

**ALBERTA HEALTH SERVICES  
BOARD MEMBER REMUNERATION AND EXPENSE CLAIM**

FOR MONTH OF: JULY, 2008

NAME: Pierre Crevolin  
 ADDRESS: \_\_\_\_\_  
 TOWN: \_\_\_\_\_  
 POSTAL CODE: \_\_\_\_\_ PHONE #: \_\_\_\_\_ Non-Responsive

DATE	DEPART/ARRIVE TIMES	DESCRIPTION (include purpose of trip, mode of travel, starting point, details of expenditure)	PRIVATE CAR (KM)	MEALS				LODGING (ROOM)	PARKING	OTHER (ITEMIZE)	
				B	L	D	AMOUNT				
July 4	12:00-1:00	Meeting Don Sieben			✓		30 <sup>67</sup>		7 <sup>80</sup>		
July 4	8:00-9:30	Meeting Neil Wilkinson			✓		32 <sup>00</sup>				
July 7	8:30-12:30	Committee of the whole							29 <sup>40</sup>		
	1:00-2:30	Caucus			✓		35 <sup>00</sup>				
July 8	10:30-11:30	Committee of the whole			✓		13 <sup>75</sup>				
	11:30-12:30	Board Meeting	851								
July 22	10:00-12:15	Faith Based Meeting							15 <sup>00</sup>		
July 15	12:00-1:30	Meeting Ken Hughes							8 <sup>00</sup>		
July 29	4:15-5:30	Faith based Meeting							10 <sup>00</sup>		
			Non-Responsive								
<b>FINAL TOTALS</b>							<sup>B</sup> 111 <sup>C</sup> 42		<sup>D</sup> 69 <sup>E</sup> 90		

KILOMETRES CLAIM			Description	Codina	Non-Responsive Amount
RATE	KM	AMOUNT			
50.5¢	851	<sup>A</sup> 429 <sup>B</sup> 76 ✓	BOARD TRAVEL (A+ B+ C+ D)	49011.7111030 <sup>C</sup> 10.6220000	611 <sup>D</sup> 08
			OTHER (F)		
<b>TOTAL AMOUNT</b> 51901.414100000					

CLAIMANT SIGNATURE <u>Pierre Crevolin</u> DATE SUBMITTED <u>July 31, 2008</u>	APPROVAL SIGNATURE <u>[Signature]</u> DATE APPROVED <u>August 6/08</u>	Non-Responsive breakfast \$9.20 meals lunch \$11.60 dinner \$20.75 Lodging per night \$20.15 Per diem 24-hour \$7.35
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For payment please submit to the AHSB Office: 10101 Southport Road SW, Calgary, AB. T2W 3N2, Attention: Patti Grier

APPLICANT COPY

ROSE & CROWN  
10235 101ST STREET  
EDMONTON AB

s.17(1), 17(4)(e.1)

CARD \*\*\*\*\*  
CARD TYPE AMEX  
DATE 2008/07/04  
TIME 17:12:30:20  
RECEIPT NUMBER  
306636714-001-044-004-0

PURCHASE  
AMOUNT \$26.17  
TIP \$4.50  
TOTAL-CAD

**\$30.67**

APPROVED

AUTH# 74 00-025

THANK YOU

CARDHOLDER COPY

Best Copy Possible

TICKET VOID IF RE-SOLD  
IMPARK  
EDMONTON  
LOT 004  
HOURLY PERMIT  
impark  
Purchase Time  
2018 4:00:00

price \$30.67  
Card: AMEX 1004  
Auth: 74  
EXPIRATION TIME

JUL 29 2008  
6:03 PM Tue

This is your receipt  
and proof of purchase

impark

Radisson Hotel Edmonton South  
4440 Gateway Blvd.  
Edmonton, AB  
(780) 437-6010

Server: Siew 07/04/20  
Table 430 9:31  
Guests: 2 300  
Order Type: Order  
Area: Atrium Cafe

Express Breakfast 9.  
Egg Beater w/Gr 1.  
Two Eggs 4.  
Juice 3.  
Coffee (2 @2.50) 5.

Sub Total 24.1  
Tax 1.1  
Total 25.1

Balance Due 25.81

s.17(1), 17(4)(e.1)

Room# :

Print Name \_\_\_\_\_

Tip :

= Total:

X \_\_\_\_\_

GST# 84420 30/5 RT0001

s.17(1), 17(4)(e.1)

CARD \*\*\*\*\*  
CARD TYPE AMEX  
DATE 2008/07/07  
TIME 3526 18:44:03  
CLERK ID 3  
RECEIPT NUMBER  
S30754867-001-054-041-0

PRE-AUTHORIZATION  
AMOUNT \$30.42

TIP

TOTAL-CAD

APPROVED

AUTH# 88 00-025

THANK YOU

CARDHOLDER COPY

TICKET VO

impark

UP ON DASH

IMPERIAL PARKING  
PHONE 299-7275  
DAILY PARKER

TICKET VOID IF RE-SOLD

Meter: LOT 197  
Trans: 00067649  
Time: 8:01A JUL 07  
To park & pay by phone  
PLEASE CALL 388-7275  
Price: \$30.67  
GST Included  
Card: \*\*\*\*\*

Expires:

PLACE THIS SIDE UP ON DASH

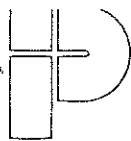
6:00PM MON  
JUL 07 2008

IF RE-SOLD

INSTRUCTIONS ON BACK  
GST RES # R102466000  
www.impark.com  
www.imparkwireless.com

PLACE THIS SIDE

APPLICANT COPY



impark  
PH: 420-1976

Hourly Parking

Meter: LOT 237  
Trans: 027784  
Time: 11:26A JUL 15  
Price: \$ 8.00  
Card:  
Exp.:

s.17(1), 17(4)(e.1)  
1:26PM TUE  
JUL 15 08



INSTRUCTIONS ON BACK

CRAIG WAYSTATION  
BOX 3400  
CAMPORE s.17(1), 17(4)(e.1)

CARD NUMBER	
EXPIRY DATE	
CARD TYPE	AMEX 3055
DATE/TIME	2008/07/08 08:26:24
RECEIPT NUMBER	98019101A-021-010
PURCHASE AMOUNT	\$11.75
TIP	\$2.00
TOTAL AMOUNT	\$13.75

00 APPROVED 025 AUTH. # 85  
THANK YOU

CARDHOLDER WILL PAY TOTAL AMOUNT SHOWN  
TO CARD ISSUER ACCORDING TO CARDHOLDER  
AGREEMENT.

*Pierre Crevolin*  
PIERRE CREVOLIN

TICKET VOID IF RE-SOLD

IMPARK TERMINATION  
LOT 001  
HOURLY PERMIT  
impark  
JUL 22 9:47AM

Card: VISA 2529

EXPIRATION TIME:  
Jul 22 2008  
2:47PM Tue

This is your receipt  
and proof of purchase

Best Copy Possible  
impark

PLACE THIS SIDE UP ON DASH

PLACE THIS SIDE UP

IT VOID IF RE-SOLD

**ALBERTA HEALTH SERVICES BOARD  
BOARD MEMBER HONORARIUM AND EXPENSE CLAIM**

FOR MONTH OF: JUNE, 2008

NAME: PIERRE CLEVOUN

ADDRESS: \_\_\_\_\_

s.17(1), 17(4)(g)(i)

TOWN: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

PHONE #: \_\_\_\_\_

Non-Responsive

DATE	DEPART/ARRIVE TIMES	DESCRIPTION (include purpose of trip, mode of travel, starting point, details of expenditure)	PRIVATE CAR (KM)	MEALS				LODGING (ROOM)	PARKING	OTHER (ITEMIZE)
				B	L	D	AMOUNT			
June 6	11:00-1:00	Mtg - Ray Block						12 <sup>25</sup>		
June 10	11:00-2:00	CAHITAS AGM						27 <sup>30</sup>		
June 12	11:00-1:00	Mtg - DM/Hughes/etc.						15 <sup>00</sup>		
June 17	7:30-5:30	Board Meeting						17 <sup>00</sup>		
Non-Responsive										
June 17	6:00-10:00	Dinner Pat Dumelle						4 <sup>00</sup>		
June 24	9:00-5:00	Orientation AHSA, etc.						23 <sup>00</sup>		
June 25	12:30-3:30	Committee of the Whole						24 <sup>00</sup>		
June 25	5:00-11:00	Capital Health Board Reception						8 <sup>00</sup>		
Non-Responsive										
<b>FINAL TOTALS</b>								<b>130<sup>55</sup></b>		

KILOMETRES CLAIM			Description	Coding	Non-Responsive Amount
RATE	KM	AMOUNT			
46¢	—	A —	BOARD TRAVEL (A+ B+ C+ D)	49011.711103010.6220000	130 <sup>55</sup>
			OTHER (F)		
<b>TOTAL AMOUNT</b>					Non-Responsive

CLAIMANT SIGNATURE: Pierre Clevoun  
DATE SUBMITTED: July 1, 2008

APPROVAL SIGNATURE: [Signature]  
DATE APPROVED: July 23, 2008

meals	breakfast	\$9.20
	lunch	\$11.60
	dinner	\$20.75
Lodging per night		\$20.15
Per diem 24-hour		\$7.35

# APPLICANT COPY

the westin edmonton  
 10135 100th street edmonton, alberta T5J ON7 canada  
 phone 780.426.3636 fax 780.428.1454  
 westin.com/edmonton

guest

travel agent/charge to

Jean Pierre Crevolin

room 0.00  
 rate 1  
 no. pers. 277333 A  
 folio 1  
 page 10-JUN-08  
 arrive 10-JUN-08  
 depart VI  
 payment

s.17(1), 17(4)(g)(i)

Date	Description	Charges/Debit
10-JUN-08	6/10/08	27.30
10-JUN-08	6/10/08	Tax GST 1.30
10-JUN-08	VI	27.30-
Balance Due		0.00

**EXPENSE REPORT SUMMARY**

Date	Room	GST	Tour Levy	Food\Bev	Phone	Other	Total
10-JUN-08	0.00	0.00	0.00	0.00	0.00	27.30	27.30
Total	0.00	0.00	0.00	0.00	0.00	27.30	27.30

Date	Payment
10-JUN-08	27.30-
Total	27.30-

Thank you for choosing Starwood Hotels. We look forward to welcoming you back soon!

**GST Summary:**

GST Room Revenue: 0.00  
 GST Food and Beverage: 0.00  
 GST Telephone Revenue: 0.00  
 GST Other: 0.00

The Westin Edmonton GST# 861336493RT0005

I agree to remain personally liable for the payment of this account if the corporation or other third party billed fails to pay part or all of these charges.

signature \_\_\_\_\_

As a Starwood Preferred Guest, you could have earned 0 Starpoints for this visit. Please provide your member number or enroll today.

Jean Pierré Crevolin  
 FOLIO 277333 10-JUN-08

TICKET VOID IF RE-SOLD

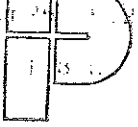
impark

IMPARK EDMONTON

LOT 004

OVERNIGHT PERMIT

Best Copy Possible



EXPIRATION TIME:  
Jun 18 08  
6:00AM THU

This is your receipt and proof of purchase

IDE UP ON DASH

PLACE THIS SIDE UP ON DASH

PLU

TICKET VOID

impark

IMPARK EDMONTON

LOT 004

HOURLY PERMIT

Meter: 020004...

Trans: 013400

Purchase Time:

JUN 12 11:00 AM

Price: \$17.00

Card: 4100 2529

Auth: 017190

EXPIRATION TIME:

Jun 18 08

2:01PM THU

This is your receipt and proof of purchase

Best Copy Possible

PLACE THIS SIDE UP ON DASH

PLU

H

PLACE THIS SIDE UP ON E

IMPERIAL PARKING  
PH: 420-1976

Early Bird

Meter: LOT 237

Trans: 002092

Time: JUN 17 08

Price: \$17.00

Card:

Exp.:

Expires:

s.17(1), 17(4)(e.1)

6:00PM TUE  
JUN 17 08

INSTRUCTIONS ON BACK

IF RE-SOLD

PLACE THIS SIDE

TICKET VOID IF RE-SOLD



IMPARK EDMONTON

impark  
DAY PERMIT

Meter: 02000101

Trans: 009921

Purchase Time:

Jun 25 12:45PM

s.17(1), 17(4)(e.1)

Price: \$24.00

Card: AMEX

EXPIRATION TIME:

Jun 25 2008

5:00PM Wed

This is your receipt and proof of purchase

CE THIS SIDE UP ON DASH

PLACE THIS SIDE UP ON DASH

TICKET VOID IF RE-SOLD

STD PARK-MANULIFE PLAC  
10100-101ST STREET T5J3S4  
EDMONTON AB  
932031463710

PURCHASE

6-24-2008 16:00: s.17(1), 17(4)(e.1)

cct # \*\*\*\*\*

Exp Date \*\*/\*\* Card Type  
ame: PIERRE CREVOI

race # 520026

FS2011333201

uth # 28 RRN 001151

total \$23.00

Customer copy

s.17(1), 17(4)(e.1)

LET VOID IF RE-SOLD

6:00AM WED  
JUN 18 08  
impark

FACE THIS SIDE UP ON

TICKET VOID IF RE-SOLD

IMPERIAL PARKING  
PHONE 420-1976  
EVENING PARKER  
impark

408  
PLACE THIS SIDE UP ON DASH



**Memorandum**  
*Office of the Board*

**TO:** Corrine Moroz  
**FROM:** Lou Decoste  
**DATE:** JULY 30, 2008  
**SUBJECT:** Pierre Crevolin's Honorarium and Expenses

Please find attached the Honorarium and Expense claims for Pierre Crevolin for June 2008.

You can reach me at 1-866-943-1120 or by email at [lou.decoste@calgaryhealthregion.ca](mailto:lou.decoste@calgaryhealthregion.ca)

Thank you,

*Kayla Ricson*  
for Lou DeCoste

Attachments

*Hi Corrine if  
this could be  
done as quickly as  
possible too that  
would be appreciated*

**ALBERTA HEALTH SERVICES BOARD  
BOARD MEMBER HONORARIUM AND EXPENSE CLAIM**

FOR MONTH OF: May 15 - 31, 2008

NAME: PIERRE CLEVOLIN

ADDRESS: \_\_\_\_\_  
s.17(1), 17(4)(g)(i)

TOWN: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Non-Responsive

DATE	DEPART/ ARRIVE TIMES	DESCRIPTION <small>(include purpose of trip, mode of travel, starting point, details of expenditure)</small>	PRIVATE CAR (KM)	MEALS				LODGING (ROOM)	PARKING	OTHER (ITEMIZE)
				B	L	D	AMOUNT			
May 16	11:00-2:00	Board Orientation	635						26 <sup>00</sup>	
May 27	7:00-8:30	Mtg - Don Schurmann		✓			36.38			
			Non-Responsive							
May 30	10:00-3:30	Board Mtg	321							
			Non-Responsive							
<b>FINAL TOTALS</b>			<b>956</b>				<b>36.38</b>		<b>26<sup>00</sup></b>	

KILOMETRES CLAIM			Description	Coding	Non-Responsive Amount
RATE	KM	AMOUNT			
46¢	956	<sup>A</sup> 439.76	BOARD TRAVEL (A+ B+ C+ D)	49011.711103010.6220000	502.14
			OTHER (F)		
<b>TOTAL AMOUNT</b>					Non-Responsive

CLAIMANT SIGNATURE: P. Clevolin  
DATE SUBMITTED: July 7<sup>th</sup>, 2008

APPROVAL SIGNATURE: [Signature]  
DATE APPROVED: July 14, 2008

meals	breakfast	\$9.20
	lunch	\$11.60
	dinner	\$20.75
Lodging per night		\$20.15
Per diem 24-hour		\$7.35

Honoraria over...

[Signature]  
410



APPLICANT COPY

s.17(1), 17(4)(e.1)

A B C COUNTRY RESTAURANT  
448E GATEWAY BLVD  
EDMONTON AB

CARD \*\*\*\*\*  
CARD TYPE VISA  
DATE 2008/05/27  
TIME 0605 08:36:29  
RECEIPT NUMBER  
S06633689-001-001-425-0

PURCHASE  
AMOUNT \$30.38  
TIP \$6.00  
TOTAL-CAD  
**\$36.38**

APPROVED  
AUTH# 088829 01-027  
THANK

CARDHOLDER COPY

TICKET VOID IF RE-SOLD

PLACE THIS SIDE UP ON DASH



Meter: LOT 034

s.17(1), 17(4)(e.1)

Trans: 00000299  
Time: 10:12 MAY 15  
To park & pay by phone  
call 727-7276  
Price: \$26.00  
Card:  
Expires:

TICKET VOID IF RE-SOLD

PLA HIS SIDE UP ON DASH



INSTRUCTIONS ON BACK  
GET REG # R102466000  
www.impark.com  
www.imparkireless.com