

AHS Board and Executive Expense Report

Name: Stacy Greening
Title: Senior Vice President of Clinical Operations
Location: Whitecourt
 Expenses posted during the month of February 2026

			Travel (1)						Working Sessions Hosting and Hospitality (3)	Other (4)
Approved MMM-YY	Source Document	Purpose	Airfare	Meals	Accommodation	Other Travel	Total Travel	Professional Development (2)		
Feb-26	P-Card	Meetings			518	45	563			
Feb-26	Expense Claim	Meetings		124			124			
Feb-26	Direct Bill	Meetings	767				767			
Total by category			\$ 767	\$ 124	\$ 518	\$ 45	\$ 1,454	\$ -	\$ -	\$ -

**Total
posted for
the Month** \$ 1,454

Maximum daily single meal expense posted in the month \$ 24
 Maximum daily base hotel rate posted in the month \$ 169
 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 membership dues, small item technology purchases, books, etc.

Car allowance and any other employment benefits reported in the annual financial statements are excluded from this report

AHS Executive Expenses Report P-Card

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total									
GREENING, STACY T	Senior Vice President of Clinical Operations	Whitcourt	\$ 563.22									
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance	
1/22/2026	AHS Priorities Planning Meeting in Edmonton (Jan 23, 2026)	AB - Other Zones	Accommodations	\$ 189.51				1				
1/23/2026	Royal Alexandra Hospital Leadership Strategy Meeting in Edmonton (Jan 22, 2026)	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00				1				
2/5/2026	Peter Lougheed Centre in Calgary - Emergency Inpatient (EIP)/Patient Flow Meeting (Feb 6, 2026)	AB - Other Zones	Accommodations	\$ 162.41				1				
2/6/2026	PLC - EIP/Patient Flow Meeting in Calgary (Feb 6, 2026)	AB - Other Zones	Accommodations	\$ 166.30				1				
2/7/2026	PLC - EIP/Patient Flow Meeting in Calgary (Feb 6, 2026)	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00				1				
2/13/2026	University of Alberta Hospital - EIP/Patient Flow Meeting with CEO (Feb 12, 2026)	AB - Other Zones	Parking - Lot or Parkade	\$ 15.00				1				
Approver(s) for the claim	Approval Status	Approval Date										
TREMBLAY, ANDRE	Approve	24-Feb-26										



Stacy Greening

INVOICE

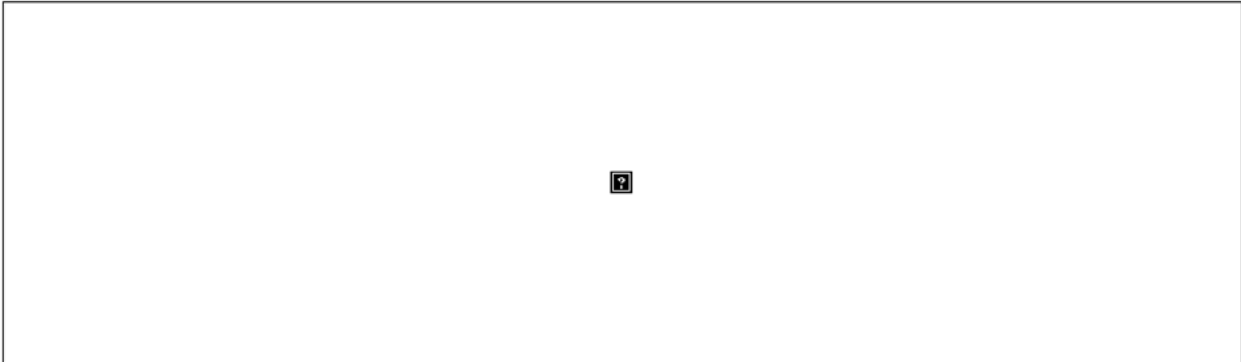
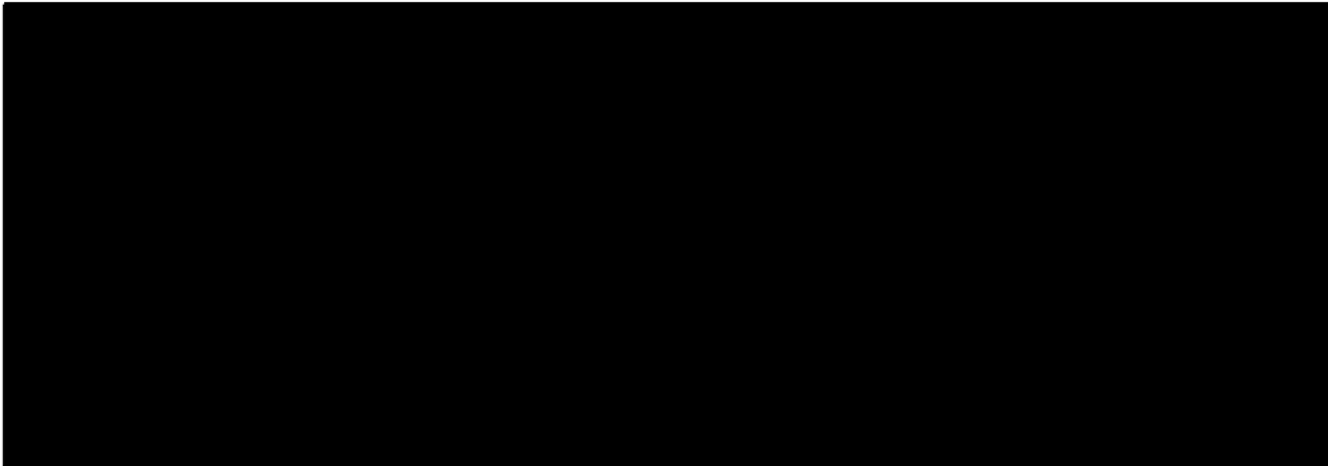
Room No. : [REDACTED]
Arrival : 01-22-26
Departure : 01-23-26
Page No. : 1 of 2
Folio No. [REDACTED]
Conf. No. [REDACTED]
Cashier No. [REDACTED]
Custom Ref. :

Company Name :
Group Name :
Guest Name :

Table with 4 columns: Date, Description, Charges, Credits. Rows include Package Revenue, Destination Marketing Fee, Room GST, Tourism Levy, Mastercard, Total Charges, Total Credits, and Balance.

Merchant ID [REDACTED] Credit Card # XXXXXXXXXXXX [REDACTED]
Transaction ID [REDACTED] Credit Card Expiry XX/XX
Approval Code [REDACTED] Capture Method Swiped
Approval Amount [REDACTED] Transaction Amount 189.51

I agree that I am personally liable for payment of this account, and if this person, company or association indicated does not settle within a reasonable period, my liability for payment should be joint and several with such person, company or association.



Transaction Number [REDACTED]
Zone Number [REDACTED]
Zone Name: EDM-RAH Public
License Plate: [REDACTED]
Start: Thu, Jan 22 2026, 10:06 AM
End: Fri, Jan 23 2026, 10:06 AM
Payment Info: Card ending in [REDACTED]
Parking Fee: \$15.00
Total Fee: \$15.00

Initial Stay

Start: Thu, Jan 22 2026, 10:06 AM
End: Thu, Jan 22 2026, 12:36 PM
Original Parking Fee: \$12.50

Extension 1

Start: Thu, Jan 22 2026, 12:36 PM
End: Fri, Jan 23 2026, 10:06 AM
Additional Parking Fee: \$2.50

Price includes GST where applicable

If you have any questions regarding this or any other parking transaction, please contact a customer service representative at support@passportinc.com

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Sheraton Cavalier Hotel Calgary
 2620 32 Avenue N.E.
 Calgary, AB T1Y 6B8
 Canada
 Tel: 403-291-0107 Fax: 403-291-2834



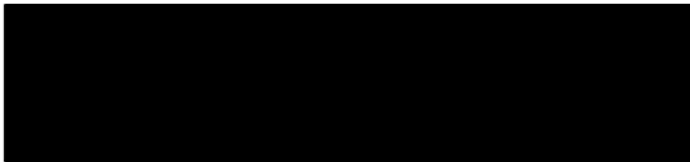
STACY GREENING

Page Number : 1
 Guest Number : [REDACTED]
 Folio ID : A
 Arrive Date : 05-FEB-26 19:18
 Depart Date : 06-FEB-26
 No. Of Guest : [REDACTED]
 Room Number : [REDACTED]
 Marriott Bonvoy Number : [REDACTED]

Information Invoice

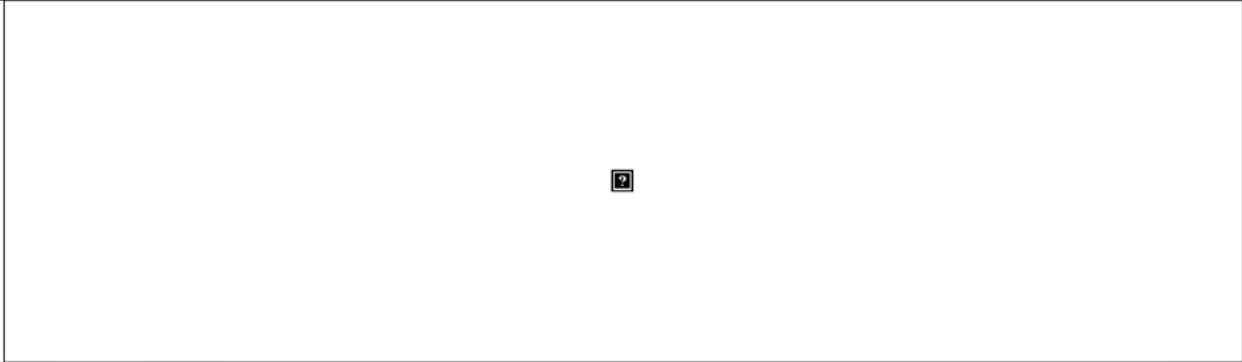
Tax ID : GST-r100846435 [REDACTED]
 Sheraton Caval YYCSC 06-FEB-26 01:40 [REDACTED]

Date	Reference	Description	Charges (CAD)	Credits (CAD)
05-FEB-26	[REDACTED]	Room Chrg - Special Corp	149.00	
05-FEB-26	[REDACTED]	GST	7.45	
05-FEB-26	[REDACTED]	ALberta TL Tax	5.96	
06-FEB-26	[REDACTED]	Mastercard		-162.41



** Total 162.41 -162.41
 *** Balance 0.00

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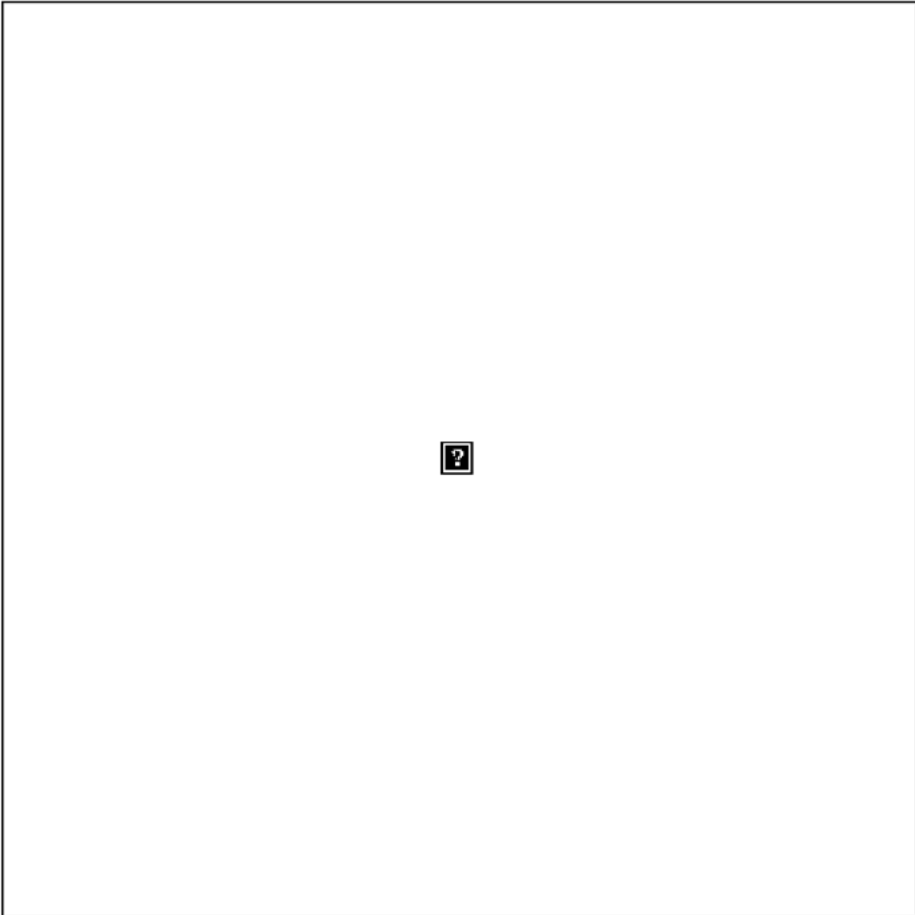
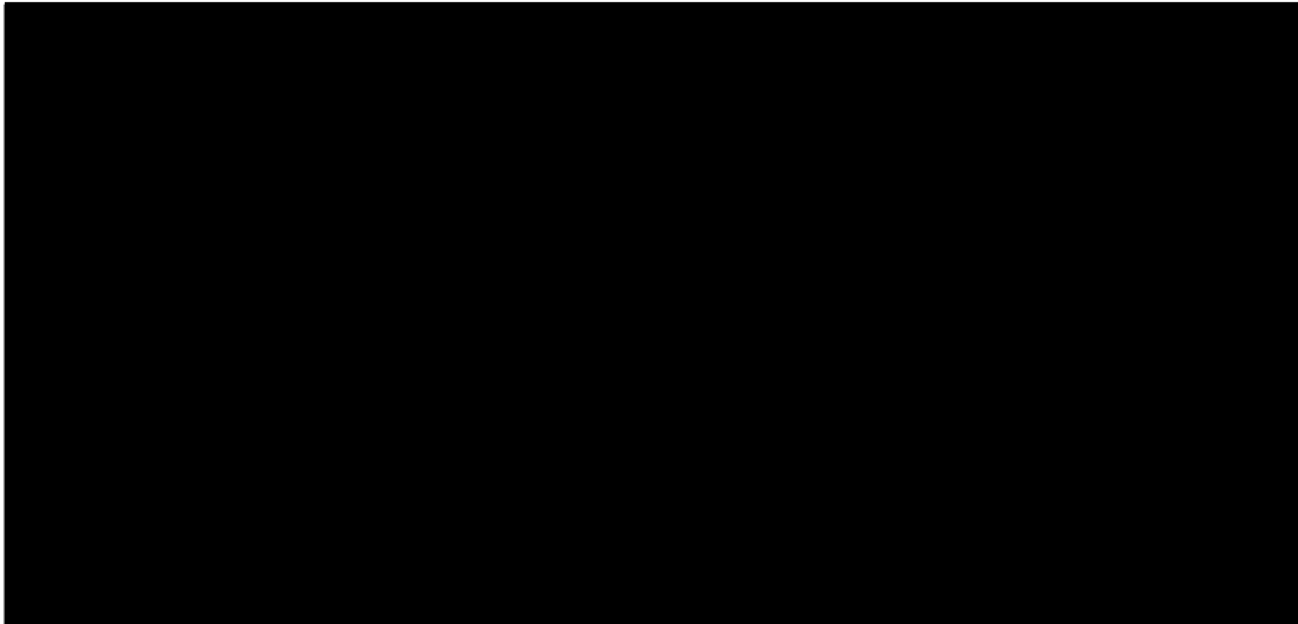


Transaction Number: [REDACTED]
Zone Number: [REDACTED]
Zone Name: CAL-PLC Public
License Plate: [REDACTED]
Start: Fri, Feb 6 2026, 08:18 AM
End: Sat, Feb 7 2026, 08:18 AM
Payment Info: Card ending in [REDACTED]
Parking Fee: \$15.00
Total Fee: \$15.00


Price includes GST where applicable

If you have any questions regarding this or any other parking transaction, please contact a customer service representative at support@passportline.com

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Transaction Number [REDACTED]
Zone Number: [REDACTED]
Zone Name: EDM-UAH Public
License Plate: [REDACTED]
Start: Thu, Feb 12 2026, 01:09 PM
End: Fri, Feb 13 2026, 01:09 PM

Payment Info: Card ending in 

Parking Fee: \$15.00

Total Fee: \$15.00

Price includes GST where applicable

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AHS Executive Expenses Report Expenses

Claimant Name	Claimant Title	Claimant Location	Expense Claim Total								
GREENING, STACY T	Senior Vice President of Clinical Operations	Whitecourt	\$ 124.00								
Expense Date	Business reason	Expense Location	Expense Type	Amount	From Location	To Location	Justification	# of days	# of Attendees	Attendee Name(s)	Trip Distance
1/22/2026	Royal Alexandra Hospital Leadership & AHS Priority Planning Meetings	AB - Other Zones	Meals Per Diem	\$ 50.00				2			
2/5/2026	Peter Lougheed Centre in Calgary - Emergency Inpatient (EIP)/Patient Flow Meeting (Feb 6, 2026)	AB - Other Zones	Meals Per Diem	\$ 61.00				2			
2/12/2026	University of Alberta Hospital EIP/Patient Flow Meeting (Feb 6, 2026)	AB - Other Zones	Meals Per Diem	\$ 13.00				1			
Approver(s) for the claim	Approval Status	Approval Date									
TREMBLAY, ANDRE	Approve	24-Feb-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.
- Refer to Quick Reference Guide for: [Providing a Standard Business Reason\(s\)](#)
- 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

Name : Stacy Greening	Reporting Period for the Month of : Feb-26
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Invoice Date DD-MMM-YYYY	Payment Method	Category	Business Reason	Name of Vendor	Amount Paid
11-Jan-2026	Direct Billing	Airline Ticket	Flight to Calgary for subsequent travel to Lethbridge to attend Strategic Planning Workshops with staff at Chinook Regional Hospital (Jan 12-13, 2026)	Vision Travel DT Ontario-West Inc	\$324.21
11-Jan-2026	Direct Billing	Airline Ticket	Return flight to Edmonton after attending PLC Hospital Action Plan meeting with staff at Peter Lougheed Centre (Jan 15, 2026). Flight was the best option to align with schedule for the day.	Vision Travel DT Ontario-West Inc	\$443.00
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
	Direct Billing	Choose from Drop-down List		Choose from Drop-down List	
Total Paid in the Month					\$ 767.21



Your Direct Itinerary

DIRECT TRAVEL
9929-108TH STREET NW
EDMONTON AB T5K 1G8
1-833-692-4120

ALBERTA HEALTH SERVICES
10030 107 STREET
EDMONTON AB ZT5H3E4

Agency reference: [REDACTED]

Agent name: [REDACTED]

Traveler name	Client reference
---------------	------------------

STACY GREENING

Thank you for choosing Direct Travel. Complete details for your trip are below. Please review this document and the trip details thoroughly. If a discrepancy exists, please contact us immediately upon receipt. Missing your flight without cancelling will result in the forfeiture of the value of your airline ticket.

Government issued photo I.D. is required for all travel and the name on your photo I.D. must match the name on your ticket.

Please [click here](#) upon receipt of your itinerary for valuable information that may be critical to the success of your travels. We strongly recommend you come back to this information regularly in advance of and during travel as documentation and health requirements could change without notice.

Itinerary summary

From / To	Flight / Provider	Departure / Arrival
Flight Mon. Jan. 12, 2026 Edmonton(YEG) - Calgary(YYC)	Air Canada [REDACTED] OPERATED BY AIR CANADA EXPRESS - JAZZ	10:10 a.m.- 11:10 a.m. Check in

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	Edmonton Edmonton (YEG)		Calgary Calgary (YYC)
Departure	Mon. Jan. 12, 2026 10:10 a.m.	Arrival	Mon. Jan. 12, 2026 11:10 a.m.
Departure terminal		Arrival terminal	
Class	Economy(T)	Seat	[REDACTED]
Status	Confirmed	Airline check-in ID	[REDACTED]
Special requests		Frequent traveler	
Equipment	DHC8 Dash 8-400	Duration/Meal service	01:00/No meal service
eTicket	[REDACTED]		
Remarks	OPERATED BY AIR CANADA EXPRESS - JAZZ **CHECK IN WITH AIR CANADA EXPRESS - JAZZ**		

Invoice/Ticket information for STACY GREENING

Ticket:	Air Canada	Invoice:	
Base:	CAD278.00		
Other tax:	CAD46.21		
GST/HST tax:	CAD0.00		
QST tax:	CAD0.00		
		Amount:	CAD324.21
Payment:	CA XXXXXXXXXXXX	Issue date:	06-Jan.-2026
		Total invoiced amount:	CAD324.21
		Balance due:	CAD0.00

General remarks

AIRFARES ARE NOT GUARANTEED UNTIL TICKETED
AIRLINES RECOMMEND CHECKING IN 2 HOURS PRIOR TO FLIGHT.
THIS TICKET IS NON-REFUNDABLE. CHANGES/CANCELLATIONS MUST
BE MADE PRIOR TO DEPARTURE OR TICKET WILL HAVE ZERO VALUE
AIRLINE CHANGE/CANCELLATION FEES MAY APPLY.

Agency registration

TPS/GST-723782728 RT 0001



Your Direct Itinerary

DIRECT TRAVEL
9929-108TH STREET NW
EDMONTON AB T5K 1G8
1-833-692-4120

ALBERTA HEALTH SERVICES
10030 107 STREET
EDMONTON AB Z/T5H3E4

Agency reference: [REDACTED]

Agent name: [REDACTED]

Traveler name

Client reference

STACY GREENING

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Itinerary summary

	From / To	Flight / Provider	Departure / Arrival	
Flight	Thu. Jan. 15, 2026 Calgary(YYC) - Edmonton(YEG)	Westjet [REDACTED]	4:15 p.m.- 5:19 p.m.	Check in

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- [Canadian Government Travel Advisories](#)
- [Airport & Flight Status](#)
- [Weather](#)

	Calgary Calgary (YYC)	Edmonton Edmonton (YEG)
Departure	Thu. Jan. 15, 2026 4:15 p.m.	Arrival Thu. Jan. 15, 2026 5:19 p.m.
Departure terminal		Arrival terminal
Class	Economy/Coach Discounted(B)	Seat
Status	Confirmed	Airline check-in ID [REDACTED]
Special requests		Frequent traveler
Equipment	Boeing 737-700	Duration/ Meal service 01:04/No meal service
eTicket	[REDACTED]	

Invoice/Ticket information for STACY GREENING

Ticket: Westjet [REDACTED] Invoice: [REDACTED]
Base: CAD370.54
Other tax: CAD72.46
GST/HST tax: CAD0.00
QST tax: CAD0.00

Amount: CAD443.00

Payment: CA XXXXXXXXXXXX [REDACTED] Issue date: 06-Jan.-2026

Total invoiced amount: CAD443.00

Balance due: CAD0.00

General remarks

AIRFARES ARE NOT GUARANTEED UNTIL TICKETED
AIRLINES RECOMMEND CHECKING IN 2 HOURS PRIOR TO FLIGHT.
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BE MADE PRIOR TO DEPARTURE OR TICKET WILL HAVE ZERO VALUE
AIRLINE CHANGE/CANCELLATION FEES MAY APPLY.

Agency registration

TPS/GST-723782728 RT 0001