	ON	Courses and Professional Development	\$ 1,204.09			Education / Professional Public Sector Certificate Resource Materials - 20 Resource Materials - Framework for Board Oversight of ERM	1				
2/5/2017	Education / Professional Development	International	Courses and Professional Development	\$ 133.97			Education / Professional CIA Application - Member	1				
2/5/2017	Education / Professional Development	International	Courses and Professional Development	\$ 66.98			Education / Professional CIA Practice Exam	1				
Approver(s) for the claim		Approval Status		Approval Date								
YIU, VERNA		Approve		2-Mar-17								

Location: Search > View Cart

Chartered Professional Accountants of Alberta

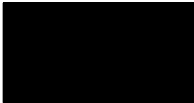
580 Manulife Place
10180 - 101 Street
Edmonton Alberta, T5J 4R2
Canada


Invoice Address:

Ronda WHITE



G.S.T. REG #: 10690 4287 RT0003

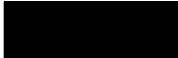
Member #: 

Order ID #: 

Date: 2/4/2017 11:41 AM

Credit Card Number: 

Card Holders Name: Ronda white

Authorization Number: 

Description	Amount
ASSURANCE & PROFESSIONAL PRACTICE UPDATE	\$290.00
GST	\$14.50
Total Amount Due:	\$304.50

ASSURANCE & PROFESSIONAL PRACTICE UPDATE

You are registered for this offering.

Date & Time: Mar 31, 2017 8:30 AM
Format: Self-Study (Half-day)
CPD Hours: 3
Facility:

Phone:

Fax:

Meeting Room:

Payment: \$304.50

Offering Special Notes

Facility Special Notes

Ronda White

From: Ronda White [REDACTED]
Sent: February 6, 2017 9:59 AM
To: [REDACTED]
Subject: FW: CPAstore order [REDACTED]

From: CPAstore [orders@castore.ca]
Sent: February 4, 2017 3:54 PM
To: Ronda White
Subject: CPAstore order [REDACTED]



Dear Ronda M. White:
Thank you for shopping at the CPAstore.
Your order number is [REDACTED] [View your order history.](#)
Your CPAstore order includes the following item(s):

Item	Item no.	Quantity	Price
20 Questions Directors Should Ask about Internal Audit, 3rd Edition Book (Softcover) (to be shipped within 7-10 business days)	04000086	1	\$15.00
A Framework for Board Oversight of Enterprise Risk (Revised) Book (Softcover) (to be shipped within 7-10 business days)	04008	1	\$30.00
Public Sector Certificate Program - Level I On-Demand Courses - Registration	50105822-16	1	\$1,095.00
Subtotal:			\$1,140.00
Shipping & handling:			\$6.75
GST/HST:			\$57.34
Total charged to your credit card:			\$1,204.09

DETAILS FOR PUBLIC SECTOR CERTIFICATE PROGRAM - LEVEL I
The total amount of CPD credits/hours available for this event is up to 40 hours.
PRODUCT / EVENT INFORMATION

Confirmation of Form Completion

Ronda White [REDACTED]

Thank you for submitting your CIA Application form. For any questions or concerns, please submit incident by clicking on the 'New Incident' link in the left-hand side navigation bar of your CCMS; a member of our staff will gladly respond to you shortly.

Your form number is [REDACTED]

Logout

Return to IIA

Home

- Home
- Personal Information
- Update Personal Info
- History
- Order History
- Change Password
- New Incident

Certifications

Certification Progress

Help

- Contact Us
- Incident History

Forms

Complete a Form

Official Receipt / Invoice

The Institute of Internal Auditors
 247 Maitland Ave
 Altamonte Springs, FL 32701
 USA
 +1-407-937-1111

Received From

Ronda White
 [REDACTED]

Order Summary

Order / Invoice ID : [REDACTED]
 Order / Invoice Date: **2/4/17 2:51 PM**
 Product Category: **Applications**
 Order Status: **Complete**
 Order Total: **\$100.00 (USD)**
 Payment Type: **Credit Card**

Payment Information

Name (as it appears on credit card) [REDACTED]
 Credit Card Number [REDACTED]
 Credit Card Type: **MASTERCARD**
 Expiration Date [REDACTED]
 Amount Charged: **\$100.00 (USD)**
 Authorization Code: [REDACTED]
 Billing Address: [REDACTED]
 Billing Postal/Zip Code: [REDACTED]

Order Detail

Item	Description	Quantity	Per Item Price	Amount
3200-00-0000	CIA Application - Member	1	\$100.00 (USD)	\$100.00 (L)

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**133.97 Cnd*



Confirmation of Form Completion

Ronda White - [REDACTED]

Thank you for submitting your CIA Part 1 Practice Test Form. For any questions or concerns, please click on the 'New Incident' link in the left-hand side navigation bar of your CCM and a member of our staff will gladly respond to you shortly.

Your form number is [REDACTED]

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The Institute of Internal Auditors
 247 Maitland Ave
 Altamonte Springs, FL 32701
 USA
 +1-407-937-1111

Received From

Ronda White
 [REDACTED]

Order Summary

Order / Invoice ID : [REDACTED]
 Order / Invoice Date: **2/4/17 3:31 PM**
 Product Category: **Exam Registrations**
 Order Status: **Complete**
 Order Total: **\$50.00 (USD)**
 Payment Type: **Credit Card**

Payment Information

Name (as it appears on credit card) [REDACTED]
 Credit Card Number [REDACTED]
 Credit Card Type [REDACTED]
 Expiration Date [REDACTED]
 Amount Charged: **\$50.00 (USD)**
 Authorization Code: [REDACTED]
 Billing Address: [REDACTED]
 Billing Postal/Zip Code: [REDACTED]

Order Detail

Item	Description	Quantity	Per Item Price	Amount
3200-00-0500	CIA Practice Exam	1	\$50.00 (USD)	\$50.00 (US)

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